

Communiqué



PRESIDENT'S MESSAGE

March 2014

*Dalen Duitsman, Ozark Public Health Institute and
Professor in Public Health, Missouri State University*

Dear Colleagues,

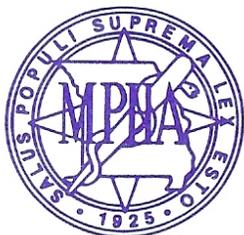
I hope this correspondence finds you all in good health, safe and warm. That last one has been a challenge this winter. The common farewell statement of, "stay warm," had additional meaning this year and was an expression of genuine concern! We have seen bitter cold temps and significant snow accumulations (however, the snow has been beautiful). Apparently Old Man Winter's condo in Florida has been leased by someone else. As I write this we are expecting sleet and freezing rain for the weekend in southern Missouri and up north 5-9 inches of snow. I for one am ready for the cosmic thermostat in Missouri to be turned up and showing winter the door.

At the forefront of everyone's mind right now are all the, for lack of a better term, anti Public Health legislation that appears to be coming out of the woodwork. It really seems like Public Health is under attack. Long standing Public Health practices and, in some cases, ordinances are being discarded in favor of an easier non-regulated path. These changes jeopardize the health and safety of Missourians and MPHA, as well as our colleagues at MoALPHA, who are committed to mobilizing every asset to oppose the health harmful legislation. Our biggest asset is our membership. MPHA will do all it can to monitor and advocate, but we truly need all of you to be vocal and involved to affect change. We ask that when we e-mail you information concerning legislation that you please take action. If you are not sure who to contact you can go to www.house.mo.gov or www.senate.mo.gov to find your representatives. Solidarity is critical if we want to protect our constituents. I confess that witnessing all of these events elicits some emotion, and though our cause is righteous, how we express our concerns are just as important as what we say. There is an old saying that comes to mind, "be wise as serpents, but gentle as doves." This is something I try to keep in mind when faced with what can sometimes be adversarial situations. This is not just rhetoric, but together we really can make a difference. Please see the Legislative Update for current proposed legislation.

MPHA, through its Education Committee, will be offering a workshop on "Health Impact Assessments." When we surveyed those who attended our last Annual Meeting, this topic was at the top of the list. The date of the workshop is June 11th and the location will be the Stoney Creek Inn in Columbia. The cost of the workshop will be \$50.00 for MPHA members, \$75.00 for non-members and \$35.00 for students and retirees. National and local experts will be the presenters, so this will be an excellent workshop. Please reserve your spot as soon as you can since we do have space limitations. Special thanks goes out to MPHA Board member Linda Cooperstock, for taking the lead and doing an outstanding job of organizing and scheduling the workshop.

Please also mark your calendars for our Annual Joint Public Health Conference which will take place on September 23rd to 25th. It will again be at the Stoney Creek Inn in Columbia. We hope to see you at both the workshop and the Annual Joint Public Health Conference!

In our ARGC Update, by our new and very competent ARGC Rep, you will see that the Region VII regional affiliate group (Missouri, Iowa, Nebraska and Kansas), affectionately referred to as MINK, has been active this year and through our conference call meetings we have been communicating, sharing and learning from each other. The third annual MINK conference will take place on May 8th and 9th and will be in Iowa City, Iowa this year. If at all possible, this would be a great conference to attend. Please see the ARGC report for additional detail.



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APHA Legislative Update

February 2014



The bill provides a nearly \$569 million boost to CDC’s total program-level funding compared to the post-sequestration FY 2013 levels. The bill also restores about 60 percent of the FY 2013 sequestration cuts to the Health Resources and Services Administration.

While APHA welcomes these increases, the funding levels are still not nearly adequate to address the growing public health challenges faced by our nation, and we will continue our efforts to advocate for increased funding for public health at the federal level.

Thanks to all of the APHA members who helped to advocate for public health funding over the past year – your efforts truly made a difference!

Congress sends five-year farm bill to president; mixed bag for public health

The final version of the farm bill approved by Congress, which is expected to be signed by Obama on Friday, Feb. 7, included several policy improvements for the Supplemental Nutrition Assistance Program, but the bill also cut \$8.6 billion over 10 years from the program. Under the measure, which has been debated by Congress for more than two years, APHA advocated against cuts to SNAP and SNAP nutrition education which provide millions of seniors, children and families with food assistance and nutrition education to improve access to healthy food and food security.

While APHA was disappointed with the cuts to SNAP contained in the final bill, we are pleased that the final bill maintained full funding for SNAP-Ed and also rejected the much more significant cuts to SNAP and the dangerous policy riders included in

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President signs FY 14 omnibus spending bill; some health programs see boost in funding

The FY 2014 Consolidated Appropriations Act, which President Barack Obama signed on Jan. 17, provides necessary funding for important public health agencies and programs and, contrary to some reports by the media, the bill fully allocates the funds available through the Prevention and Public Health Fund for FY 2014.

