Florida Public Health Practice-Based Research Network-DACS 71129

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Florida PBRN

Comparative Cost Study of STD Services in Florida and Georgia



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- To identify the unit costs of STD prevention and control services and examine the effects of variations in delivery system characteristics on costs including:
 - standardization/centralization of programs
 - centralization of IT and HR systems
 - economies of scale related to population size of CHD jurisdiction
 - local tax and other revenue support for CHD STD services
 - responsiveness to local community governance

Why Unit Cost of STI Services?

- STD prevention and control programs are among the most highly reported local public health services/surveillance data
- Surveillance data is well established and standardized (CDC methodology)
- Service provided by every county in the state
- Strong finance and service data systems to support service delivery
- Florida has high AND increasing rates of STDs major public health issue!

Overall Cost Model

Inputs Staff Materials Equipment Infrastructure

Processes

Testing Treatment Partner Notification

Outputs

Cost per unit of service



Secondary Data

- Financial Information Reporting System (FIRS) expenditure data
- Employee Activity Report System (EARS) employee time allocation per cost center or activity.
- Patient Reporting Investigation Surveillance Manager (PRISM) – case management and surveillance tracking system for STDs



Primary Data

Verifying and clarifying 2° data issues 1) Verify staff time allocation in EARS with sample of small, medium and large CHDs

- 2) Surveys to CHDs
 - to identify unique services or variation in service delivery

• To fill in gaps from 2⁰ data analysis

3) Interviews with key informants to discuss and clarify findings





Outcome variable – STD unit cost (by county) **Possible Predictors** • County characteristics: Population size • % nonwhite • % 24 or under STI rates % uninsured CHD characteristics: Additional funding from county # DIS staff

Other Considerations

Trends in funding of services and disease rates
Cost savings due to early detection and treatment, especially for pregnancies (mandatory testing with opt out option).

Policy/Practice Implications

 Understand what service components are the most costly (outreach, testing, treatment, etc.) and why

- Evaluate funding distribution and priorities for STD services by county
- Re-evaluate processes and procedures to reduce costs and increase value