

**Local Public Health Authority PE 51-01 and 51-02 Public Health Modernization and PE 51-05 PH Infrastructure Grant
Funding Table**



Updated April 2026

This document provides an overview of funds awarded to LPHAs through Program Element (PE) 51. For more detailed PE 51-01 and PE 51-02 budget guidance and examples of allowable costs, see [PE 51: Public Health Modernization Budget Guidance](#).

	2025-2027		2022-2027
Program Element	PE 51-01 (Section 1: LPHA Leadership, Governance and Implementation)	PE 51-02 (Section 2: Regional Public Health Service Delivery)	PE 51-05 (Section 4: Public Health Infrastructure: Workforce; Changing to Section 3 in PE 51 effective 7/1/2025)
Start-end dates	7/1/2025-6/30/2027	7/1/2025-6/30/2027	12/1/2022-11/30/2027
Funding source	State General Fund	State General Fund	Federal CDC funds -Public Health Infrastructure
Total funding amounts	OHA is awarding initial PE 51 modernization funding for the biennium based on a continuation of 2023-2025 funding levels, with \$51,376,092 allocated to LPHAs. \$4.4 million will be awarded through PE 51-02 regional funding. \$46,506,331 is being awarded through PE 51-01 using the public health modernization funding formula. \$469,761 was held for LPHA accountability metrics incentive payments, with amounts for each LPHA determined in August 2025 based on progress towards selected LPHA process measures. (Half of the incentive payments for each LPHA was added to PE 51-01 awards in fall 2025; the other half will be added in July 2026. A PE 51 Inflation increase is being added in July 2026. For total PE 51-01 and PE 51-02 funding amounts, including incentive payments and inflations increase, see PE 51-01 and PE 51-02 2025-2027 Funding Totals by LPHA .)		\$14,500,000 was allocated to LPHAs using the PH modernization funding formula, except for Multnomah County, which is funded directly by CDC.

	2025-2027		2022-2027
Program Element	PE 51-01 (Section 1: LPHA Leadership, Governance and Implementation)	PE 51-02 (Section 2: Regional Public Health Service Delivery)	PE 51-05 (Section 4: Public Health Infrastructure: Workforce; Changing to Section 3 in PE 51 effective 7/1/2025)
Payment method	One half of each LPHA's allocation was awarded in FY26 and the other half will be added in FY27. Paid monthly.	One half of each LPHA's allocation was awarded in FY26 and the other half will be addedn FY27. Paid to Fiscal Agent of regional partnership monthly.	Each LPHA chose whether to receive its PE 51-05 funding awarded in the first year (with rollover to subsequent years) or receive its award split across amulti-year time period.
Carryover of unspent funds allowed?	Unspent funds in FY26 will be available in FY27 and may be spent until end date of 6/30/2027.	Unspent funds in FY26 will be available in FY27 and may be spent until end date of 6/30/2027.	Yes, until end date of 11/30/2027.
Budget required?	Budgets from all LPHAs due to OHA 8/1/2025.	Budgets from PE 51-02 fiscal agents due to OHA 8/1/2025.	Currently, a written budget is not required. OHA has negotiated specific reporting requirements with CDC and will notify LPHA of any changes.
Budget modification	Modification to an approved budget of 25% or more for any budget category may only be made with OHA approval. Refer to PE 51: Public Health Modernization Budget Guidance for the types of expenses that require prior OHA approval.		N/A
Work plan required	Work plan due 8/1/2025.	Work plan due 8/1/2025.	Not required
Funded activities	Implement strategies for Leadership and Governance; Building Infrastructure for Public Health Foundational Capabilities, including Health Equity and Cultural Responsiveness; and improving infrastructure for Communicable	-Implement strategies for public health service delivery using regional approaches, which may be through Regional Partnerships, utilizing regional staffing models, or implementing regional projects.	Recruit, hire, support and retain public health staff. See Section 3 of PE 51.

	2025-2027		2022-2027
Program Element	PE 51-01 (Section 1: LPHA Leadership, Governance and Implementation)	PE 51-02 (Section 2: Regional Public Health Service Delivery)	PE 51-05 (Section 4: Public Health Infrastructure: Workforce; Changing to Section 3 in PE 51 effective 7/1/2025)
	Disease Control, Emergency Preparedness and Response, and Environmental Health as described in Program Element (PE) 51: Public Health Modernization	-Use regional strategies to improve Regional Infrastructure for communicable disease control, emergency preparedness and response, environmental health, and health equity and cultural responsiveness.	
Allowable expenses	See PE 51 budget guidance. Any expenses, other than those listed below as non-allowable, that align with the LPHA's PE 51 workplan for public health modernization. (LPHA's workplan must align with goals and work plan requirements listed in Attachment 1 of PE 51, based on legislative intent for public health modernization.)	See PE 51 budget guidance. Any expenses, other than those listed below as non-allowable, that align with the LPHA's PE 51-02 work plan.	-Any expenses, other than those listed below as non-allowable. -There are no restrictions on the type of positions that can be hired for public health capacity building. -Some costs associated with recruitment and hiring are allowable, including supplies and equipment needed to perform jobs, personal protective equipment, data management and other necessary supplies.
	OHA may request additional information on proposed purchases of equipment with an acquisition cost of more than \$5,000. All equipment purchases must directly contribute to meeting PE51 requirements. Check with OHA before making equipment purchases of \$5000 or more if not already included in OHA-approved budget.		
Non-allowable expenses	-Direct medical services, including but not limited to payment for durable medical equipment and supplies; vaccine and medications; staff, supplies, or		-Research or political actions. -Clinical care expenses such as medical supplies or medication.

	2025-2027		2022-2027
Program Element	PE 51-01 (Section 1: LPHA Leadership, Governance and Implementation)	PE 51-02 (Section 2: Regional Public Health Service Delivery)	PE 51-05 (Section 4: Public Health Infrastructure: Workforce; Changing to Section 3 in PE 51 effective 7/1/2025)
	equipment used to screen people at high risk or to confirm a diagnosis; or clinical education provided by a health care professional. -Purchase of vehicles, if not related to modernization goals. (OHA may approve purchase or lease of vehicles on a case-by-case basis if the LPHA can articulate how this expense contributes to modernization goals.) -Purchase of meals for meetings when more than 50% of attendees are LPHA/county employees. -Funds awarded may not supplant state, local, other non-federal, or other federal funds. Funds may not be used to supplant state covered services, nor to replace services required under the existing Public Health Financial Assistance Agreement.		-Capital equipment (items with a per unit value of \$5,000 or greater.) -Special benefits for employee recruitment and retention packages or staff retreats. -Vehicles. -Building improvements.

Questions about PE 51 funding? Contact the Office of the State Public Health Director’s Local and Tribal Public Health Team
lpha.tribes@oha.oregon.gov.