The measure marks the first time since FY 2012 that Congress has produced an appropriations bill for the departments of Labor, Health and Human Services and Education. It is a welcome improvement that provides agencies and grantees with greater budgetary certainty compared to operating under another continuing resolution.

Of the \$1 billion available in FY 2014 through the prevention fund, more than \$830 million was transferred to the Centers for Disease Control and Prevention for activities to address heart disease, tobacco control, diabetes prevention, prevention of health care-associated infections and other critical public health priorities. The remaining funds went to agencies including the Substance Abuse and Mental Health Services

Administration, the Administration for Community Living’s Administration on Aging and the Agency for Healthcare Research and Quality. Another \$72 million of the funding was cut due to sequestration. Sen. Tom Harkin, D-Iowa, chief author of the fund, delivered a floor statement debunking the rumored cuts to the fund and citing APHA’s support for the allocation of the fund.

While the prevention fund was fully allocated, one existing program created by the fund, Community Transformation Grants, will not receive funding in FY 2014. Money that had gone for CTGs was equally divided and allocated to CDC’s heart disease and diabetes prevention programs. In addition, the bill creates a new Community Prevention Grant program funded at \$80 million. The National Public Health Improvement Initiative, which had funded activities at state and local health departments as well as territorial and tribal entities was also eliminated. At the same time, the Preventive Health and Health Services Block Grant, flexible funding for state public health activities, was doubled to \$160 million and entirely funded through the prevention fund. Specific details on how the reshuffling of funds will be implemented will likely become clearer in the coming months as CDC develops plans for the FY 2014 funding.

APHA Legislative Update (continued)

the House version of the bill that was strongly opposed by APHA and other members of the public health and anti-hunger communities.

The conference report contained several additional important improvements that would:

- require retailers who participate in SNAP to keep stores stocked with nutritious meal options, including perishable and non-perishable foods in the categories of fruits, vegetables, grains and meat;
- increase funding for the Community Food Projects Competitive Grant program that assists in the development of efforts to improve nutrition education and nutrition resources for low-income communities;
- provide increased funds for emergency food assistance to our nation's food banks; and
- authorize the Healthy Food Financing Initiative.

APHA advocates sent thousands of messages to Capitol Hill over the past two years and played a critical role in preventing the deep cuts and dangerous policy changes that had been included in various bills that passed the House of Representatives from being included in the final House-Senate compromise.

Bill to block EPA power plant carbon rules advances

On Jan. 27, the U.S. House Energy and Commerce Committee passed H.R. 3826, the so-called Electrical Security and Affordability Act by a vote of 29-19. The bill would indefinitely delay the U.S. Environmental Protection Agency from issuing and implementing carbon pollution standards for power plants under the Clean Air Act. APHA strongly opposes the bill and joined other leading public health organizations in sending a letter to the House of

Representatives urging members to vote against the bill when it comes before the full House for a vote, which is expected in the coming weeks.

The Clean Air Act is one of the nation's most important public health laws, with a long history of success. With overwhelming bipartisan support, Congress granted EPA the authority to reduce air pollution to protect public health decades ago. Currently, EPA protects public health by enforcing limits on arsenic, lead, mercury, particulate matter and other pollution from power plants. EPA's Clean Air Act authority extends to carbon pollution — authority affirmed by the U.S. Supreme Court.

APHA joins brief in support of contraceptive rule

APHA joined a friend-of-the-court brief, led by the National Health Law Program, in support of contraceptive coverage. Hobby Lobby Stores and Conestoga Wood Specialties, for-profit, secular corporations, are claiming the U.S. Department of Health and Human Services' rule requiring contraceptive coverage in employees' health care plans violates the company's religious rights. The brief argues that well-established standards of medical care and federal laws and policies pre-dating the Affordable Care Act widely require coverage of contraception. Preventive health services, including contraceptive care, are essential for the health of women and communities. Additionally, the brief rebutted the plaintiffs' arguments for the government to make contraception widely available through other existing means, such as Title X. The brief argued that as the nation's safety net and only dedicated source of federal funding for family planning services, Title X is not designed nor does it have the

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Calendar of Events

2014

April 10, 2014

Board Meeting
MPHA Office
Jefferson City, MO

June 11, 2014

Educational Workshop
Stoney Creek Inn
Columbia, MO

July 17, 2014

Board Meeting
MPHA Office
Jefferson City, MO

September 23-25, 2014

Board Meeting & Joint Annual Conference
Stoney Creek Inn
Columbia, MO

November 15-19, 2014

APHA 142nd Annual Meeting
New Orleans, LA

2015

APHA 143rd Annual Meeting
Chicago, IL

2016

APHA 144th Annual Meeting
Denver, CO

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APHA Legislative Update (continued)

capacity to absorb the unmet needs of higher-income, insured individuals. The U.S. Courts of Appeals denied injunctive relief from the contraceptive rule for both companies. On March 25, the Supreme Court is scheduled to hear oral arguments on Hobby Lobby and Conestoga Wood.

