



## ALEX CUYLER

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Intergovernmental Relations Manager  
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DATE: March 23, 2021  
TO: House Committee on Health Care  
RE: HB 2965, relating to public health modernization

Dear Chair Prusak and Members of the Committee:

Lane County offers its support for HB 2965, recognizing that this measure provides some additional time for the Oregon Health Authority to meet deadlines established initially by HB 3100 from 2015. While the COVID-19 pandemic is a relatively easy target for a great variety of statutorily mandated deadlines to be at risk of not being met, the Committee should also recognize that the funding for the modernization of Oregon's Public Health framework as envisioned by HB 3100 has never come to fruition in the way we had hoped it would.

Public Health Modernization had its roots in 2013, when a task force was convened with a very worthy discussion that recognized the value of then-current public health work, but understood that much more value could be accomplished with both policy reform and adequate funding to support that reform.

HB 3100 was introduced into the 2015 Legislature as a result of the task force's work, and it created a path towards ensuring that each and every Oregonian would recognize a public health system irrespective of where they reside in Oregon. It introduced the terms "foundational programs" and "foundational capacities" into statutory lexicon and predicted that the framework for these programs and capacities would be developed by the Oregon Health Authority and carried out (HB 3100 used the terminology "applying foundational capabilities and implementing foundational programs") by local public health authorities.

It mandated that the local public health authorities would submit their local plans for first review by the end of 2023. HB 2965 pushes this deadline out by two years. It is important to note that expected investment that Oregon would make in Public Health Modernization has yet to be realized. Year after year, Lane County and other public health partners urge the Governor's Office to include adequate funding for Modernization into the GRB, and to the Ways and Means Committee to further advocate for a significant investment. We point to the proven return on investment that public health programs accomplish, and the public health outcomes our programs are able to demonstrate, and how we could further this work through recommended increases in funding.

HB 3100 asked the Oregon Health Authority to predict adequate funding to phase in this system. In 2016, they envisioned ten years of \$50M in biennial funding. We have yet to witness an investment greater than about \$16M per biennium.

ELECTRONICALLY SUBMITTED BY ALEX CUYLER, LANE COUNTY  
INTERGOVERNMENTAL RELATIONS MANAGER