

FISCAL IMPACT OF PROPOSED LEGISLATION

79th Oregon Legislative Assembly – 2017 Regular Session
Legislative Fiscal Office

Measure: HB 2310 - A5

***Only Impacts on Original or Engrossed
Versions are Considered Official***

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Date: 6/28/2017

Measure Description:

Modifies provisions regarding schedule by which local public health authorities must submit local plans for applying foundational public health capabilities and implementing foundational public health programs.

Government Unit(s) Affected:

Oregon Health Authority (OHA), counties

Analysis:

House Bill 2310 with the -A5 amendment modifies and clarifies requirements established in HB 3100 (2015) for modernizing the state's public health system, whereby state and local public health authorities will apply foundational capabilities and implement foundational programs by 2023. More specifically, the bill:

- Modifies the timeline and process for submitting local public health implementation plans.
- Directs Oregon Health Authority (OHA) to establish accountability metrics to monitor progress toward statewide public health goals.
- Clarifies language for the distribution of state monies for funding foundational capabilities and foundational programs through the local public health funding formula.
- Clarifies how and when a county could relinquish their local public health authority to the state.
- Requires OHA to submit, by June 30th of each even-numbered year, a report to the Oregon Public Health Advisory Board and the Legislative Fiscal Office (LFO) on the estimated amount of state moneys necessary to fund modernization.
- Requires OHA to submit, each biennium, a report on the application of the funding formula for full implementation of foundational capabilities and programs, how available funds were distributed and used, and public health accountability metrics.
- Adds a Public Health Advisory Board member who is a member or representative of Oregon's federally recognized tribes.

The -A5 removes the requirement to implement certain foundational capabilities and foundational programs for the Public Health Division and local public health authorities by June 30, 2019. The amendment also eliminates language permitting OHA to establish fees for providing data to academic institutions and nongovernmental entities that request data.

The fiscal impact of this bill, as amended, is anticipated to be minimal. OHA will use existing staff and resources to comply with the provisions of this bill.