Senate HELP Committee considers surgeon general nominee

On Feb. 4, the U.S. Senate Health, Education, Labor and Pensions Committee held a hearing to consider Vivek Murthy, MD, to serve as U.S. surgeon general. Murthy is an attending physician at Brigham and Women's Hospital, instructor at Harvard Medical School and co-founder of Doctors for America, a national movement bringing together 16,000 physicians and medical students working to ensure access to quality health care for all people. Murthy also serves on the Advisory Group on Prevention, Health Promotion, and Integrative and Public Health, which advises the National Prevention Council on evidence-based prevention and health promotion strategies. Murthy would replace Regina Benjamin, MD, MBA, who stepped down in July 2013, and Boris Lushniak who is currently serving as acting surgeon general. APHA sent a letter of endorsement for Murthy's nomination and calling for immediate approval to the Senate HELP Committee in advance of the hearing.

House passes anti-abortion bill

The U.S. House of Representatives passed H.R. 7, No Taxpayer Funding for Abortion Act, on a partisan vote, 227-188, on Jan. 28. H.R. 7 would deny women the decision to have an abortion by changing the laws that govern private and public health insurance. The bill would deny women and families premium tax credits if they purchase health care that covers abortion. Additionally, the bill would

penalize small businesses for providing comprehensive coverage for their employees and their families by denying the Small Business Health Tax Credit to businesses that offer health care that covers abortion. Longstanding U.S. laws already prohibit the use of federal funds for abortions, except in the circumstances of rape or incest, or in the cases where the woman's life is in danger. H.R. 7 would delve well beyond these laws and into the consumer's private health care choices, the woman's choice about whether to have an abortion and, as a result, endanger women's health.

In advance of the vote, APHA joined more than 40 organizations in sending a letter to all members of the House opposing the bill.

The Senate is not expected to take up the bill and the White House has issued a veto threat.

Fast track bill introduced in Senate and House

Sen. Max Baucus, D-Mont., and Rep. Dave Camp, R-Mich., introduced the Bipartisan Congressional Trade Priorities Act, S. 1900 and H.R. 3830 respectively, in the Senate and House, on Jan. 9. The Trade Priorities Act, also known as fast track, is an ill-conceived bill that would allow complex trade agreements to circumvent legislative protocol. The U.S. is currently engaged in negotiating two major trade agreements, the Trans-Pacific Partnership with 11 other countries and the Transatlantic Trade and Investment Partnership with the European Union. Negotiations and development of the trade agreements are occurring without public knowledge, input or debate. Previous trade agreements passed under fast track rules, allowing only a rapid up or down vote by Congress without any amendments, have limited the ability of local, state and federal governments

to implement or maintain adequate standards for medical and financial privacy, quality and performance, local economic development and environmental protection. APHA signed a letter to all members of Congress opposing the Trade Priorities Act, led by the Center for Policy Analysis on Trade and Health, and calling for transparency and involvement by the public and Congress throughout the trade negotiations process to ensure that any trade agreement does not undermine the ability of governments to protect the public welfare, including public health and the environment.

APHA files brief in support of Mississippi women's clinic

APHA filed a friend-of-the court-brief in support of Jackson Women's Health Organization and the public health interest that all women have access to reproductive health services, including abortion. In 2012, Mississippi Gov. Phil Bryant signed H.B. 1390 into law, which includes a requirement that providers of abortion must have admitting privileges at a local hospital. The APHA brief argues that this requirement poses a substantial and unconstitutional barrier, would not make abortion safer and presents a grave risk to public health. The privileges have been effectively and consistently blocked, which will force Jackson Women's Health, the only remaining provider of legal abortion in the state, to close and cut off access to full reproductive health services in the state. As a result, there is substantial risk that women will seek later and riskier abortions or illegal abortions, or face the mental and physical risks of being forced to carry unwanted pregnancies to term. The case is on appeal in the 5th Circuit U.S. Court of Appeals.

APHA Legislative Update (continued)

APHA releases annual congressional record

As part of APHA's continuing effort to inform its members on the nation's public health policies, the Association annually publishes a record of how members of Congress voted on particular issues of importance to public health. The voting record is one way APHA members can hold their representatives and senators accountable for decisions made in the legislative process. During calendar year 2013, the 113th Congress, first session, APHA included key House and Senate public health votes on clean air protections, health reform, nutrition

assistance and public health funding, among others. The vote record is published in the February issue of *The Nation's Health*. Members can also view the record on APHA's members only website.

Get involved: National Public Health Week 2014

The National Public Health Week 2014 website is now online. During NPHW 2014, April 7-13, APHA invites you to promote ways to live healthier lives and highlight the theme "Public Health: Start Here." NPHW daily themes will focus on the following public health areas:

- Be healthy from the start
- Don't panic (disaster preparedness)
- Get out ahead (prevent disease and injury)
- Eat well
- Be the healthiest nation in one generation

Become involved and help make public health a priority in your community. Join the movement as we work together to build the healthiest nation in one generation. Download the NPHW toolkit.

