State of California—Health and Human Services Agency
California Department of Public Health

TOMÁS J. ARAGÓN, MD, DrPH
Director and State Public Health Officer

GAVIN NEWSOM
Governor

Memorandum

DATE: October 24, 2023

FROM: Susan Fanelli, California Department of Public Health (CDPH)

TO: Local Health Department Directors and Health Officers

RE: Sexually Transmitted Infection (STI) Allocations - Fiscal Year 2024-25 and 2025-26 Funding for LHJs

The purpose of this memo is to detail funding updates to existing State General Fund allocations to local health jurisdictions to support sexually transmitted infection prevention and control activities. **Effective July 1, 2024, the CDPH STD Control Branch will combine the following funding sources into a single allocation:**

- **STD Prevention & Collaboration Allocations ($13.6 million ongoing)**
  - $4.5 million, appropriated in FY 2019-20
  - $3.6 million, appropriated in FY 2021-22
  - $5.5 million, appropriated in 2022-23
- **STD Core Allocations ($3.6 million ongoing)**
  - Base funding with current funding formula established in FY 2018-19

The two allocations have differing funding formulas and a significant overlap in scopes of work. Current funding formula inputs for these two allocations are provided in the appendix below.

CDPH met with the Executive Committees of CHEAC and CCLHO in September 2023 to determine funding plans for the next budget cycle beginning July 1, 2024. The following decisions were made:

- To reduce administrative burden, the STD Prevention and Collaboration and STD Core allocations will be combined and renamed the **STI Prevention and Collaboration Allocations** beginning FY 2024/2025.
- Based on the agreement between CDPH, CCLHO, and CHEAC, funding formulas for both the STD Prevention & Collaboration Allocations (methodology established FY 2021-22) and STD Core Allocations (methodology established FY 2018-19) will remain unchanged.
- All LHJs will receive the same funding amount for both the STD Core and STD Prevention and Collaboration as they have in the current FY, as shown in the table below. This includes base

funding of $250,000 for recipients of the STD Collaboration allocation. LHJs receiving only the STD Core allocation will not receive the $250,000 base (i.e., Berkeley, Pasadena, Santa Cruz, Yolo).

- Per the authorizing statute (HSC Section 120511), no less than fifty percent of STD Prevention and Collaboration awards must be provided to community-based organizations (CBOs) through direct funding or in-kind support. This requirement does not apply to the STD Core component of the combined STI Prevention and Collaboration awards.
- CDPH will revisit statewide allocations for FY 2026-2027 to adjust for increasing syphilis and congenital syphilis cases, and present to CHEAC and CCLHO Executive Committees for input and approval.
- If additional State General Fund is allocated through the state budget process, CDPH will work with CHEAC and CCLHO Executive Committees to determine funding approaches, including whether additional LHJs may be funded utilizing the combined methodology.

Table 1: Awards for Combined STI Prevention and Collaboration Funding (FY24/25 - FY25/26)

Local Health Jurisdiction	Current STD Core Funding	Current STD Prevention and Collaboration Funding*	Total Combined STI Prevention and Collaboration Funding (Beginning FY 24/25)	Total Amount LHJs Must Use to Support CBOs*
Alameda HD**	125,603	473,756	599,359	236,878
Berkeley	13,625	0	13,625	0
Butte	23,782	282,054	305,836	141,027
Contra Costa	79,724	412,808	492,532	206,404
Fresno	252,182	459,883	712,065	229,942
Imperial	16,777	294,165	310,942	147,083
Kern	211,352	432,802	644,154	216,401
Kings	23,929	279,903	303,832	139,952
Long Beach	91,010	338,746	429,756	169,373
Los Angeles HD**	547,050	1,952,013	2,499,063	976,007
Madera	38,784	281,584	320,368	140,792
Merced	32,874	305,549	338,423	152,775
Monterey	29,721	330,038	359,759	165,019
Orange	231,622	721,828	953,450	360,914
Pasadena	13,541	0	13,541	0
Placer**	13,565	297,834	311,399	148,917
Riverside	210,326	664,594	874,920	332,297

