

<b>Department:</b>	Health Department	<b>Program Contact:</b>	Neisha Saxena
<b>Program Offer Type:</b>	Operating	<b>Program Offer Stage:</b>	Proposed
<b>Related Programs:</b>	40010A		
<b>Program Characteristics:</b>			

**Program Description**

The HIV/Sexually Transmitted Infections (STIs) program is a foundational public health program. The STI Clinic provides culturally competent STI testing and disease reduction measures.

STI Clinical Services provides sexual health services, community testing, and access to treatment, particularly for underserved and marginalized populations. It provides low barrier, stigma-free services to people who may not otherwise have access to services or who are hesitant to access their typical provider. Preventing and treating STIs early improves long-term health outcomes and prevents chronic diseases, such as HIV and liver disease. It also prevents the spread of infections like syphilis to unborn children, preventing disability and even death in infants. The STI Clinic works closely with the Disease Intervention Team and Community Epidemiology Services to collaborate on data related to STI trends and spread of disease.

The clinic provides services to a diverse population, with a significant portion of visits from marginalized communities. In FY24 49% of reported race/ethnicity reflects individuals identifying as non-white, with notable representation from Hispanic/Latino/a/x and Black/African American individuals, and 64% of visits were from individuals identifying as LGBTQ+ (including lesbian, gay, bisexual, queer, pansexual, and transgender). The program also serves as a center of excellence, supporting other internal and external partners who seek expert consultation from the clinic. Providers can call and consult with subject matter experts at the STI clinic to guide their own assessments and treatments, serving as a vital support system for providers who may encounter complex STI cases or require specialized guidance.

The program's goal is to reduce STI incidence and prevalence, eliminate inequities in health outcomes, and increase access to testing and treatment. This includes oral pre-exposure prophylaxis (PrEP) and doxycycline post-exposure prophylaxis (doxy-PEP) services to reduce the risk of chlamydia, gonorrhea, syphilis (including congenital syphilis), and HIV infections, preventing chronic disease in individuals and the spread of infection across the population.

**Performance Measures**

Measure Type	Performance Measure	FY24 Actual	FY25 Budgeted	FY25 Estimate	FY26 Target
Output	Number of clients provided culturally sensitive services for STI screening and treatment	4,400	4,400	4,600	3,300
Outcome	Percentage of all county gonorrhea/syphilis/HIV cases diagnosed through this program	12%	15%	12%	12%
Output	Number of patients initiated on prevention medication (PrEP)	450	450	600	340
Output	New: Number of infections (including presumptive) treated for STIs (chlamydia, gonorrhea, syphilis)	N/A	N/A	1,400	1,100

**Performance Measures Descriptions**

1: Includes STI and outreach testing. FY26 target is lower due to one fewer day per week of clinic operations and increased access to at-home test kits. 2: Shows program's impact in finding, diagnosing, and treating a significant portion of reportable STIs relative to the entire health care system (e.g., 20% of all new HIV cases in the county in FY24). 3: Decrease from 600 to 340 due to FY25's one-time general fund investment to provide asymptomatic prophylaxis. What will remain is services for contact and symptomatic prophylaxis. Measure 4 is new for FY26.

## Legal / Contractual Obligation

ORS 433 mandates disease prevention and control. Oregon State DHS HIV Prevention, HIV Early Intervention Services and Outreach, and STD contractual program elements.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2025	2025	2026	2026
Personnel	\$1,325,403	\$2,608,128	\$426,976	\$1,242,323
Contractual Services	\$146,959	\$395,184	\$184,203	\$4,815
Materials & Supplies	\$25,733	\$363,661	\$117,902	\$19,282
Internal Services	\$732,282	\$815,514	\$1,202,170	\$194,797
<b>Total GF/non-GF</b>	<b>\$2,230,377</b>	<b>\$4,182,487</b>	<b>\$1,931,251</b>	<b>\$1,461,217</b>
<b>Program Total:</b>	<b>\$6,412,864</b>		<b>\$3,392,468</b>	
<b>Program FTE</b>	6.88	18.19	2.00	6.80

Program Revenues				
Intergovernmental	\$0	\$3,831,280	\$0	\$815,017
Other / Miscellaneous	\$0	\$0	\$0	\$200,000
Service Charges	\$0	\$351,207	\$0	\$446,200
<b>Total Revenue</b>	<b>\$0</b>	<b>\$4,182,487</b>	<b>\$0</b>	<b>\$1,461,217</b>

## Explanation of Revenues

This program generates \$194,797 in indirect revenues.

\$161,958 - HIV/STI Services

\$653,059 - HIV/STI Statewide Services (HSSS) Federal (199K) State (454K)

\$200,000 - STD Program Pt Fee 3rd party

\$330,200 - STD Program Mcaid FFS

\$25,000 - STD Program Mcare

\$91,000 - STD Program Pt Fees

## Significant Program Changes

**Last Year this program was:** FY 2025: 40010B Communicable Disease Clinical and Community Services

In FY 2026, due to the loss of federal SSuN and GISP grants, coupled with ongoing County General Fund limitations, the clinic will be open 4 days a week instead of 5, express/same day services will end, and some types of treatments and immunizations will be discontinued. Restructuring of State EISO/HSSS (funds for HIV/STI prevention, investigation, testing, and treatment) and syphilis funding will result in loss of nPEP/PrEP navigator and STI express and clinical services provided by CMAs, CHNs, and APCs. To maximize economies of scale under funding constraints, the Public Health Division brought the STI disease investigation staff and the communicable disease investigation staff under the Communicable Disease Services team, resulting in the movement of 7.00 FTE (1 program supervisor and 6 disease intervention specialists) from the STI clinic and \$900,300 in State HSSS revenue from this program offer to 40010A.