

March 26, 2019

Joint Ways and Means Subcommittee on Human Services
Oregon 2019 Legislative Session

**Subject: AOC Public Health Budget Testimony on SB
5525**

Dear Co-Chair Beyer, Co-Chair Nosse and Members of the
Subcommittee,

Thank you for the opportunity to testify on the public health budget and Senate Bill 5525.

AOC strongly supports funding of \$47.7 million in the 2019-21 Oregon Health Authority budget to implement public health modernization. These investments are needed to achieve sustainable and measurable improvements in population health, as well as to strengthen and expand our local public health system, including a focus on communicable disease control and environmental health programs.

The Importance of Our Public Health System

Oregon is currently undergoing a public health system transformation focused on ensuring that critical public health protections are in place for every person in Oregon and that the public health system is prepared to address emerging health threats.

Funding Needs

The Oregon legislature established a Public Health Modernization framework through House Bill 3100 in 2015, and invested an initial \$5 million during the 2017-2019 biennium. That investment resulted in increased capacity to rapidly conduct outbreak investigations, better preparation for public health emergencies, and improved partnerships with tribes, regional health equity coalitions, and healthcare partners to prevent communicable disease and improve health outcomes.

The additional investment of \$47.7 million for the 2019-21 biennium will support a continued focus on preventing, monitoring, and responding to communicable diseases like measles, and will also allow us to expand and prioritize environmental public health threats like wildfire, unhealthy air, and unsafe drinking water. A modern public health system must plan for these public health emergencies together with local partners. The \$47.7 million leverages matching funds for local county investment in public health, and supports a system for collecting accountability metrics to ensure public health is measuring population level health outcomes.

- \$35 million will go to local public health authorities to: track, investigate, and stop public health threats; inform the public about health problems in the community and how to stay safe; prepare for and respond to emergencies and disasters; mobilize community partners to work together to address local challenges; and enforce laws and regulations that keep people safe.
- \$8.7 million will go to the Oregon Health Authority for: evaluation; upgrading the state

public health laboratory; enhancing data systems to make data more readily available for decision makers; workforce development; and general oversight and contract management.

- \$4 million will be dedicated to tribes for: assessment of their current public health systems; creation of public health transformation plans; partnerships; and creation of recommendations for roles and responsibilities of tribes in the public health system.

CCO 2.0 Success is Directly Tied to a Strong Public Health System

Governor Brown has identified four overarching priorities for the new Coordinated Care Organization contracts that will be awarded as five year contracts beginning January 1, 2020. One of these priorities for “CCO 2.0” centers on social determinants of health and health equity: “Over the next five years CCOs will increase their investments in strategies to address social determinants of health and health equity. CCOs will align goals at the state and local level to improve health outcomes and advance health equity. ”

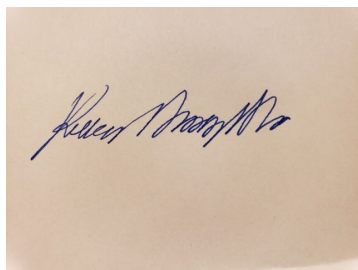
We believe that prioritizing social determinants of health and health equity is not just a function of CCOs, but a core value of a strong public health system. CCOs and public health must work together to coordinate investments, align community health assessments and improvement plans, and to expand organizational capacity to meet the needs of our diverse populations.

Our public health system needs resources to:


- Track, investigate, and stop diseases and other public health threats;
- Inform the public about health problems in the community and how to stay safe;
- Prepare for and respond to emergencies that endanger the public’s health and safety;
- Mobilize community partners to work together to address local public health challenges;
- Enforce laws and regulations that keep people safe; and
- **Achieve the triple aim by investing in population based, community health approaches.**

In order to help achieve these public health outcomes, AOC also strongly supports House Bill 2270. By raising the tobacco tax and also creating a critically important “e-cigarette” tax, Oregon would gain an estimated \$95 million of revenue in the current biennium and an estimated \$346 million in the 2021-23 biennium to fund essential public health investments.

Sincerely

A rectangular area containing a handwritten signature in blue ink on a light-colored background. The signature appears to read "Kelley Minty Morris".

Kelley Minty Morris, Klamath County Commissioner
Chair, AOC Health and Human Services
Committee

A handwritten signature in cursive script, appearing to read "Sharon Meieran".

Sharon Meieran, Multnomah County Commissioner
Vice-Chair, AOC Health and Human Services Committee