



**Public Health**  
Prevent. Promote. Protect.

Idaho Public Health Districts

# Idaho Public Health Districts

February 2014

## Loss of Grant Funding for STD Testing Impacts Local Public Health

The two most common sexually transmitted diseases (STDs), chlamydia and gonorrhea, are important preventable causes of chronic pelvic pain, infertility, and serious complications with pregnancy. Testing for, treating, and preventing the spread of STDs is a core function of Idaho's Public Health Districts.

For many years, Idaho received federal grant funding through collaboration between the Centers for Disease Control and Prevention and the Department of Health and Human Services to participate in the national Infertility Prevention Project (IPP). The IPP funded chlamydia and gonorrhea screening and treatment services for low-income, sexually active women and men who met selective screening criteria. Idaho's Public Health Districts received funding to provide clinical services for these individuals. In addition, Idaho's Bureau of Laboratories (IBL) received IPP funding to provide fee waivers for laboratory testing of chlamydia, gonorrhea, and syphilis sent to them by the health districts for low income clients who met the IPP criteria and didn't have any form of insurance.

On December 31, 2013, the IPP funding to IBL and the local health districts ended. This means that IBL will no longer provide no-cost STD testing for the health districts' low income clients. As a result, the costs of these laboratory tests were shifted to the local public health districts. In

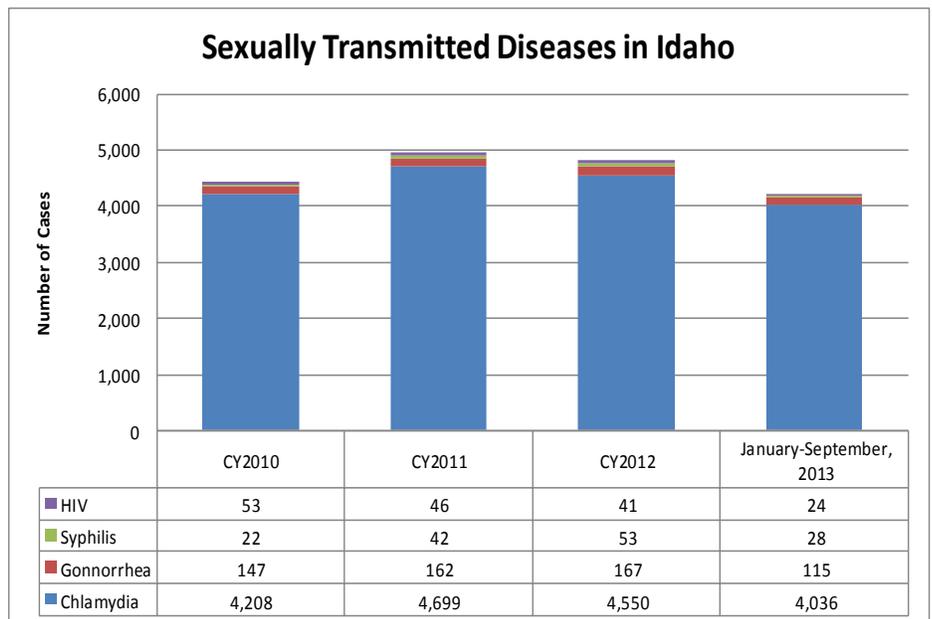
addition, the health districts' ability to offer the clinical evaluation is seriously compromised.

The vast majority of clients seen in health district clinics are low income and uninsured. Title X Family Planning services are provided on a sliding fee scale based on the individual's income and we are required by Federal mandate to slide fees to zero for those at or below 100% of poverty. Collecting fees from most clients for either the lab or clinical services is not an option.

As you can see from the chart below, over 4,000 cases of chlamydia are

diagnosed in Idaho each year. As public health officials, we are concerned that reducing the current volume of STD testing will increase the prevalence of disease in our communities. For infected individuals, this could lead to serious health issues as well as the spread of the disease to others—something that public health practitioners work hard to prevent.

This loss of IPP funding will result in the public health districts incurring an estimated \$80,000 in unreimbursed lab fees and \$75,000 in clinic expenses—costs that will require reductions in other prevention service areas if we are to continue testing at the same rate.



Source: Idaho Department of Health & Welfare, STD Statistics (<http://www.healthandwelfare.idaho.gov/?TabId=393>)

### HEALTHY PEOPLE IN HEALTHY COMMUNITIES

**PANHANDLE HEALTH DISTRICT (1)**

Director: Lora Whalen  
208-415-5102  
[www.phd1.idaho.gov](http://www.phd1.idaho.gov)

**PUBLIC HEALTH - IDAHO NORTH CENTRAL DISTRICT (2)**

Director: Carol Moehrle  
208-799-0344  
[www.idahopublichealth.com](http://www.idahopublichealth.com)

**SOUTHWEST DISTRICT HEALTH (3)**

Director: Bruce Krosch  
208-455-5315  
[www.publichealthidaho.com](http://www.publichealthidaho.com)

**CENTRAL DISTRICT HEALTH (4)**

Director: Russell Duke  
208-327-8501  
[www.cdhd.idaho.gov](http://www.cdhd.idaho.gov)

**SOUTH CENTRAL PUBLIC HEALTH DISTRICT (5)**

Director: Rene LeBlanc  
208-737-5902  
[www.phd5.idaho.gov](http://www.phd5.idaho.gov)

**SOUTHEASTERN IDAHO PUBLIC HEALTH (6)**

Director: Maggie Mann  
208-239-5258  
[www.siphidaho.org](http://www.siphidaho.org)

**EASTERN IDAHO PUBLIC HEALTH DISTRICT (7)**

Director: Geri Rackow  
208-533-3163  
[www.phd7.idaho.gov](http://www.phd7.idaho.gov)