
Expanding the LPHA STD Workforce New Program Element 10 Funding

Conference of Local Health Officials (CLHO) Meeting
December 16, 2021



HIV/STD/TB SECTION
Public Health Division

Funding for HIV/STD DIS in Oregon

- New multi-year funding through the American Rescue Plan Act (ARPA).
- Administered through STD cooperative agreements between CDC and states
- Roughly 2.3 million for Oregon annually through December 2025.
- Focus is on hiring, training, and retaining Disease Intervention Specialists (DIS).
- Money is supposed to be used to hire new DIS.

Funding for HIV/STD DIS in Oregon

- DIS primary focus on HIV and STDs but can also be used for TB, COVID-19, and other infectious diseases.
- Estimate average salary of a DIS in Oregon is ~\$80,000 with fringe.
- OHA plans to hire a new position to serve as a training and TA resource and program liaison for this work.

Funding for HIV/STD DIS in Oregon

- Money will go through Program Element 10 (STD).
- Anticipate funding will begin in early 2022.
- All LPHAs not funded under EISO are eligible.
- Propose using Public Health Modernization funding formula to allocate funds.
- Cannot be used for clinical services
 - OHA will provide some in-kind support for lab and self-collected testing options.
- Propose keeping syphilis fee-for-service payments for all LPHAs but removing from PE language.

Funding for HIV/STD DIS in Oregon

	% of HIV, syphilis, gonorrhea disease burden 2018-Jun 2021	% of funds received from HIV/STD Prevention 2018-2021
EISO counties	87%	99%
All other counties	13%	1%