Letter from the President continued

MPHA was awarded, for the second year in a row, funding from the American Public Health Association (APHA). Ten other states were also awarded. This year APHA emphasized funding efforts to support national accreditation. Based on the evaluations we received from last year's national accreditation preconference workshop, MPHA, in collaboration with the Missouri Institute of Community Health (MICH), will use the funding to create a Missouri specific Quality Improvement (QI) resource page. MPHA will coordinate the resource page with the Missouri Department of Health and Senior Services QI regional trainings for Local Public Health Departments so they complement each other. Local Public Health Department QI projects will be showcased at the annual Missouri Joint Public Health conference in September. Please see the award letter from APHA in the newsletter.

On February 10th the Governor signed a proclamation proclaiming April 7th to 13th as Public Health Week (PHW) in Missouri. The signing was well attended, and there were several MPHA members who were able to attend. Please see the article on proclamation signing in the newsletter for additional details on themes for PHW. If you let us know about events that you have planned for PHW we will post the information on the MPHA web page.

I would like to enthusiastically welcome our newest MPHA members Courtney Cross, Douglas Dodson, Melanie Hutton, Michelle Pfister and Karen Shoulders who have joined MPHA since our last newsletter! We thank you for your commitment to MPHA and we very much look forward to working with you. I would also like to welcome back to the MPHA Board, Robert Hudson. Robert is a past MPHA President and it is great to have him back on the Board.

There are several articles in the newsletter that I did not mention that are excellent. Please take a few minutes to look them over.

Lastly, please do not forget about our scholarships. I request that you look them over and apply or share the information with those who are eligible. We really want to encourage people to take advantage of these opportunities.

I am very much looking forward to the privilege of working with all of you again for the remainder of my term. It is truly one of the highlights of what I do.

Take care!

-Dalen

Policy Watch: State and International Updates

February 2014



First round of Syrian peace talks conclude

Jan. 22 marked the beginning of the United Nations-led peace talks that brought together delegations from the Syrian government and Syrian opposition groups. The Geneva II conference presented an opportunity to appeal for an end to the Syrian civil war and protect the future well-being of the Syrian people. The conference was a bilateral effort of the U.S. and Russia to encourage the formation of a transitional government with full executive powers. As scheduled, the talks ended Jan. 31.

Alarming evidence reveals that an escalating public health crisis is already occurring in Syria, including new incidences of polio cases in the region, suggesting a devolving public health system. Rebuilding the public health system, ensuring access to food and humanitarian assistance and protections for vulnerable groups are critical components of the peace process to ensure the ongoing health needs of the Syrian people are met.

While no agreement was made, the delivery of humanitarian aid to areas in need is under consideration. It is expected that additional rounds of talks will be necessary to produce results. The U.N. proposed to reconvene on Feb. 10; however, it is uncertain whether the Syrian government will accept.

APHA wrote a letter to Secretary of State John Kerry in advance of the conference advocating for the inclusion of public health issues in the peace talks.

Local collaborative in Texas provides marketplace education and outreach

The Houston Department of Health and Human Services, in collaboration with other partners, has taken an emergency approach to coordinate education and outreach efforts to enroll people who are uninsured in the health insurance marketplace. The Gulf Coast Health Insurance Marketplace Collaborative has developed heat maps identifying the ZIP codes in Harris County where the highest number of uninsured people live and is targeting these neighborhoods in their outreach efforts. Ben Hernandez, deputy assistant director for the Houston health department has called the 1.1 million uninsured in Harris County a public health emergency. In total, there are 6.2 million uninsured in the state. The Houston health department is working with local governments and organizations in other cities in Texas to expand the collaborative’s model across the state.



Mental health program results in Medicaid savings

ReDiscover, a Missouri-based nonprofit community mental health agency was recently highlighted by the Missouri Senate Committee on Medicaid Transformation and Reform for saving on Medicaid costs. The mental health center helps to divert people with mental health and substance abuse problems from emergency rooms to the program by having hospital staff refer patients. Case loads are typically fewer than 10, allowing social workers to spend more time with clients. Managing chronic or preventable conditions before patients turn to emergency rooms has proven cost-effective. ReDiscover has successfully saved approximately \$13.7 million in medical costs during its first year and a half. As a result, the Missouri Department of Mental Health is committed to supporting the expansion of the program across the state by allocating \$7.5 million to the program this year.



Governor Signs Public Health Week Proclamation

Governor Nixon proclaimed April 7-13, 2014 as Public Health Week in Missouri



In attendance for MPHA were Dalen Duitsman, President; Linda Cooperstock, President-Elect, and Denise Strehlow, Affiliate Representative to the APHA Governing Council. They joined representatives from Missouri Department of Health and Senior Services, students and faculty from Missouri Master of Public Health Program, leadership of Tobacco Free Missouri.

