Public Health Districts

Analyst: Tatro

Historical Summary

OPERATING BUDGET	FY 2020 Total App	FY 2020 Actual	FY 2021 Approp	FY 2022 Request	*FY 2022 Gov Rec*
BY FUND CATEGORY					
General	9,774,500	9,774,500	9,821,300	9,985,100	*9,881,600*
Dedicated	768,100	668,000	773,100	782,600	*779,100*
Total:	**10,542,600**	**10,442,500**	**10,594,400**	**10,767,700**	***10,660,700***
Percent Change:		(0.9%)	1.5%	1.6%	*0.6%*
BY OBJECT OF EXPENDITURE					
Personnel Costs	9,082,000	9,012,100	9,281,200	9,433,100	*9,326,100*
Operating Expenditures	1,460,600	1,430,400	1,313,200	1,334,600	*1,334,600*
Total:	**10,542,600**	**10,442,500**	**10,594,400**	**10,767,700**	***10,660,700***

Department Description

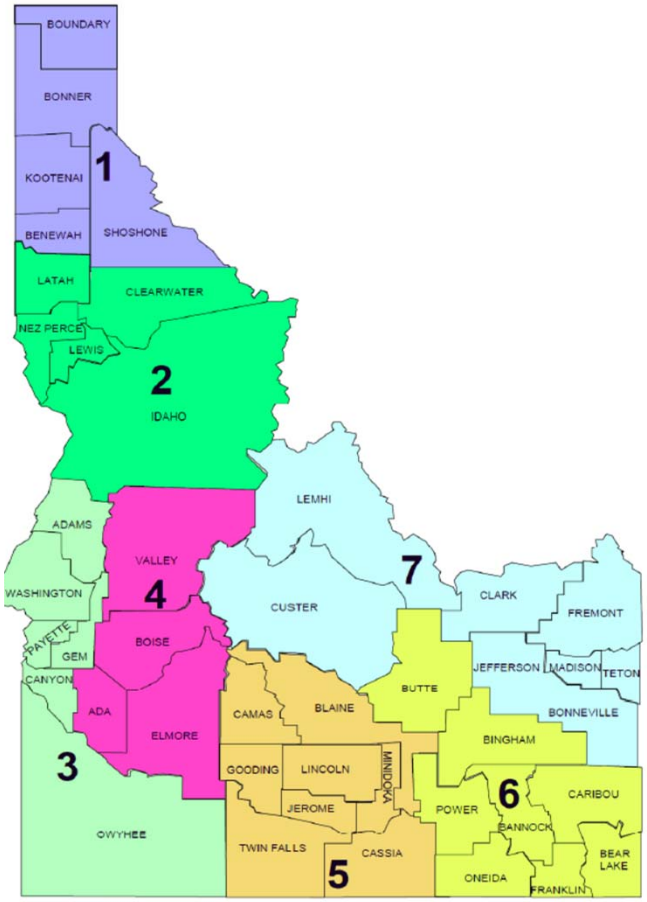
Public Health Districts are established in Chapter 4, Title 39, Idaho Code. They are not state agencies and are considered independent bodies corporate and politic, pursuant to Section 1, Article VIII of the Idaho Constitution. Employees of the health districts are not state employees. However, pursuant to Section 39-425, Idaho Code, districts must budget for employee participation in the state's retirement system and comply with the state merit system. Payroll and accounting services are provided by the office of the State Controller, and audits are conducted by the Legislative Audits Division.

The mission of the seven Public Health Districts is to prevent disease, disability, and premature death; to promote healthy lifestyles; and to protect and promote the health and quality of our environment.

Idaho's seven health districts provide health services throughout the state. Each district works under the direction of its own board of health, appointed by county commissioners within each region. The districts are not part of any state agency, but they work in partnership with the Department of Health and Welfare and other state entities to deliver services and disburse public information to local communities.

