



Blue Ridge Health District: Funding & Impact Update

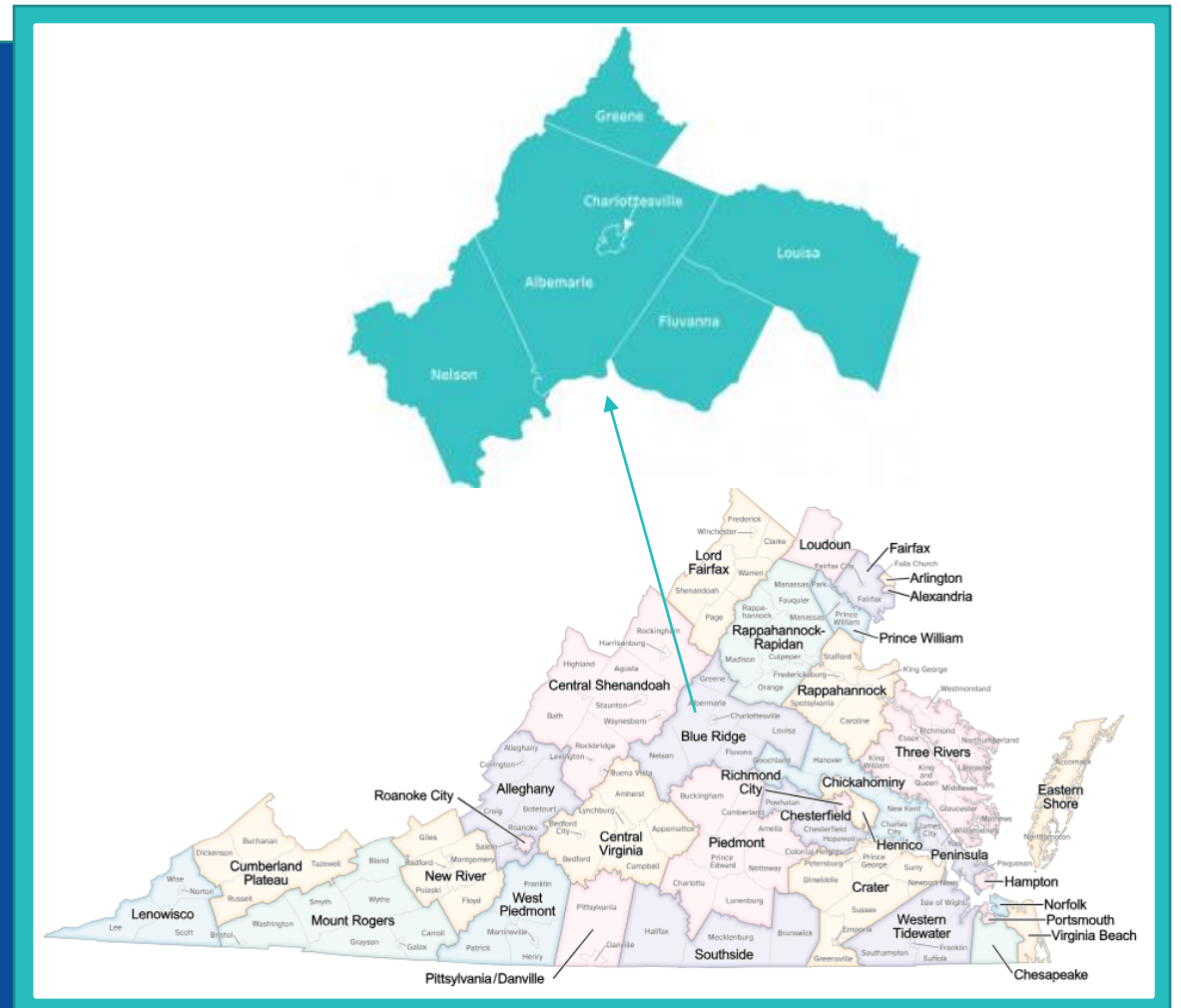
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Ryan L. McKay, BRHD Health Director

September 15, 2025

Blue Ridge Health District

- Charlottesville/Albemarle Health Department
- Fluvanna County Health Department
- Greene County Health Department
- Louisa County Health Department
- Nelson County Health Department
- Yancey Community Health Center



BRHD Core Services

Public health impacts every person who lives in and visits Charlottesville



Epidemiology Surveillance and response to communicable disease threats.



Environmental Health Restaurant inspections, well/septic permitting, food safety oversight.



Vital Records Issuance of birth, death, marriage, and divorce certificates.



Health Clinics Immunizations, STI testing/treatment, family planning, TB testing.



Sexual Health Walk-in STI testing ("Test & Go") and education.



Harm Reduction Naloxone distribution, fentanyl test strips, medication disposal kits, and tobacco and vaping prevention and cessation.