Public Health Modernization LPHA Funding Formula

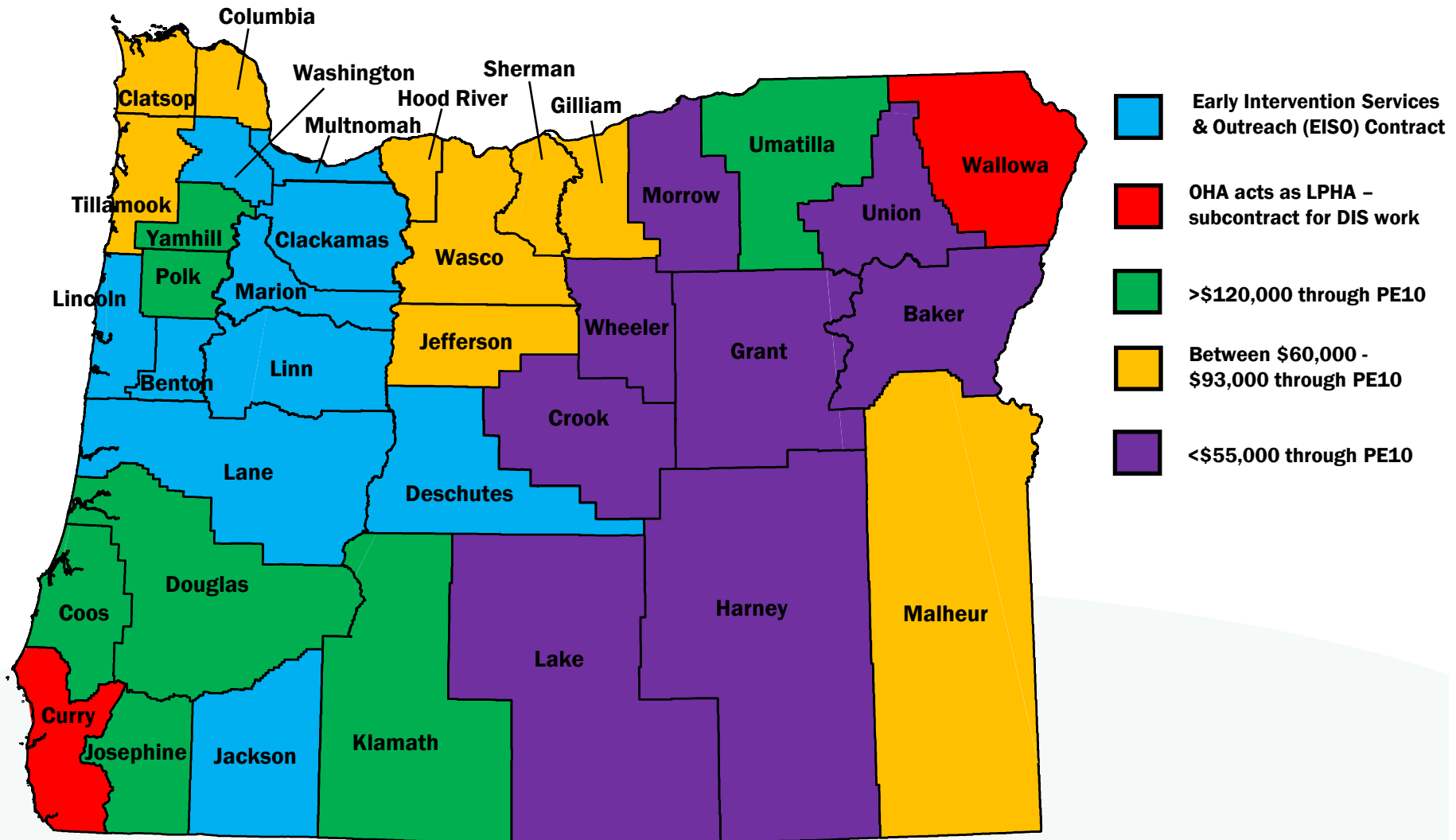
Funding Formula update: March 2021

CDC STD DIS Workforce funding, active 1/1/2022-12/31/2022

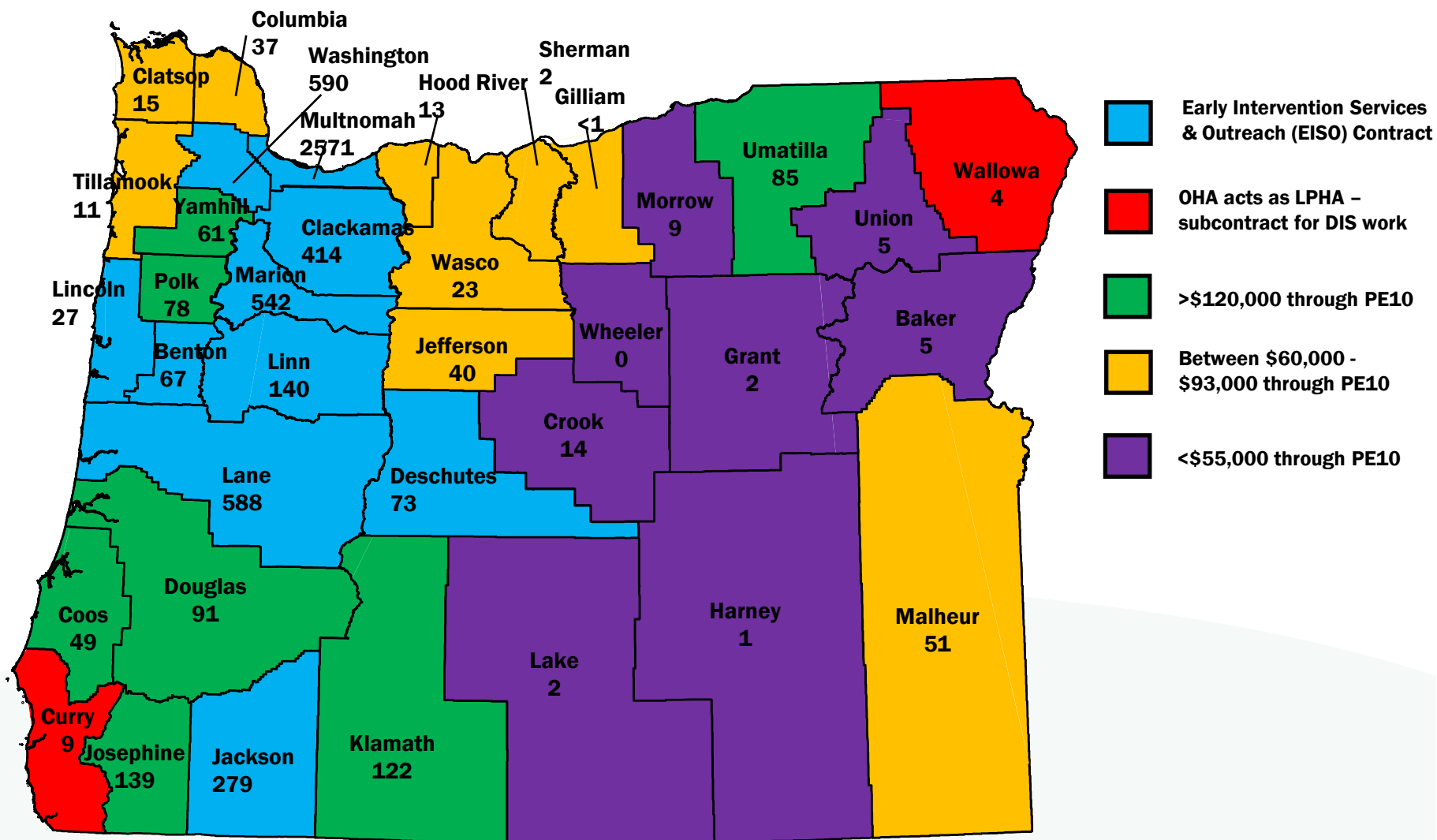
Total funds available to LPHAs*

	Total county allocation				
County Group	Total Award	Award Percentage	% of Total Population	Award Per Capita	Avg Award Per Capita
Wheeler	\$ 13,461	0.7%	0.2%	\$ 9.35	
Harney	\$ 21,394	1.1%	0.8%	\$ 2.94	
Grant	\$ 23,295	1.2%	0.8%	\$ 3.18	
Lake	\$ 24,927	1.2%	0.9%	\$ 3.09	
Morrow	\$ 47,266	2.4%	1.4%	\$ 3.69	
Baker	\$ 35,120	1.8%	1.8%	\$ 2.08	\$ 3.07
Crook	\$ 52,904	2.6%	2.5%	\$ 2.26	