Public Health Districts
Agency Profile

Organization



District Office Locations

Health District 1
Sandpoint
St. Maries
Hayden
Kellogg
Bonners Ferry

Health District 2
Lewiston
Moscow
Kamiah
Orofino
Grangeville

Health District 3
Payette
Emmett
Weiser
Caldwell
Homedale

Health District 4
Boise
McCall
Mountain Home

Health District 5
Twin Falls
Heyburn
Jerome
Shoshone
Bellevue
Gooding

Health District 6
Malad
Pocatello
Preston
Arco
Aberdeen
Montpelier
Blackfoot
Soda Springs
American Falls
Fort Hall

Health District 7
Dubois
Challis
Rigby
Rexburg
Mud Lake
Idaho Falls
St. Anthony
Salmon
Driggs
Mackay

		Appropriated ($)		Non-Appropriated ($)			
Fiscal Year	FTP	General Fund	Millennium Fund	County	Contracts	Fees/Other	Total ($)
FY 2014	605.79	8,232,500	500,000	8,037,700	22,495,800	10,008,000	49,274,000
FY 2015	623.47	8,531,200	750,000	8,351,400	22,502,600	10,245,600	50,380,800
FY 2016	624.61	8,719,200	750,000	8,639,600	25,280,400	13,291,500	56,680,700
FY 2017	632.06	9,289,500	750,000	8,768,600	27,778,800	11,762,100	58,349,000
FY 2018	632.06	9,341,700	750,000	9,093,100	27,547,600	14,298,600	61,031,000
FY 2019	626.01	9,421,600	750,000	9,174,300	27,748,400	12,602,500	59,696,800
FY 2020	*602.70*	*9,887,900*	*768,900*	*9,458,900*	*30,099,100*	*15,730,600*	*65,945,400*
*FY 2021**	*599.43*	*9,330,200*	*773,100*	*9,585,900*	*28,937,800*	*22,988,000*	*71,615,000*
*FY 2022**	*599.43*	*9,988,900*	*782,600*	*9,809,700*	*28,130,700*	*13,356,700*	*62,068,600*

**As indicated in the budget request for FY 2021 (Est. Expenditures, Includes CARES Act) & FY 2022 (Request).*

Public Health Districts
Overview, Budget, & Fund Information

Analyst: Tatro

Public Health Districts are established in Chapter 4, Title 39, Idaho Code. They are not state agencies and are considered independent bodies corporate and politic, pursuant to Section 1, Article VIII of the Idaho Constitution. Employees of the health districts are not state employees. However, pursuant to Section 39-425, Idaho Code, districts must budget for employee participation in the state's retirement system and comply with the state merit system. Payroll and accounting services are provided by the office of the State Controller, and audits are conducted by the Legislative Audits Division.

Budget Development Process

In April of each year, each health district submits a preliminary budget to its Board of Health. This proposal is presented for public comment. The final budget is approved by the Board of Health Budget Committees with the estimated cost to each county. The decision of the budget committee is binding upon all counties within the district and the district itself.

70% of county contributions are apportioned by population as determined by the last general census when applicable, or by the Idaho Department of Commerce.

30% of county contributions are apportioned by taxable market value for assessment purposes as computed by the County Assessor and certified by the Tax Commission.

Each of the seven district budgets is combined into a single budget request that is made to the state for the state funds required in Section 39-425, Idaho Code.

Public Health District Funding

State Appropriations

Pursuant to Section 39-425, Idaho Code, the Public Health Districts' budget request shall include a minimum of 67% of the amounts pledged by each county for taxes raised pursuant to Section 31-862, Idaho Code.

General Fund Appropriation and Transfer to Public Health District Fund, Section 39-422, Idaho Code
-Half of the appropriated funds are distributed in July and half are distributed in January.

The Board of Trustees, as established in Section 39-411, Idaho Code, are the seven members (one per district) that allocate the appropriation to the districts, in accordance with Section 39-425, Idaho Code. For FY 2019 the board-developed formula is: county contributions (67%); and the remaining amount (33%) is allocated based on population (50%); minimum base amount (18%); Health Professional Shortage Area (HPSA) score (18%); and poverty (14%). During the 2018 legislative session, the Legislature passed H562a, which requires the board of trustees to maintain the same formula for a two-year period.

Starting in FY 2018, the Health Districts were appropriated ongoing Millennium Income Funds.

County Revenue

Each Board of County Commissioners is authorized to levy a special tax for preventive health services; health districts do not have taxing authority. The county tax cannot exceed four hundredths of a percent (.04%) above the statutory limitation of market value, for assessment purposes, of all taxable property in the county.

Other Revenue

Other revenue sources include contracts and grants with the Department of Environmental Quality and Department of Health and Welfare; local grants applied for and received; private donations; fees for services provided; third party insurance reimbursements; Medicare; Medicaid; and pass-through dollars from the Department of Health and Welfare for Home Visiting Services and Citizen Review Panels.

