

AOC Supports HB 2348-1 with Amendments

Testimony of Benton County Commissioner Linda Modrell, Chair of the Association of Oregon Counties Human Services Steering Committee

Chair Greenlick and Members of the Committee:

The Association of Oregon Counties supports the creation of a task force to develop a vision for the future of public health in Oregon. Local public health has been closely involved in both the transformation in the delivery of health care and the early learning initiative. After these massive transformations it is necessary to reflect on the public health functions in Oregon.

Counties have been working closely with CCOs to ensure that public health is an important aspect of the organization. Local Public Health emphasizes that we move the focus “upstream” and work on preventative measures to avoid costly medical expenses. In Benton County, data from focused risk-group assessments referenced above have significantly informed public health’s Community Health Assessment & Improvement Plan (which the CCO participated in creating and is using). That data provides a realistic picture of the actual health status, concerns and priorities of the CCO population to help guide and direct the CCO efforts. In addition, Health Impact Assessments performed by public health provide an informational tool to help decision-makers consider the health implications of policies and decisions that may not have otherwise been considered.

Additionally, public health programs contribute to the goals of the early learning program: ensuring that every child in Oregon is ready to learn by kindergarten. Nurse home visiting programs and the public health run WIC program will coordinate with local early learning hubs to play a role in children’s health and make certain that health factors will present minimal barriers to their education.

Finally, there has already been a great deal of work occurring around the state working on reviewing the public health programs and services around the state. The Public Health Advisory Board has four subcommittees looking at cross-jurisdictional sharing. The purpose is to review existing examples of cross-jurisdictional sharing within the Oregon public health system, and identify the real-world barriers to the adoption and successful implementation of such models. At this time I am serving on the Subcommittee on Public Health System Outcomes and Data. Our purpose is to identify the outcomes associated with an efficient and effective public health system, including outcomes associated with working with CCOs and that tie to public health accreditation, and report on its findings to the Board.

AOC proposes the following amendments:

1. Section 1 (2)(b)(B) should either be removed or the word “Explore” or “May” in front of the word “Create.”

Based on the work of the Public Health Advisory Board findings, regionalization or consolidation may just one of the many ways of improving the efficiency of Oregon’s public health system. AOC believes that the task-force should not be limited to looking at that single solution.

2. Adjust the timeline of the deliverables spelled out in Section 1 (10)(a):

The report relating to the future of the public health services should serve as a vision for the future. Regionalization and consolidation may be an aspect of that future. However, developing the vision for public health is the first step and should therefore have an earlier deadline. As a possible piece of that future, regionalization and consolidation should be considered the second step and have a later deadline. January 1, 2014 seems to be too early of a deadline in either case. The work of this task force must be informed by the Public Health Advisory Board, and therefore should wait until their work is done before beginning.