Emergency Preparedness Disaster planning and coordination, including Medical Reserve Corps (MRC) management.



Population Health Community referrals and public health communications.



Maternal and Child Health (MCH) Car seat safety, safe sleep, lactation support, postpartum outreach.



Outreach and Engagement Trainings and events for CHWs, family support workers, and peer specialists



WIC Services Issuance of WIC food benefits, nutrition counseling, breastfeeding and other nutrition education.



Fully or partially grant funded

FY25 Funding Cuts

Difference between FY25 and FY26 Grant Funding: -\$2,411,174

March 2025 COVID-19 Response Fund Recission

- **\$2.9 million returned**
- 15 positions lost
- Immediate impact
 - Community engagement dropped from 25 events in March to only 10 in April
 - Reduced TB screening, immunization access, and LTSS screenings
- Long-term impact
 - Diminished ability to respond to COVID outbreaks in congregate settings
 - Increased risk of communicable disease incidences without staff to respond to them

FY25 Funding Cuts, Continued...

Ryan White HIV Services

- VDH reduced funding to grant recipients in order to continue to provide lifesaving HIV medications to clients
- BRHD is not receiving any funds from the Ryan White program – a net loss of \$72,000 used for an HIV Services Manager positions
- **Total funding lost = \$72,000**

Disease Intervention Specialist (DIS) Funding

- DIS conducts case management for clients diagnosed with STIs/HIV
- Only entity in the District that conducts this case management
- BRHD needs to hold or reallocate an FTE to assure services
- Position was 100% grant funded until July 1, 2025
- Currently using a mix of federal grant dollars and cooperative budget dollars to fund position
- **Total funding lost = \$5,661.41**



FY26 Potential Funding & Program Cuts

Family Planning (Title X)

- \$31,000 at risk that contributes to salaries for NP and Sr. Public Health Nurse
- Possible increase in demand for BRHD services due to other providers losing funding

Maternal and Child Health (Title V)

- BRHD received only 93% of expected funding; \$6,965 gap must be filled locally to retain MCH Coordinator

Tuberculosis (TB) Control

- International funding cuts may lead to increased local TB cases
- More BRHD resources will be needed for screening and case management

Emergency Preparedness (PHEP)

- Federal funding could drop by \$385M nationally; VDH may receive only 78% of normal
- Direct impact to Director of Emergency Preparedness and District Epidemiologist
- Undermines readiness for outbreaks and emergencies (e.g., STEC, measles, meningococcal disease)
- Weakens capacity to lead public health response in state-designated Emergency Support Functions (ESFs)



Potential Funding Cuts Impact Summary

Staffing	Up to 8 FTEs and 4 contract positions at risk →
Services	Fewer clinic hours, outreach events, delays in testing & treatment
Epidemiology and Surveillance	Slower outbreak response, limited data collection, fewer preventive efforts
Equity and Access	Most vulnerable populations (low-income, rural, uninsured) hit hardest
Emergency Preparedness and Response	Reduced capacity to respond to emergencies; MRC program could lose its local coordinator — jeopardizing response readiness

Positions at Risk

- Director of Epidemiology
- Emergency Manager
- MCH Coordinator
- MRC Coordinator
- CHW Engagement Specialist
- Population Health/Communications Coordinator
- Outreach Network Coordinator
- Public Health Nurse (PHN), Sr.
- PHN Supervisor
- Human Services Coordinator
- Nurse Practitioner
- Disease Investigation Specialist (DIS)

Impact in Charlottesville

Fiscal Year 2025 Highlights

Clinical Services

- 320 sexual health clients
- 157 family planning clients
- 162 TB screenings
- 1,673 immunization visits

Epi & DIS

- 655 disease case investigations
- 308 STI investigations

EP&R

- 633 volunteer hours
- 22 real-world incident responses
- 23 emergency exercises

Population Health

- 239 CHW office hours
- 185 CHW events
- 118 car seats (Cville/Albemarle)
- 89 cribs (Cville/Albemarle)



Impact in Charlottesville

Meningococcal and Measles Response

Meningococcal Disease

- February 2025
- Rare but serious infection that often affects young adults 16-23 years of age, and it can be fatal
- Over **250** exposed individuals
- BRHD EP&R, Clinical, and Epi teams worked together with community partners to offer vaccination and antibiotic clinics to serve those affected
- Administered **162** vaccines

Measles Response

- 2 measles cases were identified in late May and early June
- Over **350** exposed individuals
- BRHD Incident Management Team worked collaboratively with staff from UVA and VDH to conduct epidemiological outreach, investigation, and other response activities
- Successfully prevented further spread

Looking Ahead

Strategic Direction for Public Health in the City of Charlottesville

BRHD's budget plan for FY26 accounts for future losses to stabilize grant funding cuts