Jefferson	\$ 74,546	3.7%	2.6%	\$ 3.09	
Hood River	\$ 81,673	4.1%	2.7%	\$ 3.19	
Tillamook	\$ 61,946	3.1%	2.8%	\$ 2.33	
Union	\$ 51,621	2.6%	2.9%	\$ 1.92	
Gilliam, Sherman, Wasco	\$ 93,048	4.7%	3.3%	\$ 2.99	
Malheur	\$ 89,686	4.5%	3.4%	\$ 2.79	
Clatsop	\$ 74,231	3.7%	4.2%	\$ 1.88	
Columbia	\$ 90,553	4.5%	5.7%	\$ 1.70	
Coos	\$ 121,409	6.1%	6.7%	\$ 1.92	
Klamath	\$ 136,094	6.8%	7.2%	\$ 2.00	\$ 2.24
Umatilla	\$ 202,791	10.1%	8.7%	\$ 2.49	
Polk	\$ 151,254	7.6%	8.9%	\$ 1.80	
Josephine	\$ 160,963	8.0%	9.2%	\$ 1.86	
Yamhill	\$ 195,109	9.8%	11.5%	\$ 1.80	
Douglas	\$ 196,710	9.8%	12.0%	\$ 1.75	\$ 1.92
Total	\$ 2,000,000	100.0%	100.0%	\$ 2.13	\$ 2.13