Public Health Districts
Funding Formula & General Fund Allocation

FY 2021 Supporting Data

	2020 County Pledge	Population 3-Year Average	HPSA Score	Population in Poverty 3-Year Average
District 1	$1,213,500	240,303	14.6%	30,089
District 2	$829,357	109,324	14.8%	15,286
District 3	$1,381,174	290,733	14.1%	39,696
District 4	$2,438,400	515,290	11.4%	51,658
District 5	$1,256,787	198,937	14.5%	25,681
District 6	$1,227,796	174,704	15.1%	22,883
District 7	$1,120,703	223,448	15.5%	28,633
Total	**$9,467,717**	**1,752,739**	**100.0%**	**213,925**

Moneys from the General Fund Appropriation are allocated based on five factors: 1) County Contributions; 2) Population; 3) Minimum Base Amount; 4) Health Professional Shortage Area (HPSA); and 5) Percent of Population in Poverty. The distribution is shown in the table below.

FY 2021 Funding Formula Breakdown

	County Contributions	Population	Minimum Amount	HPSA Score	Poverty
	67%	**17%**	**6%**	**6%**	**5%**
District 1	$813,045	$221,832	$83,212	$84,958	$63,721
District 2	$555,669	$100,921	$83,212	$86,286	$32,372
District 3	$925,387	$268,386	$83,212	$81,861	$84,067
District 4	$1,633,728	$475,682	$83,212	$66,374	$109,399
District 5	$842,047	$183,646	$83,212	$84,627	$54,387
District 6	$822,623	$161,275	$83,212	$87,945	$48,460
District 7	$750,871	$206,273	$83,212	$90,434	$60,638
Total	**$6,343,370**	**$1,618,015**	**$582,485**	**$582,485**	**$453,044**

Total FY 2021 General Fund Allocation, Rounded

	Percent of Total	Total Amount*
District 1	13.2%	$1,266,800
District 2	9.0%	$858,500
District 3	15.1%	$1,442,900
District 4	24.7%	$2,368,400
District 5	13.0%	$1,247,900
District 6	12.6%	$1,203,500
District 7	12.4%	$1,191,400
State Total	**100%**	**$9,579,400**

* The Health Districts also received from the General Fund: $136,500 for Citizen Review Panels (allocated 1/7 to each district), and $105,400 for Health Districts 3 and 4.

Public Health Districts

Analyst: Tatro

FY 2020 Actual Expenditures by Division

			FTP	PC	OE	CO	T/B	LS	Total
0.30	**FY 2020 Original Appropriation**								
	0290-01	Gen	0.00	8,805,000	1,082,900	0	0	0	9,887,900
	0499-00	Ded	0.00	380,700	388,200	0	0	0	768,900
	Totals:		0.00	9,185,700	1,471,100	0	0	0	10,656,800
0.44	**Rescissions**								
	0290-01	Gen	0.00	(17,100)	0	0	0	0	(17,100)
	0499-00	Ded	0.00	(800)	0	0	0	0	(800)
	Totals:		0.00	(17,900)	0	0	0	0	(17,900)
0.45	**Omnibus Decisions**								
	0290-01	Gen	0.00	(85,800)	(10,500)	0	0	0	(96,300)
	Totals:		0.00	(85,800)	(10,500)	0	0	0	(96,300)
1.00	**FY 2020 Total Appropriation**								
	0290-01	Gen	0.00	8,702,100	1,072,400	0	0	0	9,774,500
	0499-00	Ded	0.00	379,900	388,200	0	0	0	768,100
	Totals:		0.00	9,082,000	1,460,600	0	0	0	10,542,600
1.61	**Reverted Appropriation**								
	0499-00	Ded	0.00	(69,900)	(30,200)	0	0	0	(100,100)
	Totals:		0.00	(69,900)	(30,200)	0	0	0	(100,100)
2.00	**FY 2020 Actual Expenditures**								
	0290-01	Gen	0.00	8,702,100	1,072,400	0	0	0	9,774,500
	Public Health Trust (General)			8,702,100	1,072,400	0	0	0	9,774,500
	0499-00	Ded	0.00	310,000	358,000	0	0	0	668,000
	Idaho Millennium Income			310,000	358,000	0	0	0	668,000
	Totals:		0.00	9,012,100	1,430,400	0	0	0	10,442,500

Difference: Actual Expenditures minus Total Appropriation

0290-01	Gen	0	0	0	0	0	0
Public Health Trust (General)		0.0%	0.0%	N/A	N/A	N/A	0.0%
0499-00	Ded	(69,900)	(30,200)	0	0	0	(100,100)
Idaho Millennium Income		(18.4%)	(7.8%)	N/A	N/A	N/A	(13.0%)
Difference From Total Approp		**(69,900)**	**(30,200)**	**0**	**0**	**0**	**(100,100)**
Percent Diff From Total Approp		**(0.8%)**	**(2.1%)**	**N/A**	**N/A**	**N/A**	**(0.9%)**

