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Date January 23, 2019

TO: The Honorable Laurie Monnes Anderson, Chair
Senate Health Care Committee

FROM: Katarina Moseley, MPH, Director
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SUBJECT: SB 253

Chair Monnes Anderson and members of the committee, I am Katarina Moseley, Director of Policy and Partnerships in the Public Health Division of the Oregon Health Authority. I am here to speak in support of Senate Bill 253 which updates the public health statutes to clarify the process for transferring local public health authority responsibilities to the Oregon Health Authority. In addition to this, the bill also gives local public health authorities more flexibility in how they staff their health officer position.

In 2015, the state legislature passed a bill that significantly revised the public health statutes to put us on the path to modernizing Oregon's public health system. A modern public health system ensures critical public health protections are in place for every person in Oregon, that the public health system is prepared and has the right resources to address emerging health threats, and that the public health system is engaged daily to eliminate health disparities. That bill outlined the process for the transfer of local public health authority responsibilities to the Oregon Health Authority.

In Spring 2018, Wallowa County adopted an ordinance to transfer its local public health authority responsibilities to the Oregon Health Authority. This transfer was the first under the revised public health statutes. Based on lessons learned from the Wallowa transfer experience, SB 253 makes minor changes to clarify the transfer process.

The bill, if adopted, allows the state public health officer to appoint a local public health officer for a county that has transferred its local public health authority responsibilities to

the state. During a public health emergency or a communicable disease outbreak, this may be necessary to protect the public's health.

The bill also permits the Oregon Health Authority to agree to an earlier transfer date. Current statute states that a transfer of authority is effective 180 days after the county governing body adopts the transfer ordinance. Because of the circumstance of the Wallow transfer, the Oregon Health Authority had to act as the local public health authority several weeks after the ordinance was adopted, but legally the transfer did not occur until 180 days after the ordinance. This minor statutory change will help ensure basic public health protections are in place for Oregonians and creates flexibility for LPHAs in determining their transfer timeline. Similarly, the bill clarifies that when a transfer occurs, the Oregon Health Authority has the authority of a local public health authority and a local public health administrator in the jurisdiction transferring authority.

Finally, SB 253 allows local public health authorities more flexibility in staffing the public health officer role. Currently, if a local public health administrator is a licensed physician in Oregon, s/he must serve as the local public health officer. SB 253 removes this requirement, giving local public health authorities greater flexibility in their staffing models as they modernize to improve community health outcomes.

In summary, SB 253 puts forward minor changes to the public health statutes to better support Oregon's public health system in assuring basic public health protections for all people in Oregon.

Thank you for the opportunity to talk with you today. I am happy to answer any questions you have at this time.