



Revenues & Expenditures

by Type

Revenue by Type

## Implementing a Uniform Chart of Accounts in Public Health: Evidence from a Pilot Study with 20 State and Local Health Departments

### Background: the Uniform Chart of Accounts

Develop a nationwide Uniform Chart of Accounts (COA) for public health agencies to measure investment and spending to:

- 1. Make comparisons across space & time
- 2. Identify drivers in cost variation of public health services
- Explain how targeted investments affect service costs

#### **Research Objective**

To develop and test the feasibility of a standardized system for financial information for state and local health departments

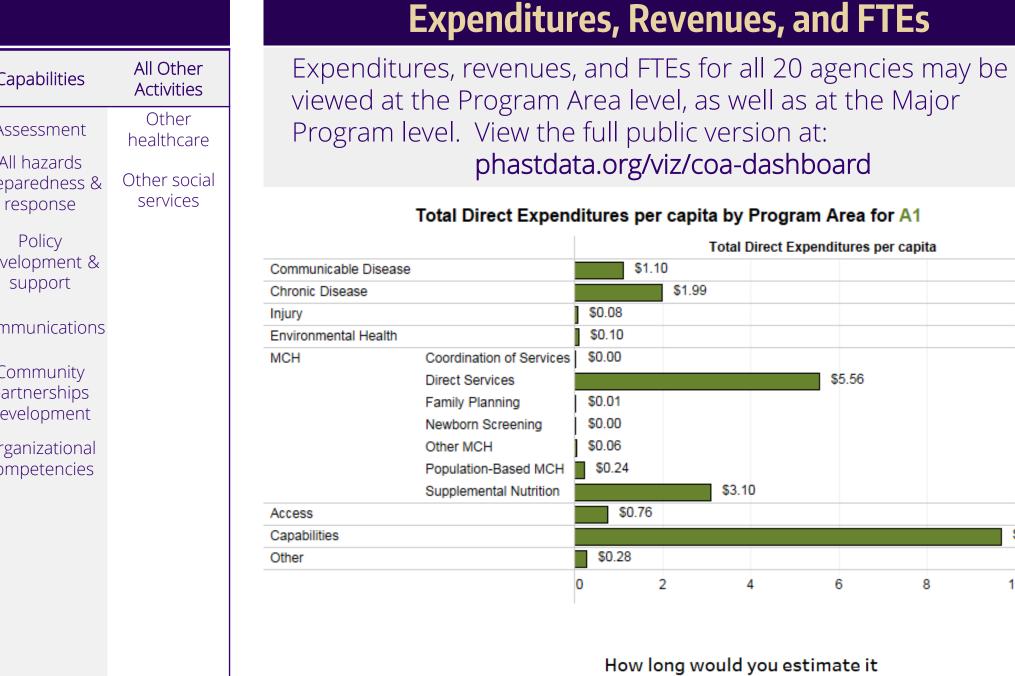
#### **Developing and Implementing the Uniform COA**

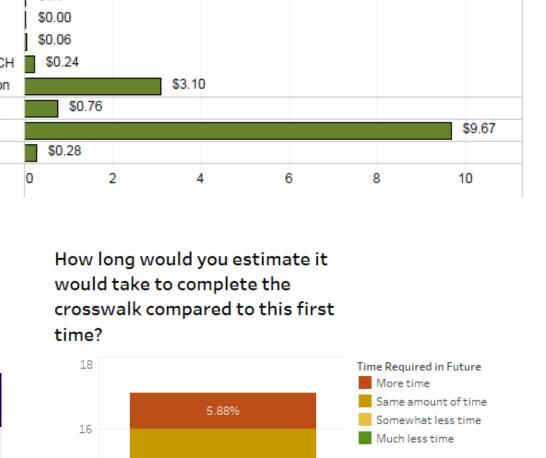
- 4 state and 16 local health departments participated
- 20 participating agencies collaboratively refined and finalized the uniform COA
- Crosswalks constructed and data collected for all 20 agencies
- Program activities effort estimation tool developed and completed for 16 of the 20 agencies
- Feasibility evaluated with feedback from 17 of the 20 agencies

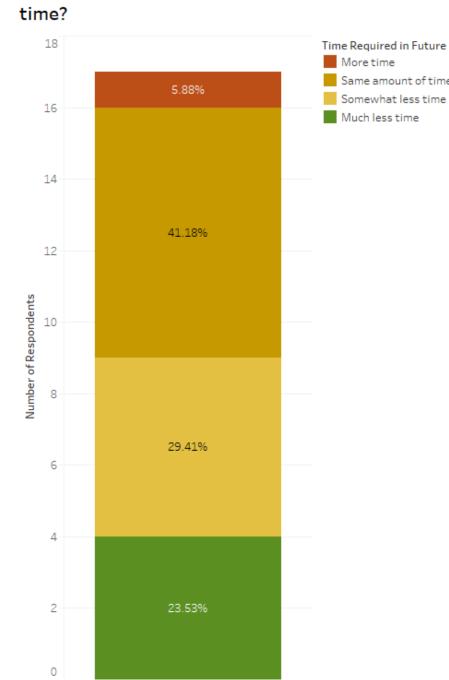
# **Participating Agencies** Missouri West Virginia