Public Health Districts

Analyst: Tatro

Comparative Summary

Decision Unit	Agency Request FTP	Agency Request General	Agency Request Total	Governor's Rec FTP	Governor's Rec General	Governor's Rec Total
FY 2021 Original Appropriation	**0.00**	**9,821,300**	**10,594,400**	***0.00***	***9,821,300***	***10,594,400***
Executive Holdback	0.00	(491,100)	(491,100)	*0.00*	*(491,100)*	*(491,100)*
Noncognizable Funds and Transfers	0.00	0	9,074,200	*0.00*	*0*	*9,074,200*
FY 2021 Estimated Expenditures	**0.00**	**9,330,200**	**19,177,500**	***0.00***	***9,330,200***	***19,177,500***
Removal of Onetime Expenditures	0.00	(105,400)	(9,179,600)	*0.00*	*(105,400)*	*(9,179,600)*
Base Adjustments	0.00	0	0	*0.00*	*0*	*0*
Restore Rescissions	0.00	491,100	491,100	*0.00*	*491,100*	*491,100*
FY 2022 Base	**0.00**	**9,715,900**	**10,489,000**	***0.00***	***9,715,900***	***10,489,000***
Benefit Costs	0.00	199,200	206,400	*0.00*	*28,000*	*29,100*
Statewide Cost Allocation	0.00	(3,800)	(3,800)	*0.00*	*(3,800)*	*(3,800)*
Change in Employee Compensation	0.00	73,800	76,100	*0.00*	*141,500*	*146,400*
FY 2022 Total	**0.00**	**9,985,100**	**10,767,700**	***0.00***	***9,881,600***	***10,660,700***
Change from Original Appropriation	0.00	163,800	173,300	*0.00*	*60,300*	*66,300*
% Change from Original Appropriation		1.7%	1.6%		0.6%	0.6%

Public Health Districts

Analyst: Tatro

Budget by Decision Unit	FTP	General	Dedicated	Federal	Total
FY 2021 Original Appropriation					
The Legislature funded or directed the use of appropriated funds for three programs in FY 2021: $105,400 for the Community Health Collaborative; $178,500 for Citizen Review Panels ($42,000 is transferred from the Department of Health and Welfare (DHW)); and $1,000,000 through a transfer from DHW for home visitation programs.					
	0.00	9,821,300	773,100	0	10,594,400
Executive Holdback					
This adjustment reflects a 5% temporary reduction in General Fund spending authority (holdback) for FY 2021 issued through Executive Order No. 2020-14. This reduction is restored as a base adjustment in FY 2022, below.					
Agency Request	0.00	(491,100)	0	0	(491,100)
Governor's Recommendation	*0.00*	*(491,100)*	*0*	*0*	*(491,100)*
Noncognizable Funds and Transfers					**UPDATED AMOUNT: $6,909,700**
Provides $9,074,200 as a noncognizable adjustment for CARES Act (corona virus relief) funds.					
Agency Request	0.00	0	0	9,074,200	9,074,200
Governor's Recommendation	*0.00*	*0*	*0*	*9,074,200*	*9,074,200*
FY 2021 Estimated Expenditures					
Agency Request	0.00	9,330,200	773,100	9,074,200	19,177,500
Governor's Recommendation	*0.00*	*9,330,200*	*773,100*	*9,074,200*	*19,177,500*
Removal of Onetime Expenditures					
Removes $105,400 of onetime appropriation for the second year of the improved health transformations program, and $9,074,200 of CARES Act funding.					
Agency Request	0.00	(105,400)	0	(9,074,200)	(9,179,600)
Governor's Recommendation	*0.00*	*(105,400)*	*0*	*(9,074,200)*	*(9,179,600)*
Base Adjustments					
Transfers $54,400 from personnel costs to operating expenditures from the Millennium Income Fund.					
Agency Request	0.00	0	0	0	0
Recommended by the Governor.					
Governor's Recommendation	*0.00*	*0*	*0*	*0*	*0*
Restore Rescissions					
This adjustment restores the 5% General Fund holdback removed as a current year expenditure adjustment, above.					
Agency Request	0.00	491,100	0	0	491,100
Governor's Recommendation	*0.00*	*491,100*	*0*	*0*	*491,100*
FY 2022 Base					
Agency Request	0.00	9,715,900	773,100	0	10,489,000
Governor's Recommendation	*0.00*	*9,715,900*	*773,100*	*0*	*10,489,000*
Benefit Costs					
Employer-paid benefit changes include an 11% increase (or $1,280 per eligible FTP) for health insurance, bringing the total appropriation to $12,930 per FTP. Also included is a restoration of the unemployment insurance rate, a partial restoration of the unused sick leave rate, and adjustments to workers' compensation that vary by agency. This request includes benefit changes associated with the General Fund and the Millennium Income Fund, and account for about 20% of all benefit changes.					
Agency Request	0.00	199,200	7,200	0	206,400
The Governor recommends no increase for health insurance due to fewer claims than expected and a one-year holiday for employers who contribute to the PERSI-managed sick leave plan.					
Governor's Recommendation	*0.00*	*28,000*	*1,100*	*0*	*29,100*