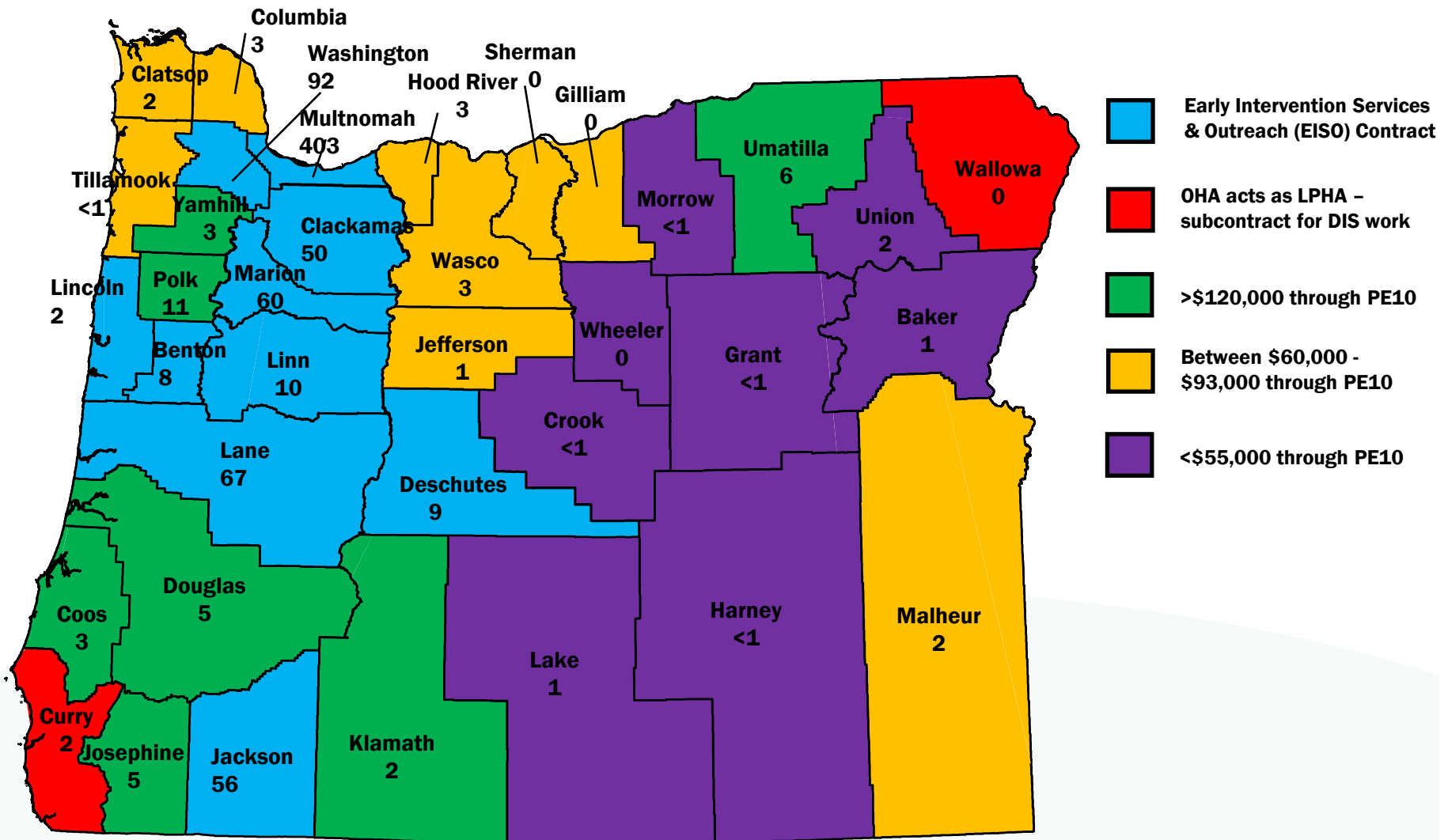
Funding for HIV/STD DIS in Oregon



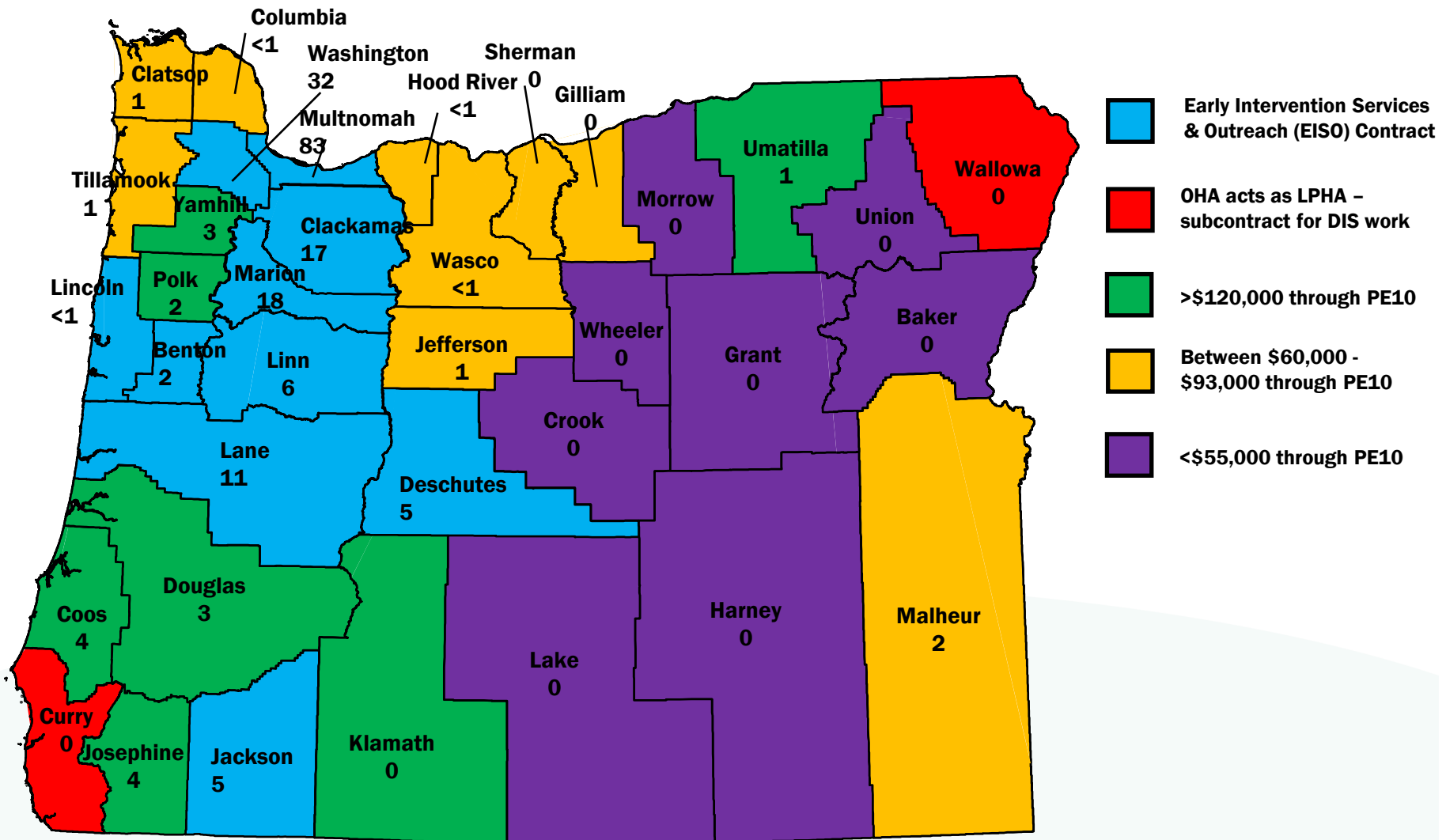
Average gonorrhea cases, 2018-2020



Average early syphilis cases, 2018-2020



Average HIV cases, 2018-2020



Consultation Process

- Initial presentation and Q&A at November 12 CLHO-CD meeting
- Two informal consultations with groups of LPHA Administrators
 - Eastern Oregon on November 23
 - Rural counties on December 1
- Solicited additional feedback by email
- Approval from CLHO-CD at December 10 meeting

Feedback Received

- Widespread support/appreciation that every LPHA will now receive financial resources for STD work with addition of PE 10 funds.
- Some interest in regionalizing but in small pairings with like counties and with a minimum amount of funding/FTE in every county to ensure adequate resources to contribute to/benefit from work.
- Some counties have expressed they may not need all funds and would be interested in returning other funds for use by smaller counties and to support regional work.
- Desire to use funds to support epi work.
- Interest in how this formula may change in future years in PHAB adjusts their PH Modernization funding formula.

Next Steps

- If approved, eligible LPHAs will be given a funding decision form to indicate how they wish to use funds.
- Budget templates will be distributed late December/early January.
- CDC is requiring prior approval of all the sub-award budgets before releasing funds.
 - We hope to have funds distributed by March 2022.
- Preparing a suite of TA resources and planning for training for new DIS.

Thank you!