



February 19, 2025

HB 5025 – OHA Budget

Co-Chairs Campos and Valderrama, members of the committee:

I am Philip Mason Joyner and here today in my capacity as the Board Chair for the Coalition of Local Health Officials (CLHO). My colleagues have illustrated specific examples of how emerging and reemerging communicable diseases are increasing in our state while our public health system is facing increased scrutiny (both nationally and within specific communities across our state). The costs of providing core public health services are increasing and investments are going back to pre-pandemic levels.

As an additional example, multiple Local Public Health Authorities (LPHAs) have seen instances of three generations infected with tuberculosis under one roof, primarily among multigenerational immigrant households. One county reported a cost of \$500,000 to treat just one impacted family. By investing in public health initiatives, we can prevent these costly scenarios at a fraction of the price. With increased resources, LPHAs could invest in the foundational capabilities needed to improve community health, including epidemiology, community partnerships, communications, and more in order to reach individuals and families sooner to prevent the spread of disease.

The beauty of Public Health Modernization is that it is a framework that can be scaled and customized to fit the size and needs of every county and every community. In Oregon, we value the health and wellness of EVERY resident from urban to frontier. In rural and frontier areas of our state, residents rely more heavily on their local public health departments for access to clinical and preventative services – including vaccines, reproductive health services, and support to new mothers and babies. Public Health plays a critical role in keeping folks out of emergency departments and connecting them to other services.

While we fully recognize the challenges posed by the Medicaid budget gap, it is important to remember that when health care transformation was conceived, the CCOs were just one leg of a three-legged healthcare stool. The other two essential components were early childhood and public health – the prevention legs that would bend the cost curve. Oregon has fully committed to providing everyone with health care coverage, but that only addresses one part of the equation. Without the other two, we will continue to see rising health care costs. Oregon must invest in prevention programs through public health and early childhood to succeed.

OHA does have a POP request for Public Health Modernization – POP 410 at \$2m – while we are grateful that the Governor included this program in her recommended budget, this amount is not enough to cover increased costs, let alone increase efforts to stop the spread of diseases. For these reasons and many more, we implore you to include a meaningful amount – \$25 million or more for Public Health Modernization – in the OHA budget. This level in investment would help protect Oregon's public health system and keep our communities safer for generations to come.





OREGON COALITION OF LOCAL HEALTH OFFICIALS

Representing the collective interests
of Oregon's 33 local public health
authorities to improve the health of
all Oregonians.

oregonclho.org

Thank you so much for your consideration.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Philip Mason-Joyner'.

Philip Mason-Joyner
CLHO Board Chair

For more information, contact Sarah Lochner, Executive Director
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