Public Health Districts

Budget by Decision Unit	FTP	General	Dedicated	Federal	Total
Statewide Cost Allocation					
This request includes adjustments to recover the cost of services provided by other agencies in accordance with federal and state guidelines on cost allocation. Risk management costs will decrease by $3,900 and State Controller fees will increase by $100, for a net decrease of $3,800.					
Agency Request	0.00	(3,800)	0	0	(3,800)
Governor's Recommendation	*0.00*	*(3,800)*	*0*	*0*	*(3,800)*
Change in Employee Compensation					
For calculation purposes, agencies were directed to include the cost of a 1% salary increase for permanent and temporary employees. This request includes only the General Fund and the Millennium Income Fund portion of a 1% calculation.					
Agency Request	0.00	73,800	2,300	0	76,100
The Governor recommends a 2% increase in employee compensation, distributed on merit. He does not recommend a compensation increase for group and temporary positions.					
Governor's Recommendation	*0.00*	*141,500*	*4,900*	*0*	*146,400*
FY 2022 Total					
Agency Request	0.00	9,985,100	782,600	0	10,767,700
Governor's Recommendation	*0.00*	*9,881,600*	*779,100*	*0*	*10,660,700*
Agency Request					
Change from Original App	0.00	163,800	9,500	0	173,300
% Change from Original App		1.7%	1.2%		1.6%
Governor's Recommendation					
Change from Original App	*0.00*	*60,300*	*6,000*	*0*	*66,300*
% Change from Original App		*0.6%*	*0.8%*		*0.6%*

Part I – Agency Profile

Agency Overview

Idaho Public Health Districts were established in 1970 under Chapter 4, Title 39, and Idaho Code. They were created by the Legislature to ensure that preventive public health services are available to all citizens of the state—no matter how small or large their county population. It was the intent of the Legislature in creating the Public Health Districts that public health services be locally controlled and governed. Idaho's 44 counties are grouped into seven Public Health Districts and are governed by policy boards appointed by the county commissioners in those Districts. The District partnership has served Idaho well since 1971 and has received national attention due to the way it provides decentralized public health services designed to meet the unique needs of the citizens of each District. Each Board of Health adopts a budget and defines the public health services to be offered in its district based on the particular needs of the local populations served. Idaho Public Health Districts are not state agencies nor part of any state department; they are recognized much the same as other single purpose districts and are accountable to their local Boards of Health.

While Idaho Public Health Districts are locally based, they share a common vision and mission. Their vision is "***Healthy People in Healthy Communities***."

The Public Health Districts' mission is to:

- **Prevent** disease, disability, and premature death,
- **Promote** healthy lifestyles, and
- **Protect** the health and quality of the environment.

Although services vary depending on local need, all seven Public Health Districts provide the essential services that assure healthy communities. These may include:

- Monitoring health status and understanding health issues
- Protecting people from health problems and health hazards
- Giving people information they need to make healthy choices
- Engaging the community to identify and solve health problems
- Developing public health policies and plans
- Enforcing public health laws and regulations
- Providing access to preventive health services
- Maintaining a competent public health workforce
- Evaluating and improving programs and interventions
- Contributing to the evidence based practice of public health

Idaho Public Health Districts make a difference every day, and their work touches everyone. They play a critical role in improving and maintaining the health of Idaho citizens. They strive to prevent diseases and help keep the food and water supplies safe. Idaho is fortunate to have a strong system of Public Health Districts—one that is the envy of many other states.

