

Public Health Advisory Board (PHAB)
Incentives and Funding Subcommittee meeting minutes
May 9, 2017
1:00-2:00 pm

Welcome and roll call

Meeting Chair: Jeff Luck

PHAB members present: Diane Hoover, Jeff Luck, Akiko Saito

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

Members of the public: Channa Lindsay, Darren Yesser, Maria Tafolla, Kelly McDonald

February meeting minutes

The February 14th meeting minutes were not approved since a quorum was not present.

Proposal for role of Incentives and funding subcommittee

Meeting Goal: Review funding formula to confirm that funding formula principles remain intact at different funding levels.

HB 2310 passed out of the House and is now in the Ways and Means Committee. OHA Public Health Division (PHD) is developing a framework for how to align the scope of work for state and local public health departments with different funding levels. PHD is doing this planning work now so we are prepared for any funding outcome from the legislative session. More information will be provided at the May 18 Coalition of Local Health Officials (CLHO) and PHAB meetings, with additional work at the June meetings.

The subcommittee is being asked to finalize the funding formula, specifically to make recommendations on the floor funding component of the funding formula and to set a threshold for distributing funds to all local public health authorities (LPHAs) through the funding formula. This funding formula only addresses funding to LPHAs. It is understood that if the legislature provides funds to OHA for

public health modernization, the majority of funds will be allocated to LPHAs and a portion of funds will remain with OHA.

Funding Formula Floor

The subcommittee discussed the current funding formula at different funding levels as well as the set floor amount. The model developed by the subcommittee includes five floor tiers, one for each county size band. At the \$10 million funding level, tiers range from \$30,000 to \$90,000. In this model, floor payments total \$1.8 million.

Akiko noted that floor payments ensure stable funding. She commented that the CLHO Public Health Emergency Preparedness committee avoids reducing the floor when there are budget cuts in order to maintain staffing and stability. At funding levels above \$10 million, floor payments could be proportionally increased.

The subcommittee discussed whether the floor tier amounts are sufficient for extra small and small counties. Diane noted that in her experience working at smaller agencies, change can be implemented with fewer resources as agency leaders have more direct control over the agency. Jeff would like to hear feedback from additional PHAB members who represent small and extra small counties.

Minimum funding level for using the funding formula

Initial recommendation, to be discussed at May 18 PHAB meeting:

- If less than \$5M per year for LPHAs, direct all funds to pilot projects. Subcommittee members recommend considering that pilots from each size band are selected. Funds would not be distributed through the funding formula.
- If \$5M-\$10M per year, include floor payments at the levels set in the \$10M model (ranging from \$30,000-\$90,000, totaling \$1.8 million). All remaining funds would be used for pilots. Funds would not be distributed through the funding formula.
- If funds are equal to or above \$10M per year, funds would be distributed to all LPHAs through the funding formula.
- For annual LPHA funding above \$10M, floor payments would be proportionally increased.

Action Item: PHD will provide funding formula examples at different funding levels: \$5M, \$10M, and \$15M increasing floor payment proportionally. These will be reviewed at the May 18 PHAB meeting.

Subcommittee Business

Jeff will provide the subcommittee update at the next PHAB meeting on May 18, 2017.

Public Comment

No public testimony.