

PHAB Incentives and Funding Subcommittee

County public health investment exclusions for state matching funds

May 14, 2018

Background

[ORS 431.380\(1\)\(b\)](#) requires Oregon Health Authority (OHA) to incorporate into the local public health funding formula a method for awarding matching funds to a local public health authority that invests in local public health activities and services above the base amount. As the legislature increases state general funds for the public health system through implementation of public health modernization, the intent of this requirement is to ensure that local investments are sustained or increased.

The Public Health Advisory Board's Incentives and Funding subcommittee has recommended that matching funds be incorporated into the local public health authority funding formula at or above the \$15 million level in the 2019-21 biennium. In order to award matching funds in the next biennium, it is necessary to develop reporting mechanisms and begin collecting baseline data in this biennium.

In March 2018, the Public Health Advisory Board recommended matching on all local county investments with some exclusions. PHAB's recommendations were based on the following:

- Supports each local public health authority to determine how county funds for local public health are used.
- Includes county in-kind and administrative investments.
- Is intended to reduce burden on LPHAs for expenditures tracking and reporting.

Exclusions

The following table lists categories, programs and services that would not be eligible for state matching funds. Excluded categories, programs and activities are those that primarily provide clinical services to individual clients or that are not included in the Public Health Modernization Manual.

Source data for exclusions: 2016 public health modernization assessment expenditures reporting guidance, and LPHA expenditures data reporting for FY17, Public Health Modernization Manual.

Category	Program or Activity (including but not limited to)
Client case management	<ul style="list-style-type: none">• Provision of Ryan White case management services
Clinical services	<ul style="list-style-type: none">• Reproductive health client services• Immunization clinics, including costs associated with providing immunizations at targeted community events*• Clinical support• Corrections health, including jail nurse

	<ul style="list-style-type: none"> • Individual dental services • Primary care services • Occupational health services
Other	<ul style="list-style-type: none"> • Medical examiner • Mental health services and addiction treatment • Provision of Emergency Medical Services • Refugee Resettlement Screening • Animal control/animal shelter
Any infrastructure, staff, supplies or other costs directly related to any of the above excluded items.	

*County funds used for immunization clinics to provide medical countermeasures during a public health emergency would be eligible for state matching funds. The definition for a public health emergency is included in [ORS 433.442](#).

Next steps and approximate timelines

OHA convenes technical advisory group for FY18 expenditures reporting	August/September 2018
OHA develops expenditures reporting tool	September/October 2018
LPHAs report FY18 expenditures data	November/December 2018
OHA analyzes and validates expenditures data	January through March 2019

Decisions about whether matching funds will be awarded in the 2019-21 biennium will be made once final funding levels are known at the end of the 2019 legislative session.