Core Functions/Idaho Code

As outlined in Idaho Code 39-409, the Public Health Districts are to provide basic health services of public health education, physical health, environmental health, and public health administration. The law also states that services shall not be construed to restrict the programs offered by the local Boards of Health of the Public Health Districts solely to these categories.

While the services provided by Idaho Public Health Districts are not exactly the same in each district, they generally include the following core areas:

Epidemiology/Communicable Disease Control

Epidemiology is one of the core functions of public health. Idaho Public Health Districts work to investigate, report, prevent, and control communicable diseases by:

- Reporting on over 70 reportable diseases and conditions (IDAPA 16.02.10)
- Investigating and managing outbreaks of communicable diseases (e.g., Cryptosporidiosis, Hepatitis A, Salmonella, Pertussis, Syphilis, Tuberculosis, West Nile Virus, H1N1, etc.)
- Utilizing the National Electronic Disease Surveillance Systems (NEDSS) that provides a direct link to the Centers for Disease Control and Prevention (CDC)
- Maintaining and utilizing the Health Alert Network (HAN) to rapidly communicate with state and local partners
- Working in partnership with medical facilities and infection control practitioners

Health Education

Prevention is the key to success in public health. Idaho Public Health Districts focus on promoting healthy lifestyles through educational programs and policy advocacy. They work closely with local coalitions and community partners to provide the following educational programs and policy implementation plans:

- Adolescent Pregnancy Prevention
- Comprehensive Cancer Control
- Heart Disease, Stroke, and Diabetes Prevention and Control
- Fall Prevention for Seniors
- Oral Health
- Physical Activity and Nutrition
- Tobacco Use Cessation
- Tobacco Prevention and Control
- Drug Overdose Prevention

Physical Health

Idaho Public Health Districts strive to maintain the health of families and the community through health district programs and referrals to community partners. Services and/or programs offered include, but are not limited to:

- Child and Adult Immunizations
- HIV/AIDS Testing and Case Management
- Reproductive Health
- School Health
- Sexually Transmitted Disease Testing and Treatment
- Women's Health Check/Mammography Services
- Women, Infants, and Children Program (WIC)
- Home Visitation

Environmental Health

Environmental Health recognizes the connection between human health and the health of our environmental surroundings. Idaho Public Health Districts work to prevent disease and injury through control and protection of environmental factors such as water, air, and food by:

- Permitting and inspecting food establishments
- Monitoring public water systems
- Permitting and inspecting public swimming pools
- Permitting and inspecting subsurface sewage disposal systems
- Approving and inspecting solid waste facilities
- Inspecting child care facilities and providing education for child care providers
- Reviewing proposed subdivision plans for land development and conducting site evaluations

Public Health Preparedness

Idaho Public Health Districts are working to improve their ability to respond to all types of hazards, ranging from natural disasters to infectious disease outbreaks to acts of terrorism by:

- Exercising all-hazard response plans that have been developed by the health districts
- Planning for and management of the Strategic National Stockpile
- Partnering with public health professionals and the community to ensure they are educated about and prepared for such events
- Working with community partners to develop plans and exercise for surge capacity events
- Responding to public health events, such as the 2009 H1N1 pandemic

Revenue and Expenditures

Idaho Public Health Districts receive income from four funding sources. Approximately 17 percent of income comes from the State General Fund and the State Millennium Fund combined. About 83 percent is from fees, service contracts, and the counties. Idaho Public Health Districts are accountable to the State, to local counties, and to the general public to ensure that these limited funds are used efficiently and effectively.

Idaho Public Health Districts are not State agencies; therefore, their entire budget is not set by the Idaho Legislature. The counties that make up each District are responsible for setting and approving the District's overall budget. The portion of funding that is requested by Idaho Public Health Districts from the State's General and Millennium Funds are the only portion of their budget that is approved by the Idaho Legislature.

Revenue	FY 2017	FY 2018	FY 2019	FY 2020
State General Fund	$9,289,500	$9,341,700	$9,421,600	$9,774,500
Other (fees, contracts and county appropriations)	48,309,500	47,889,800	50,184,200	51,158,600
State Millennium Fund	743,300	742,600	749,900	668,000
Total	**$58,342,300**	**$57,974,100**	**$60,355,700**	**$61,601,100**
Expenditures	**FY 2017**	**FY 2018**	**FY 2019**	**FY 2020**
Personnel Costs	$43,019,100	$42,029,000	$41,688,500	$42,225,100
Operating Expenditures	11,476,300	11,185,800	12,663,700	13,315,000
Capital Outlay	2,346,200	2,822,700	3,949,200	3,778,500
Pass-through Dollars (Hospital, EMS)	1,500,700	1,936,600	2,054,300	2,282,500
Total	**$58,342,300**	**$57,974,100**	**$60,355,700**	**$61,601,100**