- Likely no change to FY26... but could impact FY27 with additional funding requests to move grant-funded positions to local
- Will have to make hard decisions about which positions outside of mandated service areas we seek funding for, prioritize, or opt not to fill

Implications for City's strategic priorities

- What does the City want for public health?
- Community Health Improvement Plan

2024-2025 MAPP2HEALTH: Priorities



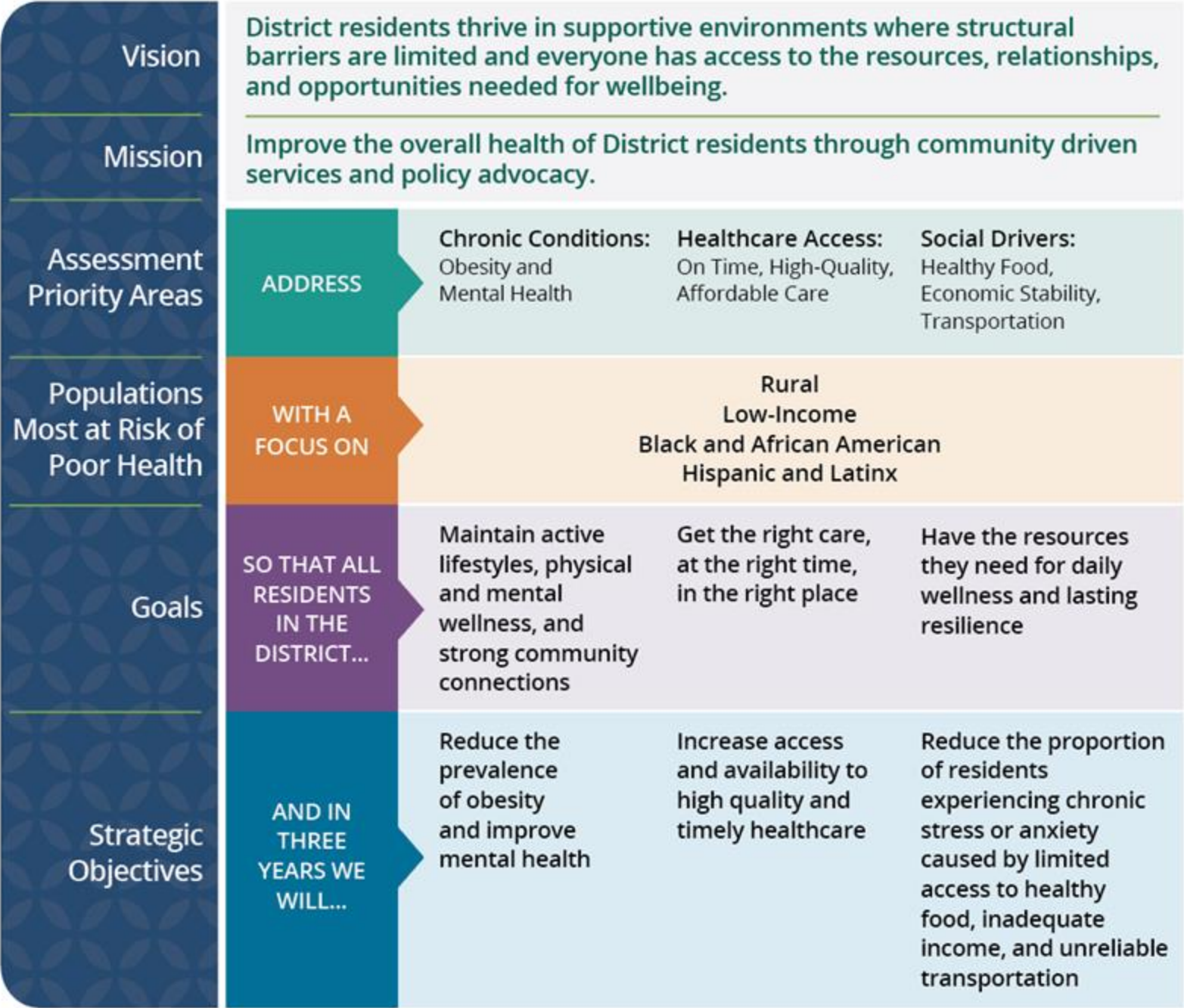
PRIORITY 1: Chronic Conditions
Obesity and Mental Health



PRIORITY 2: Healthcare Access



**PRIORITY 3:
Social Drivers of Health**
Healthy Food, Economic Stability,
Transportation



Thank You

BRHD Director
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MISSION

to protect and promote the health
and well-being of all Virginians

VISION

working together for healthy,
equitable communities



ACCOUNTABILITY • COMMUNICATION • DIVERSITY
EQUITY • EXCELLENCE • INTEGRITY • RESPECT • STEWARDSHIP

