

Public Health Advisory Board

Recommendations for public health modernization \$5 million set-aside for 2025-27 biennium (draft for discussion)

Background and acknowledgements

OHA has held \$5 million from the 2025-27 investment in public health modernization to respond to federal funding losses. OHA has asked PHAB to provide recommendations for how these funds should be used.

This \$5 million was initially included within the community-based organization allocation in the legislatively approved budget.

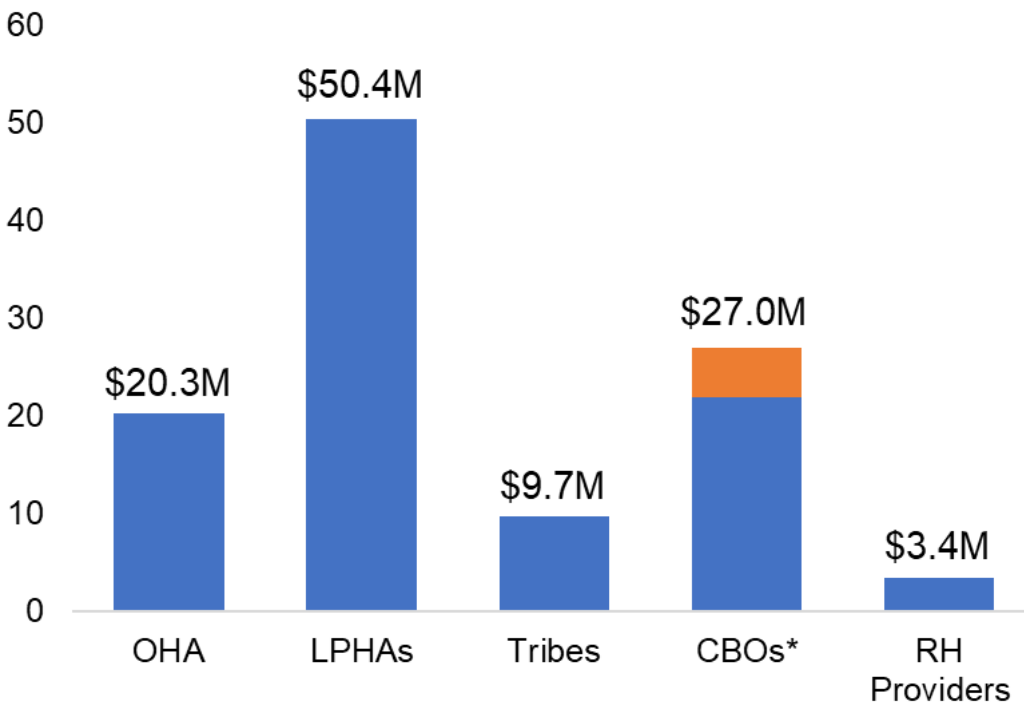
Governmental public health authorities hold statutory requirements to protect health and well-being of people in Oregon. Governmental public health has been and continues to be underfunded to fulfill these statutory requirements. The \$5 million set-aside is not intended to address this ongoing underfunding or loss of one-time supplemental COVID funding. These funds have been set aside to respond to immediate, unanticipated and known losses due to federal funding and policy changes across the governmental public health system (LPHAs, Tribes, OHA), if needed.

Any redirection of funds will have an impact on the public health system, including through potential reductions within the network of CBOs funded through OHA.

2025-27 public health modernization allocations by partner type

Total funding = \$112.2 million

Note: \$5M set-aside from CBO funding allocation highlighted in **orange** below.



* Funding allocation is used for direct grants to CBOs, training and technical assistance contracts that support CBOs, and mini grants administered by LPHAs to CBOs in areas of the state underrepresented by OHA's Public Health Equity Grant funding.

Criteria for recommendations to redirect funds

PHAB will use the criteria below to make recommendations on whether OHA should redirect some or all of the \$5 million set-aside.

1. There has been an unanticipated loss of federal funding that has resulted in reduced or eliminated funding for the governmental public health system or partners. This does not include loss of COVID funding.

2. Funding losses or reductions have caused an immediate gap in capacity for the governmental public health system to meet statutory requirements.
3. If redirected, funds would be used to maintain current service levels to the extent possible.
4. If redirected, funds would be used to maintain focus on public health system shared goals to improve health outcomes, as measured through public health accountability metrics.
5. If redirected, funding would be used to directly backfill losses in federal funding, including retaining existing workforce. Redirected funds should not be used to fill gaps more broadly and should have parameters in place for how funds are used.
6. Redirected funds will only be considered for losses or reductions of funds received by OHA and allocated to partners. These funds would not be used to offset funding losses outside of federal funds from OHA to partners. (i.e. loss of federal funds awarded directly to a county)
7. The impact of redirecting funds from CBOs has been assessed and acknowledged, including an estimate of reduction in the number of CBOs funded and potential county gaps that will occur as a result. The roles of CBOs as defined in the Working with Community-Based Organizations companion document should be considered before a decision is made.
8. When making recommendations, PHAB should consider whether the federal government finalized a budget or is working under a continuing resolution.

Recommendations and decision-making

The anticipated timeline for PHAB to discuss and make recommendations to reallocate funds is between October 2025-March 2026.

In making recommendations to OHA, PHAB will ensure that most or all of the criteria listed above have been met.

PHAB members will vote on recommendations.

If criteria are met and PHAB votes to approve recommendations to reallocate funds, final decisions will be made by OHA.

If criteria are not met or PHAB does not vote to approve recommendations, the \$5 million set aside will return to the CBO allocation for 2025-27.

PHAB discussions and recommendations will be used to inform future funding strategies for our public health system, as we move forward.