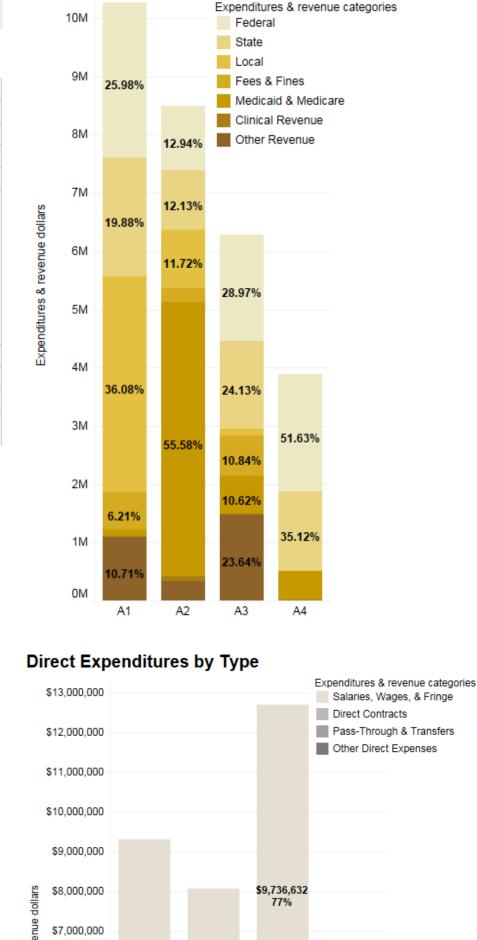
The Uniform Chart of Accounts							
Communicable Disease	Chronic Disease	Injury Prevention	Environmental Health	Maternal-Child & Family Health	Access& Linkage	Capabilities	All Other Activities
HIV	Tobacco	Falls	Food safety	Family planning	Health care licensing	Assessment	Other healthcare
STD	Cancer	Motor vehicle	Water	Newborn screening	Eligibility determination	All hazards preparedness & response	Other social services
ТВ	Obesity	Firearms	Air	Coordination of services	Building Health Care Capacity	Policy development & support	
Hepatitis	Cardiovascular	Occupational injury	Sewerage	Direct Services	Other access & linkage activities		
Immunization	Asthma	Intentional injuries	Vector borne	Supplemental nutrition		Community partnerships development	
Communicable disease epidemiology	Diabetes	Unintentional injuries	Solid waste	Population- based maternal- child health		Organizational competencies	
Other communicable disease activities	Other chronic disease activities	Substance abuse	Lead	Other maternal- child & family activities			
		Other injury activities	Fish & shellfish Toxic substance				
			assessment				
			Other environmental				

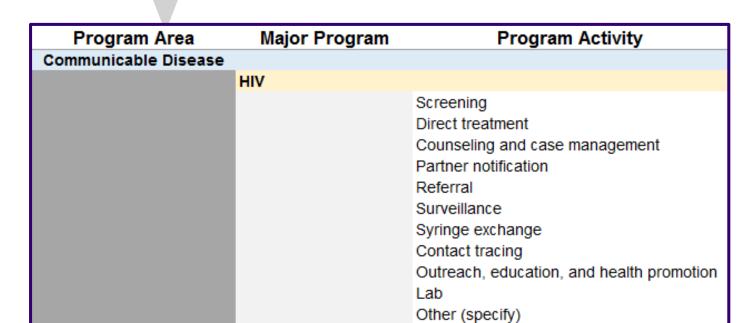
health activities

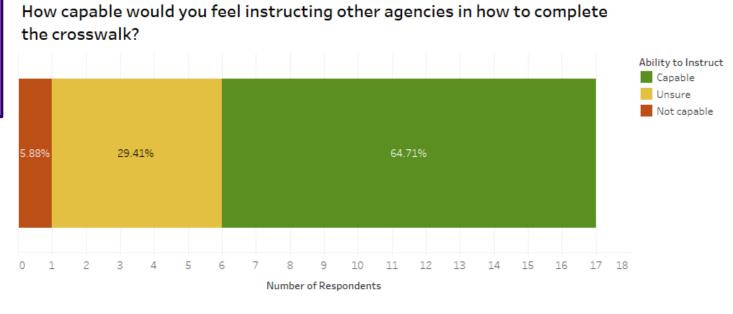












**Feasibility** 

• 53% would need less time to complete the crosswalk

• 76% were able to at least partially automate the

• 65% feel capable to instruct others, showing

would be possible without undue difficulty

• 65% think automating the crosswalk in the future

understanding of the crosswalk

crosswalk

a second time

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\$3,000,000