Profile of Cases Managed and/or Key Services Provided

Profile of Cases Managed and/or Services Provided	FY 2017	FY 2018	FY 2019	FY 2020	Benchmark
1. # Communicable Disease Reports & Investigations	10,759	11,061	8,100	8,299	0
2. # Environmental Health Inspections	15,749	16,281	17,432	16,244	14,225
3. # Child Care Inspections	1,808	1,515	1,430	1,383	1,500
4. # Women, Infants and Children (WIC) Clients	67,682	64,845	60,056	55,812	73,000
5. # Reproductive Health Clients Served	11,783	9,640	9,981	11,462	30,000
6. # Individuals Receiving Tobacco Use Cessation Education	1,736	1,808	2,358	3,350	1,500
7. # Children Receiving Dental Varnish/Sealant Services	10,697	8,047	8,965	10,473	10,000

Profile of Cases Managed and/or Services Provided	FY 2017	FY 2018	FY 2019	FY 2020	Benchmark
8. # Adult and Child Vaccines Given	Adults 31,478 Children 46,413	Adults 26,848 Children 41,747	Adults 33,171 Children 33,111	Adults 30,266 Children 34,912	Adults 50,000 Children 100,000

1. Communicable Disease Reports & Investigations: Epidemiology is the study of diseases, their causes, and their patterns. It is core to the foundation of public health. Idaho Public Health Districts investigate and report on over 70 diseases/conditions that are legally reportable according to the Rules and Regulations Governing Idaho Reportable Diseases (IDAPA 16.02.10). Most of these diseases have been around for decades while others are newly emerging (Zika/arboviral diseases) or re-emerging (Tuberculosis).

2. Environmental Health Inspections: The environmental health staff perform regulatory and educational functions for a number of programs including Food Safety, On-site Wastewater, Solid Waste, Public Swimming Pools, Public Water Systems, Land Development, and Indoor Air Quality. The functions performed include plan and site reviews, inspections, consultations, compliance monitoring, investigations, and educational classes. From July 1, 2019 through June 30, 2020, Environmental Health Specialists conducted 16,244 environmental health inspections.

3. Child Care Inspections: The environmental health staff conduct annual and biennial inspections of both Idaho Child Care Program certified and/or state licensed child care facilities to ensure health and safety of the children and to provide additional education to the operators. Health district inspectors are credentialed through examination, experience, and continuing education as well as background checked. Their knowledge and expertise in food safety, solid waste sanitation, vector control, drinking water quality, and rural onsite wastewater treatment are a valuable resource to child care facility operators. The combined health district resources in environmental health and epidemiology investigations are used to minimize the spread of communicable disease in these facilities.

4. WIC Clients: The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) is provided by Idaho Public Health Districts and two Tribal Health Agencies in Idaho. The WIC Program is a public health nutrition program under the United States Department of Agriculture. Eligible participants are women who are pregnant, breastfeeding (up to one year) or post-partum (up to six months), infants and children up to age five. Participants receive healthy foods, nutrition education and individualized counseling, breastfeeding support, and referrals to other medical and social service programs. To be eligible for WIC, participants must meet income guidelines, be a resident of Idaho, and have a nutritional need. National and Idaho trends indicate a decline in WIC participation. Although the downward trend has been researched, there is no definitive reason for the decrease. Speculation is that declining birth rates and an improved economy may play a part. Additionally, some eligible participants may self-disqualify themselves as they may feel someone else can use the benefits more.

5. Reproductive Health Clients: Idaho Public Health Districts provide comprehensive family planning services to low income men and women, including teenagers, who lack access to reproductive health services. Family Planning clinics offer direct client services, counseling, community education, and outreach activities throughout the various service areas. From July 1, 2019 through June 30, 2020, the Public Health Districts served 11,462 family planning clients including 7,176 through Title X funding. Approximately 74% of the Title X clients were at or below 150% of the federal poverty level and paid no fee or paid a small percentage of the actual fee based on their stated income. Ensuring access to reproductive health services is one of the leading health indicators for Healthy People 2020, a set of goals and objectives designed to improve the health of all people in the United States. Idaho's Public Health Districts play a vital role in working towards these health promotion and disease prevention efforts.

