

State Aid for General Public Health Work: Formula funded aid from state provides a base grant that reimburses 100% of Eligible Expenses, plus 36% of expenses over base (20% for NYC); Only reimburses for core public health services set forth in statute; services and formula established in state statute.

Local Share: After the base grant is expended, local government share= 64% of eligible expenses (80% in NYC) for core public health services, and 100% of ineligible expenses.

Grants: state, federal (usually state pass-through) or private: **Awarded for specific programs/purposes.** Funds can only be used for grant requirements, usually includes personal services, fringe expenses and non-personal services. Federal funds cannot supplant (be used instead of) state or local funds.

Other Programs: Many local health departments provide services for other state programs that receive separate state reimbursement with varying local share amounts. Examples include Early Intervention and PreK Services for Children with Special Health Care Needs. Some provide services such as medical examiners which are a 100% local expense.

State Aid
"Article 6"

Local Share
What State Doesn't Cover

Fees and Fines

Fees and fines: These are collected for required permits or services (fees) or violations of public health laws (fines). Many are set in state law through either a fixed dollar amount or cap. Fees can't exceed the cost of providing the service.

Grants
State, Federal, Private

Third Party Insurance

Insurance: Local health departments can charge private or public insurance and set a sliding scale of fees for clinical services based on ability to pay.

Other programs

Other Limits

Limits on state and local revenues: Limits that affect local health department funding include state appropriation limits, state property tax cap, sales tax rates/receipts, competing local needs and state decisions around what constitutes eligible costs.

HOW NYS LOCAL HEALTH DEPARTMENTS ARE FUNDED

Additional funding during public health emergencies

Article Six: Article Six of the Public Health Law provides a process to declare an Imminent Threat to Public Health (ITPH). This can be a statewide declaration or can be approved for one or more counties. Under an ITPH, a municipality must first expend the state approved funding for any core public health service that supports the emergency response. Once the non-emergency budget is exceeded, the state will reimburse additional emergency expenses at 50% state/local share of eligible expenditures. Article 6 is always considered the payer of last resort, which means state funding reimburses only eligible expenses not covered by other emergency funding sources.

Federal Emergency Funding: The federal government awards emergency funds through many agencies. FEMA reimbursement is typically coordinated through the county emergency management office. Congress may appropriate additional emergency funding to other federal agencies to distribute to states, localities and territories. The largest metropolitan areas in the country receive direct awards from the federal government (NYC in NYS). For other localities funds go to the state first. Funding allocations for localities may be set by the federal government (usually an overall percentage of the award that must go to fund localities, but typically the state decides how much of the federal funding local health departments receive. Funds may be added to existing state/local contracts or may require new grant contracts. Federal funds are time-limited and come with restrictions on what costs the funds can be used to cover. Restrictions are often related to how Congress authorized the funding. Federal funding prohibits supplanting of state or local funding.

State Emergency Funding: The state may provide direct funding or in-kind resources to localities to support an emergency response. This is typically at the discretion of the state. Examples of in-kind resources during COVID-19 would be the Virtual Contact Tracers program and the state-run COVID-19 vaccination and testing sites. They may also choose to allow staff funded on grants to support emergency response, with the county still allowed to charge that staff time to the grant.