Local Health Jurisdiction	Current STD Core Funding	Current STD Prevention and Collaboration Funding*	Total Combined STI Prevention and Collaboration Funding (Beginning FY 24/25)	Total Amount LHJs Must Use to Support CBOs*
Sacramento	161,204	493,538	654,742	246,769
San Bernardino	246,335	646,194	892,529	323,097
San Diego	323,689	758,630	1,082,319	379,315
San Francisco	268,666	369,754	638,420	184,877
San Joaquin	165,234	383,446	548,680	191,723
San Mateo	43,740	350,560	394,300	175,280
Santa Barbara	32,237	325,622	357,859	162,811
Santa Clara	147,955	502,002	649,957	251,001
Santa Cruz	20,539	0	20,539	0
Shasta	17,346	275,240	292,586	137,620
Solano	37,066	316,360	353,426	158,180
Sonoma	35,715	316,397	352,112	158,199
Stanislaus	80,093	345,114	425,207	172,557
Tulare	45,509	349,311	394,820	174,656
Ventura	49,684	377,195	426,879	188,598
Yolo	16,521	0	16,521	0
Yuba	0	263,080	263,080	131,540
Total	**3,647,000**	**13,600,000**	**17,247,000**	**6,800,000**

**50% of LHJ STD Prevention & Collaboration funds must support CBOs via direct funding or in-kind support.*
***HD=health department. Alameda HD excludes Berkeley. Los Angeles HD excludes Pasadena and Long Beach.*

Appendix: Current Funding Formulas

STD Core funding formula:

- All local health jurisdictions (LHJs) were eligible to receive funds, with a floor of $10,000 and a ceiling of 15% of the total amount of STD core local assistance funds available. The formula was applied to all LHJs and then reviewed to determine if they met the floor or exceeded the ceiling.
- Funds allocated to LHJs that were less than the floor or greater than the ceiling were proportionally reallocated to the remaining funded LHJs.

- Funding formula inputs:
  - 10% of the allocation was based on 3-year mean population estimates for persons 12-30 years of age in the LHJ using California Department of Finance (DoF) estimates (2016-2018).
  - 10% of the allocation was based on 3-year mean population estimates in the LHJ for African American/Black and Hispanic/Latinx individuals using DoF estimates (2016-2018).
  - 80% of the allocation was based on weighted, 3-year mean gonorrhea and syphilis case counts (2016-2018) in the LHJ, with the following weights:
    - Gonorrhea = 1
    - Primary, secondary, and early latent syphilis cases among males = 25
    - All syphilis cases among non-pregnant females 15-44 years of age = 50
    - All syphilis cases among pregnant females = 100

STD Prevention and Collaboration funding formula:

- All LHJs accounting for 95% of the total congenital syphilis and/or early syphilis morbidity for 2019 were considered eligible (N=30).
- Eligible LHJs received a floor of $250,000. Remaining funds were distributed using LHJ-specific estimates of population (50%), poverty (25%), and race/ethnicity of populations disproportionally affected by syphilis and congenital syphilis in California (25%).
- Population calculations used 2020 DoF estimates. Poverty was calculated using 2019 US Census Data (percent in poverty) applied to the 2020 DoF population estimates. Race/ethnicity included populations with the highest rates (Black/African American, American Indian/Alaska Native) and with the highest number of cases (Hispanic/Latinx) of early and congenital syphilis.
- Funding formula was developed in collaboration with CHEAC, CCLHO, and other stakeholders.

Contact Information

Questions related to these funding streams may be directed to CDPH STD Control Branch at STDLHJContracts@cdph.ca.gov.

State of California—Health and Human Services Agency
California Department of Public Health

TOMÁS J. ARAGÓN, MD, DrPH
Director and State Public Health Officer

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Allocation Letter

January 24, 2024

TO: ELIGIBLE CALIFORNIA LOCAL HEALTH JURISDICTIONS (LHJs)

SUBJECT: STI PREVENTION AND COLLABORATION ALLOCATIONS

The California Department of Public Health (CDPH), Sexually Transmitted Diseases Control Branch (STDCB) is pleased to announce the intent to award state general funds to LHJs to support sexually transmitted infection (STI) prevention and control activities. These allocations are for a full two years and set to begin on July 01, 2024 and end on June 30, 2026.

This allocation combines the previous STD Core and STD Prevention and Collaboration allocations authorized by California Health and Safety Code (H&SC) Section 120511. The funds must be used for the implementation of public health activities related to monitoring, prevention, testing, and linkage to and retention in care activities for the most vulnerable and underserved individuals living with, or at high risk for, STIs in collaboration with community-based organizations (CBOs) providing services within the LHJ. For the purposes of this grant, STIs are defined as chlamydia, gonorrhea, syphilis, congenital syphilis, and mpox. Activities may include integrated services for STIs, viral hepatitis, human immunodeficiency virus (HIV) infection, and drug overdose, to the extent they improve health outcomes for people living with, or at risk for, STIs.

