ANALYSIS

Oregon Health Authority OHA Administration for Strategic Preparedness & Response Program

Analyst: Steve Robbins

Request: Approve the submission of a federal grant application by the Oregon Health Authority (OHA) for the Medical Reserve Corps State, Territory and Tribal Nations, Representative Organizations for Next Generation (MRC-STTRONG) program in the amount of up to \$5 million to the U.S. Department of Health and Human Services' Administration for Strategic Preparedness and Response (ASPR).

Analysis:

ASPR, within the U.S. Department of Health and Human Services, leads the nation's preparedness for, response to, and recovery from disasters and public health emergencies. The Office of Medical Reserve Corps (MRC) is within ASPR and is composed of a national network of 300,000 volunteers organized into local community-based groups committed to improving local emergency response. MRC volunteers include medical and public health professionals as well as other community members without healthcare backgrounds. MRC units bolster their communities' preparedness and emergency response infrastructures by providing supplemental personnel when needed, thus making those local communities less likely to be reliant on state and national resources. For example, thousands of MRC missions operationalized testing and vaccination events to those most at-risk Oregonians during the COVID-19 pandemic.

Only one award for this grant will be made in each state, so OHA will be the lead applicant for Oregon and will both distribute awarded funds to the state's existing 15 MRC units for local capacity building and expansion, as well as to launch 5 new MRC units across the state.

OHA's planned use of the funds would reduce reliance on state public health operations and volunteer pools by providing a short-term infusion of money to bolster existing local MRCs; help MRCs to build consistent unit plans, policies and procedures that protect volunteer safety and ensure accurate screening and credentialing for volunteers; and build new MRCs to be deployed in rural and underserved areas where they currently lack the one-time resources needed to launch MRC units.

ASPR announced the grant on March 1, 2023, and the application is due April 30, 2023. OHA provided timely notice to the Legislature on April 13, 2023. If awarded, the grant will begin June 1, 2023, and will offer funding for two years (up to \$2.5 million annually) through May 31, 2025. No state match is required.

Legislative Fiscal Office Recommendation: The Legislative Fiscal Office recommends approval.

Oregon Health Authority Heath

Request: Authorization to apply for a grant of up to \$2,500,000 over two years for the Oregon Health Authority's Medical Reserve Corps program from the U.S. Department of Health and Human Services.

Recommendation: Approve the request.

Discussion: The Oregon Health Authority (OHA) requests authorization to apply for a two-year, \$2,500,000 grant from the U.S. Department of Health and Human Services to expand Oregon's Medical Reserve Corps (MRC) program and to increase the capacity of the 15 existing MRCs. MRCs are locally based, volunteer driven organizations of medical and public health professionals who respond to health emergencies and promote healthy living. OHA provides the infrastructure needed to organize and support the MRCs; it also maintains a state-level database and medical volunteer pool to respond to disasters.

If awarded, OHA would use the grant funds primarily to bolster existing MRCs, making investments in recruitment of volunteers, equipment, training, uniforms, and organizational capacity. Grant funds would also be used to create five new corps in different parts of the state. If awarded, OHA would request position authority for a limited duration Program Analyst 3 position (0.50 FTE) to assist with the planning and policy work needed to establish the new MRCs. The new corps are expected to be operational in calendar year 2025.

OHA learned of the grant on March 9, 2023, with applications due on April 30, 2023. The grant runs from June 1, 2023 to May 31, 2025. The grant does not have a match requirement. Grant awards will be between \$250,000 and \$2,500,000, with OHA requesting the maximum amount allowed. OHA anticipates expenditures will return to more normal levels after the grant expires as the grant funds will be used primarily for one-time capacity investments in existing MRCs. The ongoing costs of the new MRCs will be paid for using funds from OHA's existing federal Hospital Preparedness and Public Health Emergency Preparedness awards or by the MRC sponsor, typically a local government.

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April 13, 2023

Senator Elizabeth Steiner, Co-Chair Representative Tawna Sanchez, Co-Chair Joint Committee on Ways and Means 900 Court Street NE H-178 State Capitol Salem, OR 97301

Dear Co-Chairs:

Nature of the Request

The Oregon Health Authority (OHA) requests permission to apply for the Medical Reserve Corps State, Territory and Tribal Nations, Representative Organizations for Next Generation competitive funding through the U.S. Department of Health and Human Services' Administration for Strategic Preparedness and Response (ASPR), Office of Preparedness, Office of the Medical Reserve Corps. This grant would allow the Oregon Health Authority to build the network of Oregon Medical Reserve Corps units to better respond to disaster and community emergencies and diversify their capacity to meet the needs of underserved communities and at-risk individuals.

This grant opportunity would provide OHA up to \$2,500,000 annually over two years, beginning June 1, 2023, and ending May 31, 2025. State match is not required. This grant was announced by ASPR on March 1, 2023, and OHA learned of this grant opportunity on March 9, 2023. The application due date is April 30, 2023. Only one award will be made per state; OHA will be the lead applicant for the state and distribute the majority of funding to the state's existing 15 Medical Reserve Corps (MRC) units for local capacity building and fund approximately 5 counties to start new MRC units.

This funding will:

• Provide outreach and emergency public health services to individuals and communities who persistently have trouble accessing standard services. Due to their flexibility and status, MRC units and volunteers were able to serve in thousands of missions during the COVID-19 pandemic response to operationalize testing and vaccination events to some of the most at-risk Oregonians.

Senator Elizabeth Steiner Representative Tawna Sanchez April 13, 2023 Page **2** of **3**

- Expand MRC units and health care volunteer activity in heavily underserved areas that do not currently have an MRC unit, particularly in rural counties where there is a lack of staffing and resources to launch MRC units.
- Build local and regional capacity to deploy medical volunteers in a disaster and improve business operations by reducing county reliance on OHA's state volunteer pool.
- Reduce costs of emergency public health operations by engaging local MRC volunteers.
- Build consistent and high-quality MRC unit plans, policies and procedures that protect volunteer safety, ensure accurate volunteer screening and credentialing, limit legal and financial risks, and recognize volunteer service to support sustainability.
- Support and contribute to OHA's 2030 goal to eliminate health disparities by engaging healthcare volunteers who have demonstrated success in reaching underserved community groups.

Agency Action

Upon notification of this funding opportunity, OHA reached out to all 15 MRC units in Oregon for feedback. This feedback will be incorporated into the single state grant application that supports all MRC units, including their work plans and budgets, along with letters of support. Since this opportunity only allows for one award per state, territory, tribal nation, freely associated state, and the District of Columbia, OHA will lead the application submission and include the MRC units as subrecipients of these funds.

Action Requested

OHA requests permission to apply to the Medical Reserve Corps State, Territory and Tribal Nations, Representative Organizations for Next Generation grant from the U.S. Department of Health and Human Services (HHS).

If funded, OHA will request limited duration position authority for a 0.5 FTE program analyst 3 to manage the project and assist with the contracting and programmatic reporting. This position would be funded by this grant, and two other HHS grants, the Hospital Preparedness Program and Public Health Emergency Preparedness grant awards.

Senator Elizabeth Steiner Representative Tawna Sanchez April 13, 2023 Page **3** of **3**

Legislation Affected There is no legislation affected.

Singerely,

Dave Baden Interim Director

EC: Steven Robbins, Legislative Fiscal Office Patrick Heath, Department of Administrative Services Kate Nass, Department of Administrative Services Amanda Beitel, Legislative Fiscal Office