The American Public Health Association (APHA) has selected five themes for Public Health Week.

1. Be healthy from the start: focuses on maternal health, school nutrition, emergency preparedness. Public health starts at home.
2. Don't panic: Disaster preparedness starts with community-wide commitment and action.
3. Get out ahead: Prevention is a nationwide priority.
4. Eat well: The system that keeps our nation's food safe and healthy is complex. Public health can guide you through the choices.
5. Be the healthiest nation in one generation: Best practices for community health come from around the globe.

To learn more, visit <http://www.nphw.org/>

NEW MPHA MEMBERS

Michelle Pfister, University of Missouri, November 2013
Douglas Dodson, Jefferson County Health Department, December 2013
Melanie Hutton, Cooper County Public Health Center, January 2014
Karen Shoulders, Arthritis Foundation, February 2014
Courtney Cross, Harrison County Health Department, February 2014

Affiliate Representative to the Governing Council (ARGC)

Denise Strehlow, RD, LD, MPH, MSW

BJC School Outreach and Youth Development

Missouri Affiliate Representative to the Governing Council (MO ARGC)

January 14, 2014



An update on terms needed to understand the following report:

ARGC - Affiliate Representative to the Governing Council of the American Public Health Association

CoA - Council of Affiliates of the American Public Health Association

MINK - Missouri, Iowa, Nebraska and Kansas also known as Region VII of the American Public Health Association

Region VII also referred to as MINK (Missouri, Iowa, Nebraska and Kansas) held the first 2014 conference call on January 6. Dalen, Sandy and Denise participated in this call along with representatives from Iowa, Nebraska and Kansas. Eldonna Chestnut, Kansas ARGC and Region VII representative to Council of Affiliates (CoA), facilitated the meeting. Region VII will hosts its third annual conference in Iowa City, Iowa on May 8 and 9 with Louise Lex and the Iowa Public Health Association facilitating the meeting. The Affordable Care Act and Accreditation are two topics with panels from each state discussing the challenges and opportunities.

Participants discussed the potential nominees Region VII may put forth to the Nominating Committee. Shirley Orr, Kansas, agreed to run again for APHA Board. She was nominated and was not elected in 2013. Shirley is a great candidate and would represent Region VII well. Following the election, she was very upbeat and voiced that she had learned a lot.

APHA Council of Affiliates developed an affiliate self-assessment tool to help affiliates continue to evaluate their strengths and create a plan to address weaknesses and improvements. The CoA envisioned a tool to 1) assist affiliates in evaluating their work without duplicating the Affiliate Annual Report to APHA, 2) assess areas of strength but not give a grade or reward, 3) enhance the work being done by affiliates to maximize the performance opportunities. APHA is currently seeking affiliates interested in piloting the Affiliate Self-Assessment Tool. Kansas agreed to pilot the tool. The time commitment should not be extensive and involves several individuals participating in a work group, reviewing the tool and then completing the assessment. The individuals need to be knowledgeable of the operations of the affiliate.

APHA will host the annual President-Elect Training in Washington, D.C. and is confirmed for June 8-10. The training includes learning about APHA and how the affiliates work with APHA as well as visiting Capitol Hill to meet with legislators or their staff. If the president- elect has already participated in this annual training, the affiliate may send another affiliate board member to the training. APHA will cover the cost of two attendees this year.

Action items:

- Do we want to be a pilot affiliate for the Affiliate Self-Assessment Tool? If so, we need three or four individuals to come together as a work group.
- Suggestions for panel participants in the Affordable Care Act panel and the Accreditation panel at the Region VII, MINK Annual Conference?
- Identify MPHA members to attend APHA President-elect meeting.

Many thanks to Pat Parker for her great work as the Missouri ARGC. Thank you very much for your work with MPHA. Please let me know of any information you would like shared at the monthly ARGC conference calls.

APHA Announces its 2014 Accreditation Grant Recipients

Mekia Barclift, MPH, CHES
 Deputy Director of Affiliate Affairs, APHA
 Posted Thursday, January 30, 2014

The American Public Health Association is pleased to announce that it has awarded funding to eleven Affiliates to support activities that prepare local, tribal, state and territorial health departments for national accreditation. Proposed activities include surveys that assess staff capacity, knowledge and barriers to accreditation; educational sessions and peer-to-peer sharing opportunities on best practices and lessons learned from accredited health departments; technical assistance hours; and the development of resources and modules on national accreditation.

APHA would like to thank the review panel for its assistance and guidance in the grant review process. A total of \$52,556 was awarded to Affiliates with measurable objectives and demonstrated capacity to implement project activities.

