

**Department:** Health Department **Program Contact:** Kim Toevs  
**Program Offer Type:** Existing Operating Program **Program Offer Stage:** As Requested  
**Related Programs:** 40010A, 40012B, 40061  
**Program Characteristics:** In Target

**Executive Summary**

Communicable Disease (CD) programming protects community health by responding to reportable communicable (infectious) diseases with prompt disease investigation and limiting the spread of these diseases through disease control interventions. CD is a foundational public health program that upholds the State of Oregon communicable disease statutes through disease tracking and investigation, disease intervention and control, and response evaluation. CD Clinical and Community Services provides sexual health services to prevent STD and HIV transmission and provides limited tuberculosis evaluation and treatment.

**Program Summary**

As part of foundational public health CD programming, CD Clinical and Community Services uses population-focused approaches to prevent and treat disease transmission. Program components include:

STD/HCV/HIV - Locally, sexual health disparities persist by race/ethnicity, sexual orientation, and gender. For example, the syphilis rate for gay and bisexual men is as much as 200 times higher than for heterosexual men; and African Americans have higher rates of chlamydia, gonorrhea, and syphilis. A cornerstone of the program is designing services to reduce long-standing inequities among racial, ethnic, and sexual minority communities. STD/HCV/HIV activities include: Partner Services - staff contact infected and exposed people and their sex/needle-sharing partners, link them to testing and treatment, and counsel for behavior change. STD Clinical Services - Medical staff provide low barrier, timely evaluation, treatment, and prevention counseling in a judgment-free, culturally-relevant manner. Staff provide HIV prevention medication (PrEP) to at-risk individuals. Additionally, staff provide consultations and continuing medical education to medical providers in the community. The STD clinic is a designated training site for medical providers. Partnerships - Focused community and field-based testing, health promotion, and condom distribution is provided through direct services and subcontracts with community partners. Collaboration with community organizations and health care systems enhance programmatic capacity. Epidemiology - Case investigation identifies population-level patterns of STD/HIV infection to inform health care and other systems to appropriately target resources and efforts. The program has a strong record of meeting national benchmark performance measures, and is nationally recognized for innovation and program coordination, as well as high client satisfaction across all demographics.

Tuberculosis (TB) - TB services include limited specialty care services for evaluation of TB and treatment of latent TB, including TB testing in homeless shelters and serving newly arriving refugees, who are disproportionately affected by communicable diseases common in their countries of origin.

<b>Performance Measures</b>					
<b>Measure Type</b>	<b>Primary Measure</b>	<b>FY19 Actual</b>	<b>FY20 Budgeted</b>	<b>FY20 Estimate</b>	<b>FY21 Offer</b>
Output	Number clinical visits (STD, HIV, TB)	9,244	5,000	9,300	9,300
Outcome	Percent of all County gonorrhea/syphilis/HIV cases diagnosed through this program	15%	15%	14%	15%
Quality	Percent of syphilis/HIV cases investigated	81%	85%	80%	85%
Output	Number of patients initiated on HIV prevention medication (PrEP)	284	250	300	325

**Performance Measures Descriptions**

1) The clinical visits reported now include clinical TB services since integration (see program changes below). The FY20 offer did not, but the FY21 offer does include clinical TB visits. (FY20 STD-only estimate is 5,000 visits). 2) Shows impact and efficiency of program to find, diagnose, and treat significant portion of reportable STDs relative to entire health care system. 3) Priority diseases recommended by CDC. 4) HIV PrEP prevents infection in HIV negative individuals.

## Legal / Contractual Obligation

ORS 433 mandates disease prevention & control. Ryan White CARE Act Part A requires local maintenance of effort for HIV prevention services. Oregon State DHS HIV Prevention contractual program elements. Oregon State DHS STD disease investigation assurances.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Requested General Fund	Requested Other Funds
Program Expenses	2020	2020	2021	2021
Personnel	\$246,341	\$2,615,009	\$662,470	\$3,083,350
Contractual Services	\$120,387	\$1,995,679	\$133,225	\$2,358,321
Materials & Supplies	\$92,726	\$54,970	\$149,176	\$59,595
Internal Services	\$479,605	\$406,863	\$435,988	\$585,057
Capital Outlay	\$0	\$80,000	\$0	\$0
<b>Total GF/non-GF</b>	<b>\$939,059</b>	<b>\$5,152,521</b>	<b>\$1,380,859</b>	<b>\$6,086,323</b>
<b>Program Total:</b>	<b>\$6,091,580</b>		<b>\$7,467,182</b>	
<b>Program FTE</b>	1.13	22.77	4.93	26.64

Program Revenues				
Intergovernmental	\$0	\$4,802,221	\$0	\$5,578,230
Service Charges	\$0	\$350,300	\$0	\$508,093
<b>Total Revenue</b>	<b>\$0</b>	<b>\$5,152,521</b>	<b>\$0</b>	<b>\$6,086,323</b>

## Explanation of Revenues

This program generates \$360,752 in indirect revenues.

STD/HIV/Hep C is funded by an intergovernmental agreement between Multnomah County as the local public health authority (LPHA) and the Oregon Health Authority for HIV prevention and State Support for Public Health disease investigation. Federal CDC and HRSA grants also contribute to program revenues.

- \$ 352,586 State Local Public Health Authority IGA
- \$ 250,000 Federal STD Surveillance Network Grant (SSuN)
- \$ 4,882,119 HIV EIO
- \$ 468,793 Medical Fees
- \$ 132,825 Sexually Transmitted Diseases Client Services

## Significant Program Changes

**Last Year this program was:** FY 2020: 40010B-20 STD/HIV/Hep C Community Prevention Program

In FY 2021, this offer was renamed to Communicable Disease Clinical and Community Services to reflect the integration of CD and STD/HIV clinical services into a single public health clinic. The clinics were combined in FY 2020 and, in FY 2021, tuberculosis clinical services (TB evaluation and latent TB treatment) are being moved from 40010A Communicable Disease Prevention and Control to 40010B Communicable Disease Clinical and Community Services as the next step in clinical integration.