A portion of funds allocated to LHJs shall be provided to, or used to support activities in partnership with, CBOs or nonprofit health care providers, provided that there are CBOs or nonprofit health care providers in the jurisdiction that can conduct the activities and provide these services consistent with H&SC 120511.

A summary of the funding allocation process, including the final annual allocation amounts for the LHJs and detail on the CBO amount by jurisdiction, webinar recordings, Reference Guide and frequently asked questions (FAQs) are available at: STI/HCV Local Assistance Funding SharePoint.

LHJs will be required to prepare and submit a workplan for each year along with a program budget available at: STI/HCV Local Assistance Funding SharePoint. LHJs will indicate in their workplans and program budgets the activities they plan to conduct during the given budget period, including which budget items will support CBOs. LHJs will also be required to submit data and reporting according to the table below.

Frequency	Report Deadlines	Report Recipient
Semi-Annual (Narrative summary reports and quantitative data tables)	February 15th August 15th	STDLHJContracts@cdph.ca.gov
Ongoing (STI Case Closure)	Ongoing, within 45 days of report to the LHJ	CalREDIE or other CDPH-developed data system, or by other means per agreement between the local STD Control Officer and the STDCB.

LHJs must adhere to the workplan activities, and any subsequent revisions, along with all instructions included in the STI Prevention and Collaboration Reference Guide, policy memoranda, or directives issued by CDPH-STDCB. CDPH-STDCB will make any changes and/or additions to these guidelines in writing and, whenever possible, notification of such changes shall be made 30 days prior to implementation.

In order to receive these funds, the LHJ must return the following documents no later than close of business, **March 29, 2024** via email to STDLHJContracts@cdph.ca.gov with a cc to Adriana.Cervantes@cdph.ca.gov.

- Include the name of your local jurisdiction in the subject line to help us easily identify which LHJ you represent (*County of XXXX – STI Prevention and Collaboration Allocation*).

1. **LHJ Program Contact Information**
2. **Acceptance of Award**
3. **Annual Workplan for FY 2024-2025***
    a. Complete the workplan in Qualtrics.
4. **Budget for Fiscal Year (FY) 2024-2025***
    a. Download the budget template from the STI/HCV Local Assistance Funding SharePoint site.

**Note: The workplan and budget for FY 2025-2026 will be due by March 3, 2025.*

The STI Prevention and Collaboration Allocations webinar has been scheduled for **January 25, 2024 from 1:00 pm to 2:30 pm.** During the webinar, STDCB will provide an overview of the funding including background, goals of the funding, local health jurisdiction funding allocation information, workplan activities, and anticipated timeline. The presentation will be followed by a question and answer period. Please forward this invitation to other staff in your jurisdiction that should participate. This meeting will be recorded for those unable to attend.

If you have any questions, please feel free to email your Regional Capacity Building Coordinator with a cc to Jasmin Delgado (Jasmin.Delgado@cdph.ca.gov) and Adriana Cervantes (Adriana.Cervantes@cdph.ca.gov).

Sincerely,

Alexia McGonagle, Chief
Business Operations Support Section
STD Control Branch

cc: Kathleen Jacobson, MD, Chief, STD Control Branch
Karlo Estacio, Assistant Branch Chief, STD Control Branch
Rachel Piper, Chief, Contracts and Purchasing Unit
Adriana Cervantes, Local Assistance Funding Specialist
Jessica Frasure-Williams, Chief, Program Development Section
Jasmin Delgado, Chief, Local Capacity Building Unit
Cary Escovedo, Bay Area Regional Capacity Building Coordinator
Danelle Del Rincon, Southern California Regional Capacity Building Coordinator
Emily Gordis, Central Inland Regional Capacity Building Coordinator
Ryan Martin-Valenzuela, Northern Regional Capacity Building Coordinator

ACCEPTANCE OF AWARD

County of San Bernardino

Agreement Number: 24-STI19

Allocation Amount: $1,785,058.00

Allocation Funding Period: July 1, 2024, through June 30, 2026

I hereby accept this allocation. By accepting this allocation, I agree to the requirements as described in the 2024 - 2026 STI Prevention and Collaboration Allocation Reference Guide and any other conditions stipulated by the California Department of Public Health, Sexually Transmitted Diseases Control Branch.

_____	_____
Authorized Signature	Date
Dawn Rowe	Chair, Board of Supervisors
Print Name	Title