Please join APHA in congratulating the following award recipients:

- Georgia Public Health Association
- Illinois Public Health Association
- Indiana Public Health Association
- Iowa Public Health Association
- Michigan Public Health Association
- Missouri Public Health Association
- Nevada Public Health Association
- Ohio Public Health Association
- Oklahoma Public Health Association
- Texas Public Health Association
- Utah Public Health Association

JOIN MPHA

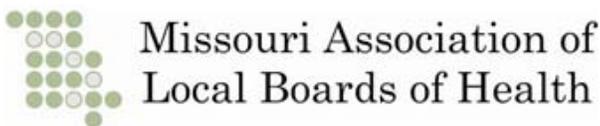
Are you a member of APHA but not currently a member of MPHA? We need your membership to further the message of public health in Missouri. The benefits of being a member of MPHA include:

- Quarterly newsletter filled with up-to-date information
- Legislative updates on Missouri issues as well as national topics impacting Missourians
- Annual meeting with other public health professionals
- Statewide network of public health professionals

If you are interested in membership in MPHA, please contact Denise Strehlow at dsl9171@bjc.org, 314-286-0504 or complete the attached membership form and return to the MPHA office.

Joint Annual Conference

September 23-25, 2014
 Stoney Creek Inn ~ Columbia, MO



Senate Appropriations Committee Testimony

Bernard R. Malone, MPA

City of Kansas City Health Department, MPHA

February 3, 2014

Good afternoon, Mr. Chairman and honorable members of the Committee. Thank you for hearing my testimony. I currently serve as Deputy Director of the Kansas City, Missouri Health Department (KCHD). I am also here as a representative of the Missouri Public Health Association (MPHA), an organization for which I serve the Board as Vice President.

The KCHD is one of the oldest and largest local public health agencies in Missouri. Our mission is simple: to promote, protect, and preserve the health of over 1 million residents and visitors in Kansas City on a daily basis. The KCHD provides a wide array of public health services in areas such as environmental hazard monitoring, public health safety, infectious and communicable diseases, and preventable illness. I am quite proud to say that the KCHD has recently been recognized as one of the first public health agencies in the Nation to be nationally accredited by the Public Health Accreditation Board (PHAB), a quality improvement goal that required nearly three years of extensive preparation and diligent work.

The MO Public Health Association is the single largest public health professional organization of the state, made up of nearly 400 physicians, nurses, administrators, environmental health practitioners and other disciplines from throughout the state. The mission of MPHA is to identify the public health needs and issues of Missourians and collaborate with other agencies to improve the health of our great state of Missouri through initiating and supporting actions and strategies that help to reach our goal recognized in the State's Great Motto.

It is in these capacities that I come before you to support the "Aid to Local Public Health" line item in the DHSS budget. This funding provides critical support to 115 agencies throughout the state. Governor Nixon is recommending \$9.5 million for FY 15 in this line item. This consists of \$2.3m in General Revenue and the remainder is made up of federal funding for children's direct services through the federal Children's Health Insurance Program (CHIP). As the State GR has been reduced by 76% since 2012 and the CHIP may not be a long-term viable source of federal funding, this represents a real dilemma for local public health agencies throughout the State. It is clear that without either funding source, local health departments, already

struggling around the state, would be forced to shutter their services. **It is our goal to seek restoration of the GR cuts that have been made in the past three years and retain the CHIP federal funds for as long as possible.**

The 2013 United Health Foundation's report on America's Health Rankings shows that the state of Missouri ranks 39th in health outcomes for its population. There are several key health outcomes that the state of Missouri is significantly behind the power curve. Specifically, the state ranks:

- 41st in Adult Smoking, with 25% (over 1.3 million) of the adult population current smokers (a decline from 2011's ranking of 40th);
- 33rd in Obesity rates, with a staggering 30.3% of the population currently obese;
- 36th in Sedentary Lifestyle, with 24.7% of Missourians completely physically inactive;
- 33rd in Infectious Diseases such as pertussis, chlamydia, and *Salmonella*;
- 42nd in deaths due to cardiovascular disease, much of which is preventable
- 42nd in immunization coverage of children age 19-35 months (a far cry from 4th in 2007)

With regard to state Public Health funding, Missouri maintained its abysmal ranking of 50th out of 51 (includes the District of Columbia), with only \$6.08 allocated per capita. Our neighboring states all allocate a larger amount to public health:

- Kansas, ranked 42nd, with \$14.37 per capita
- Illinois, ranked 29th, with \$23.09 per capita
- Oklahoma, ranked 21st, with \$38.96 per capita
- Nebraska, ranked 20th, with \$39.18 per capita
- Kentucky, ranked 15th, with \$43.76 per capita
- Tennessee, ranked 16th, with \$42.61 per capita
- Arkansas, ranked 11th, with \$50.92 per capita

The national median for Public Health funding per capita is \$27.40, a difference of \$21.32 from Missouri's per capita. It would take a funding increase of \$9.9 million to match the national median for the population in Kansas City alone. This disparity illustrates a great irony with

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Senate Appropriations Committee Testimony continued

our Missouri State Motto – *Salus Populi Suprema Lex Esto* – the health of the people is the supreme law.

