Public Health Modernization

\$50 million for health equity in 2023-2025

Oregon is a long-time leader in modernizing public health systems. When well-resourced and working together, people in Oregon can achieve better health outcomes for all. Looking forward, Oregon needs to continue to invest in an equity-centered, partner-based public health system so that everyone in Oregon can achieve their best health.

A \$50 million additional investment in 2023 will contribute to **long-term improvements to Oregon's public health system**, including:

- Regionally focused and culturally specific public health responses that save lives, prevent severe health outcomes and inequities, and save health care costs
- Statewide planning to achieve health equity in Oregon
- Statewide planning for a sustainable public health workforce
- Local communicable disease initiatives that protect community members at higher risk of communicable diseases
- Sustained local and emerging communicable disease expertise through cross-sector partnership, specifically in HIV and other sexually transmitted infections
- Strengthened cross-cultural relationships and partnerships among state and local governments and community-based organizations, collectively sharing power to meet individual community needs

This investment provides the opportunity to continue building an innovative, resilient and equitable public health system.

In fact, current and previous legislative investments in public health modernization better prepared Oregon's public health system to respond to the COVID-19 pandemic—while it simultaneously responded to the 2020 wildfire season, extreme heat and other emerging communicable diseases. What's more, during the pandemic, vaccination rates increased because of a temporary but vital investment of additional federal funds into Oregon's public health system, along with the investment in community partners to deliver vaccines in culturally responsive ways. While temporary and just one example of Oregon's leadership in public health, this demonstrates the power of partners working together and being well-resourced.

Partnership is important.

Communities across the state are partnering on a public health system that works for everyone. Oregon's public health system includes:

- State, local, and tribal public health authorities
- Community-based organizations (CBOs)
- Regional health equity coalitions
- Health care providers

- Faith-based institutions
- Schools
- Environmental agencies
- Partners from different sectors



What's next: We have more work to do to achieve health equity.

In 2016, the Oregon Health Authority's Public Health Division and every local public health authority in the state completed an assessment of their ability to provide critical governmental public health functions. The assessment included identifying the funds needed to achieve a sustainable, accountable and equity-focused public health system. The assessment found that these gaps still exist:

- In more than one third of Oregon communities, foundational public health programs like emergency preparedness and response are minimal or limited.
- In all geographic regions of Oregon, the largest gaps are in fulfilling responsibilities necessary to achieve health equity and cultural responsiveness.
- The current request for a \$50 million investment does not fully meet the need, but it is an important step: The assessment estimates we need \$210 million (in 2016 dollars) in additional funding in each two-year budget cycle to achieve a sustainable, accountable and equity-centered public health system. This is a conservative estimate because it does not include investments for federally recognized Tribes or a network of CBOs.

Why do these gaps matter?

Communities are healthy when everyone has the access and ability to achieve their greatest health. The COVID-19 pandemic showed how Oregon communities are all in this together when it comes to public health threats. Without sustaining and enhancing investments, Oregon's public health system will face additional gaps in its ability to:

- Respond to public health threats
- Address complex public health challenges
- Eliminate costly and harmful health inequities
- Maintain core infrastructure built over the last two years to support communities, including in the state's most rural and frontier regions

Please see the following pages for supplementary information on funding and priorities for additional investments.

For more information

Contact:

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Visit: healthoregon.org/modernization





Supplementary information on funding and priorities for a \$50 million investment in 2023-2025

\$50 million investment – Governor's Recommended Budget	
Local public health authorities	
Approximately \$10.2 million additional investment will keep local public health agencies (LPHAs) funded at current AY23 levels as ARPA COVID-19 public health workforce funds expire; funds include a limited pass-through to Multnomah County-Program Design & Evaluation Services for data and evaluation	\$16.95 million
Community-based organizations (CBOs)	\$16.95
Approximately \$6.2 million additional investment will keep the current network of CBOs funded at AY23 funding levels for a full 24-month funding cycle	million
Federally recognized Tribes	
A portion of these funds will keep Tribes funded at current levels as federal Tribal Public Health Equity funds expire	\$5.3 million
Oregon Health Authority	ċ7 4:III:
Includes staff to manage grants and contracts, and contract payments for professional services	\$7.4 million
Reproductive health provider network	\$3.4 million
Total investment	\$50 million

The additional \$50 million funding request supports the following:

Public health workforce development and retention

- Develop a statewide public health workforce plan ready for implementation
- Retain a local and tribal workforce to meet geographic and culturally specific priorities
- Ensure state capacity to administer grants and contracts, and monitor and evaluate use of funds
- Increase the number of funded CBOs, with a focus on filling known gaps in rural communities and disability communities

Respond to public health threats

- Ensure consistency in public health messaging during public health emergencies
- Increase capacity for preparedness coordinators

Reproductive health provider network

 Enhance access to reproductive health care in medically underserved regions of the stat

Equity initiatives

- Develop a public health system equity plan that will eliminate health inequities by ensuring state investments are directed upstream and address inequities in BIPOC and rural communities
- Increase language access, including translation and interpretation services
- Increase culturally-specific services, offering community navigators and healthcare providers from cultures served
- Offer funded CBOs the flexibility to use funds for prevention initiatives that are responsive to the needs of their community, including those that address social determinants of health

Communicable disease prevention and control

- Sustain current localized communicable disease interventions
- Ensure culturally relevant interventions, co-creating solutions with communities and providing health workers and other staff from the cultures served

