HB 2310 | Public Health Modernization Implementation

The Public Health System has been preparing for the implementation of Public Health Modernization since HB 3100 (2015) passed. The Public Health Division and all 34 local public health departments worked together on a "Modernization Manual" and subsequent Assessment, which found a \$105 million annual gap between our current public health system and the system envisioned in HB 3100.

Not everyone has access to the same public health services across Oregon; this is a problem, especially when the conditions that are decreasing opportunities for better health today are chronic and preventable. In Oregon we know that:

- In the past 10 years rates of syphilis have increased by 1500%. This has serious implications; syphilis, if left untreated, can cause damage to the brain and heart, mental illness, serious birth defects, stillbirth, and even death.
- 360,000 Oregonians youth and adults struggle with asthma, that is almost 1 in 10 people in Oregon and at least 18,000 of those are school age children.
- In the past 20 years the prevalence of diabetes as doubled almost 400,000 people have diabetes and more than 25% of those don't know it yet.iii
- More than 50% of Oregon adults suffer from one or more chronic diseases.^{iv}
- Foodborne illness costs Oregon \$229 million each year in health care, lost productivity and premature death.

These are challenges that cannot be addressed by the health care system alone: environmental factors can trigger asthma; access to active transportation and safe water and food to eat are all factors that affect the health outside of the doctor's office. Public health can improve the conditions that create opportunities for health.

An amendment requested on HB 2310 would require the implementation of Public Health Modernization for 2017-19 in the selected areas adopted by the Public Health Advisory Board and the Conference of Local Health Officials:

- Foundational Programs: Communicable Disease Environmental Health
- Foundation Capabilities: Health Equity Assessment and Epidemiology Leadership

Legislative Fiscal Office will determine the cost of implementing those select areas and the bill will probably have a subsequent referral to the Joint Ways and Means Committee.

We recommend the support of HB 2310 and subsequent funding to begin the systemic improvement in the public health system envisioned to allow all people in Oregon to achieve better health.





Health Association









































inttps://public.health.oregon.gov/DiseasesConditions/CommunicableDisease/DiseaseSurveillanceData/STD/Documents/9984-STD-

ii Oregon Health Authority. 2014. Oregon Asthma Leadership Plan

iii Oregon Health Authority. 2015. Oregon Diabetes Report

iv Oregon Health Authority. 2015. Chronic Diseases Among Adults

V Oregon Health Authority, 2016. The Health and Economic Benefits of Public Health Modernization in Oregon