Clearly there is room for vast improvement. This failure to invest in prevention will come back to hurt the state and its people as we continue to see the costly and damaging health outcomes described above. An outcome of particular concern is asthma. In Missouri over 500,000 adults and children live with the condition and in 2009 alone cost over \$96 million in hospital charges, not to mention the loss of quality of life. A study conducted by the CDC found significant increasing trends in asthma among Missourians from 2000-2011 (BRFSS). Missouri currently has the 8th highest childhood asthma prevalence of 38 reporting states and the District of Columbia. Children living in a household with a total income less than \$15,000 are three times as likely to develop asthma compared to children who live in a household with an income above \$75,000. We have nearly 200,000 children in Missouri suffering with this condition, and local public health agencies are the first line of defense against many childhood afflictions. Without proper funding, these agencies will be unable to support many of the services that aid local families. These families are asking for your help.

Another preventable condition that has a dismal long term outlook, especially for Missouri, is obesity. A recent report from the United Health Foundation found that obesity is the fastest growing public health issue. If current rates continue, by 2018 over 103 million U.S. adults will be classified as obese. Expected health care costs credited to obesity could top \$344 billion in the U.S. by 2018. Direct expenditures from obesity would account for over 21% of the country’s health care spending. If obesity levels were to remain at their

current rates, the U.S. could save nearly \$200 billion-an estimated \$820 per adult. At the state level, if current trends continue, by 2018 an average of 47.4% of Missourians will be obese. Obesity attributed health care spending in Missouri will increase from \$1.9 billion in 2008 to over \$8.2 billion by 2018. Per person, obesity attributed health care spending will increase from \$761 in 2013 to \$1,834 by 2018. If obesity prevalence rates were to stabilize and remain constant, Missouri could see savings of up to \$4.8 billion from 2013 to 2018.

Funding for local Public Health must become a priority. Research from the U.S. Department of Health and Human Services indicates that medical costs for chronic illnesses such as diabetes, obesity, asthma and cardiovascular disease are estimated to cost over \$1.5 trillion dollars per year (U.S. Department of Health & Human Services, 2013). With the above rankings our State currently maintains, Missouri is contributing to a large percentage of those costs. In addition, several CDC studies implicate the cost-effectiveness and importance of monitoring practices such as food establishment inspections and preventive services such as vaccinations.

Examples such as those stated above demonstrate that the “Aid to Local Public Health” line item is critically needed for public health services throughout Missouri. If these local agencies cannot be adequately supported, the residents of Missouri will lack access to preventive care, health education, and public health safety.

On behalf of the Kansas City Health Department and the MO Public Health Association, I strongly urge your consideration of restoring the GR fund for this item to the 2011 level of \$9.5 million.

University of Missouri Master of Public Health Online Degree Option Coming Fall 2014

The University of Missouri MPH online option offers students the opportunity to work long distance with no face-to-face on-campus requirements to earn their MPH degree. Requirements for the online MPH degree and the online plans of study mirror the Health Promotion and Policy curriculum.

Distance learning provides location and day-to-day flexibility in scheduling 'class' for students who have work, family, or other responsibilities that demand students balance these other obligations. Online learning is a different teaching-learning style and may be one that suits your learning needs. More information about the MPH online option can be found at http://publichealth.missouri.edu/programs_mph_online.php

“Health Impact Assessment”

Wednesday, June 11, 2014 at Stoney Creek Inn, Columbia

Sponsored by Missouri Public Health Association

SCHEDULE of EVENTS

- 8:30 am **Registration**

- 8:30 am **Welcome**
Speaker: Kevin Everett

- 8:30 - 11:30 am **Health Impact Assessments (HIA) Training**
Speaker: Kim Gilhuly, Project Manager, Health Impact Partners

- 11:30 - 12:15 pm **Lunch**

- 12:15 - 4:30 pm **Health Impact Assessments (HIA) Training continued**
Speaker: Kim Gilhuly, Project Manager, Health Impact Partners

- 4:30 pm **Closing Remarks**
Speaker: Dalen Duitsman, MPHA President

Kim Gilhuly joined Health Impact Partners in 2007 after receiving her Master’s in Public Health from University of California, Berkeley. Her public health and policy work has included collaboration and research on Health Impact Assessments on land use projects and policy initiatives, urban food access, evaluating violence prevention projects, and pesticide monitoring in California. She has gained HIA, Evaluation, and policy expertise from working at Human Impact Partners, the Alameda County Public Health Department, California’s Department of Health and Human Services, the Bixby Center for Global Reproductive Health, and with the Women’s Policy Institute. Before obtaining her MPH, Kim worked for 17 years in non-profits doing community organizing and advocacy, program planning, and service delivery on environmental concerns, reproductive rights, nursing and medical student training, and mental health. Kim’s interest in public health focuses on the opportunity to examine institutional power, and thus health outcomes, through the direct involvement of communities.