6. Tobacco Use Cessation: Idaho Public Health Districts facilitate tobacco cessation programs for Idaho citizens at no cost to participants. Funding for this program is provided through the Idaho Millennium Fund. Funding can fluctuate from year to year depending on the Millennium Fund appropriation amount to the health districts. In FY20, the Public Health Districts served 3,350 tobacco use cessation participants. Of these, 1,537 were adults with a quit rate of 26%; 194 were pregnant with a quit rate of 22%; and 1,619 were teenagers with a quit rate of 27%. Use of tobacco products is linked to increased risk of heart disease, stroke, diabetes, multiple types of cancer, and many other health conditions. This program continues to provide a valuable health benefit to Idahoans.

7. Fluoride Varnish/Dental Sealants: Idaho Public Health Districts promote improved oral health for all Idaho children through programs associated with Idaho Oral Health Program. The main focus of this program is the access of elementary school aged children to a Dental Hygienist to be evaluated and offered dental sealants in the schools, and by promoting fluoride varnish in children coming for WIC services and some selected preschool programs. Although program specifics may vary from one district to another, the use of dental sealants and fluoride varnish follow evidence-based programs to reduce dental caries and improve the oral health and overall physical health of the children of Idaho. In FY20, 10,473 children received dental varnish/sealant services.

8. Vaccines Given: Disease prevention is a primary function of the Idaho Public Health Districts, and vaccines are a first-line defense to protect children and adults against many infectious diseases. The public health districts strive to improve Idaho's immunization rates, yet many children do not receive all of their recommended vaccines. Idaho Public Health Districts' staff seeks opportunities to increase Idaho's immunization rates by focusing on policies to promote childhood vaccines, community outreach, and collaboration with medical providers, pharmacists, educators, and other advocates. In 2020, 30,266 vaccines were administered to adults at public health clinics in Idaho, and another 34,912 vaccines were administered to children.

Red Tape Reduction Act

Each agency shall incorporate into its strategic plan a summary of how it will implement the Red Tape Reduction Act, including any associated goals, objectives, tasks, or performance targets. This information may be included as an addendum.

	As of July 1, 2019	As of July 1, 2020
Number of Chapters	*1*	*No chapters edited*
Number of Words	*13,270*	*No new words removed*
Number of Restrictions	*227*	*No new restrictions*

The Red Tape Reduction Act efforts of the Public Health Districts in Idaho represents the reduction of three IDAPA codes for Public Health Districts, with an overall reduction in word count by 4563, and a reduction in restrictions by 32.84 percent. These revisions to IDAPA rules were achieved while continuing to preserve and protect the public's health.

FY 2020 Performance Highlights

Part II – Performance Measures

Performance Measure		FY 2017	FY 2018	FY 2019	FY 2020	FY 2021
Goal 1 *Monitor health status and understand health issues.*						
1. Percent of adults who smoke[1]	actual	15.9%	13.8%	14.5%	14.3%	----------
	target	*15%*	*15%*	*15%*	*12% National %*	
2. Percent of adults diagnosed with diabetes[1]	actual	7.6%	8.1%	8.9%	8.7%	----------
	target	*< 7% National %*	*< 7% National %*	*8% National %*	*8% National %*	
3. Percent of adults who are overweight[1]	actual	65.7%	65.2%	64.5%	63.5%	----------
	target	*< 40% National %*	*< 40% National %*	*<40% National %*	*<40% National %*	
4. Percent of adults who are obese[1]	actual	28.9%	28.6%	27.4%	29.3%	----------
	target	*<25% National %*	*<25% National %*	*<25% National %*	*<25% National %*	
5. Adult suicide rate per 100,000 population[2]	actual	19.6	21.9	20.8	20.8	----------
	target	*12 (death rate)*	*12 (death rate)*	*10.2 (death rate)*	*10.2 (death rate)*	
6. Teenage pregnancy rates (15-19 year olds)[2]	actual	27.5	22.5	24.1	22.2	----------
	target	*30.3/1,000*	*30.3/1,000*	*22/1,000*	*22/1,000*	

Performance Measure Explanatory Notes

1 Data obtained from Idaho Behavioral Risk Factors Surveillance System (BRFSS)
2 Data obtained from Idaho Vital Statistics; Idaho Department of Health and Welfare, Bureau of Health Policy and Vital Statistics

For More Information Contact

If you would like more detailed information concerning the Public Health Districts of Idaho and the services they provide, you may download a copy of health districts' ***"Strategic Plan: Fiscal Year 2019 Report"*** that is available on each health district's website or contact any of the District Directors below.

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