## SUBCOMMITTEE RECOMMENDATION

## Oregon Health Authority COVID-19 Health Equity

To:	Ways and Means Full Committee
From:	Human Services Subcommittee
Carrier:	Representative Nosse

On May 18th, the Human Services Subcommittee recommended retroactive approval of the submission of a federal grant application from the Oregon Health Authority to the Centers for Disease Control and Prevention for \$33.9 million over two years to address COVID-19 health disparities.

The CDC has made available \$33.9 million in non-competitive guaranteed funding to Oregon for advancing health equity through activities that consider the systemic barriers that have put underserved populations at higher risk for COVID-19. The grant supports strategies that mobilize partners to improve and expand COVID-19 response activities, such as contact tracing, quarantine and isolation support, and wraparound services. It also supports building the infrastructure necessary to address disparities in the current pandemic, as well as to set the foundation for future public health responses.

OHA will award most of the funding to community-based organizations and Oregon's federally recognized tribes to enhance their ability to provide culturally and linguistically responsive contact tracing, wraparound services, and recovery supports. To build the state's infrastructure, OHA will establish a new Equity Team within the Office of the State Public Health Director. This team will be staffed with 17 limited-duration positions who will ensure the agency's workforce strategies are grounded in equity, provide training to agency staff and partners related to culturally appropriate response activities, and assist local public health authorities with the implementation of health equity plans.

There is no state match or maintenance of effort requirement. The grant requires a minimum rural carveout of \$7.5 million. OHA's grant application surpasses this amount by reserving \$13.8 million for rural communities.

If this request is approved, OHA's 2021-23 expenditure limitation and position authority will need to be increased for the two-year grant period beginning June 1, 2021.

The Human Services Subcommittee recommends approval.