Missouri Public Health Association is able to provide this high quality educational experience at a low cost in part due to a generous contribution from the University of Missouri’s Healthy Community Partnership.



Tobacco Free Missouri

Linda Cooperstock, MPH

Working statewide to create a healthier Missouri by eliminating the burden of tobacco.

Two big items were the smoke free campus policy that went into effect on the University of Missouri-Columbia campus on July 1 and the enactment of a comprehensive smoke free ordinance in Sedalia. Sedalia City Council voted 6-2 to implement a comprehensive smoke free ordinance including workplaces, bars, restaurants, and city parks! Thank you for the continued hard work of all partners who collaborated to make this smoke free success in the home of our state fair. This marks 24 comprehensive laws in Missouri.

The Board of Tobacco Free Missouri meets on a bi-monthly basis to plan policy strategies to help reduce tobacco use and secondhand smoke exposure. TFM works to support local smoke free policies that are comprehensive and adhere to a basic set of standards that adequately protect all workers from secondhand smoke.

The Board reviews all legislative activities related to tobacco and smoking to ensure that all TFM members have data-driven information for discussion with their legislators. TFM is vigilant for preemption wording in any state bill. Preemption in a tobacco-related law could cause a potentially weak state law to superseding comprehensive local ordinances.

The board received a report from the Youth Coordinator describing the various advocacy and education actives in which youth participated.

- In the Southeast, 400 Campbell students did a balloon launch. Proceeds were sent to the American Cancer Society.
- Southland held parades, festivals, and school assemblies to share the message about tobacco. A Smokebusters flash mob dramatized the danger of tobacco.
- Students in Hayti held an activity day with posters and information booths.
- Holcomb's focus was to inform their community about the recent smoke-free campus policy.
- Delta C-7 Smokebusters educated their Parent Teacher Organization of their activities and of the dangers of smoking.
- Grandview schools held a Meet-and-Greet with Missouri State Representative Joe Runions. They led him on a school tour and asked about his stance on tobacco issues in Missouri.
- Alex Higgenbotham, 16 juniors from Odessa, MO who attended Missouri Boys state was elected to represent Missouri at Boys Nation in Washington, DC in July. Alex was also named winner of the 2013 Joining Forces Award for Youth Advocacy by the Campaign for Tobacco-Free Kids for his leadership in the fight against tobacco. Alex is involved with Smokebusters/Show-Me PALS (People Advocating Living Smoke-Free) in Missouri and serves as the group's vice president. He also recruited 28 youth and founded Odessa's first chapter of Students with a Goal (SWAG).



MPHA Foundation Scholarships

Established in 1995, the Education Foundation receives funds that promote a higher awareness and knowledge of public health, to educate public health professionals, community leaders, and communities about public health issues, and to honor Missouri public health leaders by awarding scholarships in their name. In addition to giving scholarships, the Foundation supports awards to public health professionals and students, as well as educational programs to promote quality public health for Missouri.

Edna Dell Weinel Scholarship

Edna Dell Weinel Scholarship provides the opportunity for practicing public health professionals to participate in this lifelong learning process. This scholarship, the value of which is dependent upon the request and need of the applicant (s), not to exceed \$750, is available for public health workers to develop in their profession through educational meetings, professional credentialing, seminars or through traditional academic course work.

Jackie Liesemeyer Nursing Scholarship

Jackie Liesemeyer was a Community Health Nurse who worked for more than 20 years in various positions in the Central District Office of the Missouri Department of Health. Jackie's spirit of independence and self-reliance was reflected in her approach to her clients, individuals, program representatives and local health units. She provided the information, support and encouragement that fostered growth and the ability to do for oneself all that was possible in the spirit of community health nursing. Jackie is honored with a \$750 nursing scholarship in her name that will enable others to enhance public health in Missouri. One scholarship is awarded at the MPHA Annual Meeting, usually held in the Fall.

Health Professional Scholarship

The \$750 Health Professional Scholarship is available for a MPHA member who is working on an undergraduate or graduate degree in a public health related field which will further their career. Examples of fields of study include: administration, epidemiology, health education, nursing, health promotion, etc.

Leuthen – Brunner Local Public Health Agency Scholarship

Leuthen–Brunner Local Public Health Agency Scholarship grant honors Ron Leuthen and Phil Brunner, former MPHA members who worked tirelessly to advance local public health in Missouri. This award is designed to assist local public health agencies towards voluntary accreditation through Missouri Institute for Community Health or National Public Health Accreditation Board. This is a one-time grant for local public health agencies. The \$750 scholarship will be awarded at the annual MPHA Meeting.

Applicants may apply an unlimited number of times for each of our scholarships providing they qualify under the established requirements and have not been a previous recipient. More detailed information can be found on the MPHA website at <http://www.mopha.org/>



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