

Public Health Advisory Board (PHAB)
Incentives and Funding Subcommittee meeting minutes
November 8th, 2016
1:00-3:00 pm

Welcome and roll call

Meeting Chair: Silas Halloran-Steiner

PHAB members present: Alejandro Queral, Akiko Saito, Tricia Tillman, Jeff Luck

Oregon Health Authority (OHA) staff: Sara Beaudrault, Chris Curtis, Angela Rowland

Members of the public: Morgan Cowling

The October 18th PHAB Incentives and Funding meeting minutes were approved.

Debrief Oct 20th PHAB discussion

Silas led a discussion to debrief the October 20th PHAB discussion with Representative Greenlick and Senator Monnes Anderson. One stand out was that Representative Greenlick stated his ongoing support for public health modernization. While Representative Greenlick and Senator Monnes Anderson have continued to think about implementation occurring by county waves, PHAB members explained the rationale for implementing by foundational capabilities and programs across the entire public health system in terms of equity, ethics and logistics for how to operationalize. Subcommittee members agreed to continue developing a funding formula model that is in line with this implementation approach.

Jeff stated that Representative Greenlick encourages PHAB to develop a 10-year plan and acknowledge the investment that will be needed to fully implement public health modernization over the next 10 years.

Review data sources for funding formula indicators

Subcommittee members held a consensus around including the following six indicators in the funding formula model: county population, burden of disease, health status, racial/ethnic diversity, limited English proficiency, and poverty.

OHA staff have compiled a list of data sources for county population and the other funding formula indicators. The subcommittee needs to determine if the funding formula should use Portland State University (PSU) population estimates or U.S. Census Bureau American Community Survey (ACS) data for county population.

The subcommittee agreed to use the PSU population estimates. Since the PSU estimates are not generated for race/ethnicity, limited English proficiency or poverty, ACS estimates will be used to determine a proportional percentage that will be applied to the PSU estimates. Subcommittee members requested that the subcommittee continue to explore options to account for projected population growth in the funding formula.

The poverty indicator is currently calculated from American Community Survey and looks at both children and adults living under the federal poverty level. It is a commonly used measure but doesn't factor in socioeconomic factors that directly impact poverty, like education or employment. Jeff recommended to review the supplemental poverty measure from the U.S. Census Bureau as a potential data source prior to the December meeting. This measure takes into account local variations in housing costs, transfer payments, and other governmental programs. It is not known whether this is calculated at the county level. Subcommittee members agreed to look at this measure at the December meeting. If these data are not available at the county level the subcommittee will continue to discuss alternative poverty measures that look at income inequality or educational attainment at the December meeting.

Subcommittee members questioned whether the Behavioral Risk Factor Surveillance System survey (BRFSS) has an acceptable reach into communities of color to be used as a data source for health status. Generally subcommittee members did not feel that BRFSS is adequate, although alternative data sources were not proposed.

Action Item: Explore U.S. Census Bureau supplemental poverty measure. If reported at the county level, bring county rates to the December meeting, to compare with income inequality.

Action Item: Subcommittee members and OHA staff should identify alternative data sources for the health status indicator prior to the December meeting.

Discuss funding formula models and make initial recommendations

OHA staff updated the three funding formula models after the October meeting.

Silas recommends to narrow the model options by removing model #1 (Equal base; county population; five indicators tied to county population) as it doesn't seem too modern. Model 2 and 3 differ in the structure for base/floor payments (equal across all counties or tiered).

Tricia recommends comparing model #1 and model #3, as model #2 does not represent the needs of large and extra-large counties. Model #3 seems to best address the needs across the system that have been voiced.

Sara reviewed a spreadsheet showing per capita resource gaps identified in the public health modernization assessment. Per capita gaps were displayed for foundational capabilities and programs, and for county size bands.

Jeff stated that it is important to compare per capita gaps with the funding formula to make sure the formula matches the solution pattern in the models.

Tricia stated that the assessment looked at capacity and expertise but not burden of disease. She stated that overall health and burden of disease is a small portion of the measure in the funding formula. ,

A motion was made to recommend model #3 (Model 1, Variation 2 – Tiered base; five indicators tied to county population) to PHAB at the November 17 meeting. Subcommittee members expressed agreement; this is the most equitable approach. This motion was approved.

Action Item: Bring subcommittee recommendation of model #3 (Model 1, Variation 2 – Tiered base; five indicators tied to county population) to the Nov 17th PHAB.

Subcommittee Business

Akiko volunteered to report out at the Nov 17th PHAB meeting and will chair the next subcommittee meeting. Subcommittee members requested that OHA staff cross-reference questions that were asked at the October 20 PHAB meeting to identify whether any questions would remain unresolved with this funding formula.

Sara provided the Local Public Health Funding Formula section of the Statewide Modernization report for subcommittee feedback. The PHAB will review at the Nov 17th meeting.

- The baseline amount could include a health equity bullet.
- The report should explain that the subcommittee hasn't spent much time on state matching funds.
- Keep the baseline funding section a different color to indicate that this is where the subcommittee's work-to-date has focused.
- Describe alignment with the PHAB Accountability Metrics subcommittee.
- Summarize the model recommendation from the subcommittee.
- Performance based incentives for equitable public health services.
- Explain why the model ties the indicators to population.

Action Item: The subcommittee again requests a joint meeting with the Accountability Metrics subcommittee. This could be at the beginning of 2017. Incentives and Funding subcommittee members may join an upcoming accountability Metrics meeting.

Next subcommittee agenda item: Determine how to use this model for performance based incentives to provide equitable public health services.

Public Comment

Morgan Cowling, Executive Director of Coalition of Local Health Officials

Morgan appreciates that the PHAB has set a path for thoughtful deliberation on modernization. She remarked that it could pose a challenge to only provide one funding formula model. She is unable to determine if the incentives piece is for performance based metrics or structural in HB 3100. She encourages the subcommittee to incentivize different models through the funding formula. More outreach will be needed to local public health authorities to get their take on funding formula recommendations. She encourages the subcommittee to focus on the incentives work. She also encourages the subcommittee to continue to look at HB 3100 guidance on the ability of counties to invest in public health.