



Action for Public Health

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Massachusetts Public Health Association Statement on FY14 House Ways and Means Budget Proposal April 12, 2013

The House Ways and Means Budget proposal for FY14, released Wednesday, provides level funding for the Department of Public Health (DPH). However, when compared to the increased costs associated with providing the current level of programs and services, the real impact of the proposed budget is more than \$18 million in cuts to community-based programs.

Primary prevention programs – including state funding for the **Mass in Motion program**, **comprehensive care coordination**, and **tobacco programs** – take another big hit. The line items that fund these programs have been cut more than any other in the DPH budget (85% and 69% since FY09). At a time when Massachusetts is focused on health care cost control and in a year when tobacco taxes are likely to be increased significantly, these cuts are extremely shortsighted and disappointing.

Line items that fund **core public health infrastructure and regulatory functions** – including inspections of health care facilities, pharmacies, food safety assurance, and response to infectious disease – generally receive a modest increase, but fall short of funding levels necessary to close critical safety gaps that expose our population to unacceptable levels of risk. The one area that receives significant additional funding is the **Board of Registration in Pharmacy**, which is proposed to be increased by \$1.1 million. This funding would allow for the hiring of new inspectors to conduct unannounced inspections of pharmacies.

The House budget assumes that new taxes passed in the House transportation bill earlier this week will be available for the FY14 budget, including **increased taxes on cigarettes, cigars, and smokeless tobacco products**. While we applaud the tax increases on these harmful products (shown to have a direct impact on youth tobacco usage), it is disappointing that a portion of this new revenue is not specifically dedicated to public health and tobacco control.

On the whole, the House Ways and Means budget misses opportunities to re-invest in a distressed public health system. Increased funding for pharmacy inspections is sorely needed; however, we urge the House to not only address areas of crisis, but to act now to prevent future crises that may result from chronic underfunding of our public health infrastructure.

Debate will begin in the House on Monday, April 22nd. We will be calling on the House to adopt amendments that will shore up essential services that all our residents rely on, address health care cost containment, and support a healthier population. Stay tuned next week on what you can do to help strengthen our public health system.

MPHA will be focused on these priority areas that address primary prevention and core public health infrastructure:

- Funding for the **Health Promotion and Disease Prevention** line item would be cut by more than \$1 million (31%). This line item has already been cut by a full 85% since FY09. This funding supports the Mass in Motion municipal grant program that promotes healthy eating and active living in communities across the state, as well as a comprehensive care coordination program for low-income, high-risk women receiving care at community health centers. The proposed funding level is below federal maintenance of effort requirements for federal care coordination funding; as a result, the proposed cut puts more than \$5 million of federal matching funds at risk.
- Funding for **Tobacco Prevention and Cessation** would be cut by nearly \$200,000 (5%). This line item has already been cut by 69% since FY09. As both the House and Senate consider raising more than \$150 million from new tobacco taxes, it is unacceptable to simultaneously cut tobacco programs. This cut will undermine local prevention efforts, as well as access to cessation programs.
- We appreciate the \$221,000 increase (6%) for **Environmental Public Health Services**, however, the programs funded by this line item have been chronically underfunded for too many years. For instance, DPH currently employs fewer than half of the number of food inspectors recommended by the US Food and Drug Administration. A report by the State Auditor in 2007 found “severe deficiencies” in food protection activities within the Commonwealth, primarily due to resource constraints. Current funding levels are below those at the time of the report’s release. In addition to food protection activities, there are serious capacity issues for indoor air quality assessments in schools and other public buildings; inspections of medical and biologic waste; and water quality and safety inspections of swimming beaches, public pools, and recreational camps.
- Similarly, an increase of \$630,000 for **Health Care Safety and Quality** is sorely needed, but insufficient to address gaps in capacity to inspect, license, and respond to complaints at health care facilities, as well as to perform new responsibilities mandated under the 2012 cost containment law. DPH currently licenses more than 6,000 health care facilities and handles approximately 14,000 consumer complaints each year. There is currently a 5 month backlog of complaints, which can jeopardize patient safety and result in uncoordinated inspections in which investigators are unaware of pending complaints against facilities.
- Two core infrastructure programs, **the State Laboratory and Communicable Disease Control** and **Critical Operations and Essential Services** also receive modest increases (2% and 3% respectively) that do not address needed investments after years of cuts. The State Lab (cut 21% since FY09) is comprised of 17 laboratories that are responsible for the testing of samples for influenza, tuberculosis, salmonella, lead poisoning, bioterror agents, food and insect-borne diseases; training in disease surveillance, reporting criteria, data quality, investigation, and control for local health departments; and helping local health departments respond to communicable disease threats. The Critical Operations and Essential Services line item (cut 16% since FY09) supports services and staff across DPH, including emergency preparedness, environmental health assessments, implementation and enforcement of regulations, and reducing disparities in health care.

In addition, numerous other programs across DPH would be cut or eliminated:

- Substance Abuse Step Down Services – 41% decrease
- Youth Violence Prevention – 33% decrease
- Compulsive Gamblers Treatment – 21% decrease
- Early Intervention – 10% decrease
- Teenage Pregnancy Prevention – 5% decrease
- School Health Services – 3% decrease
- Substance Abuse Jail Diversion Programs – eliminated

Several programs would receive increases over current year funding or level funding, though not all increases cover the higher cost of services from year to year:

- Substance Abuse Services – 9% increase
- Infection Prevention and Control – 7% increase
- Universal Immunization Program – 3% increase
- Women, Infants, and Children (WIC) Program – 3% increase
- Oral Health – 1% increase
- Suicide Prevention – 1% increase
- Domestic Violence and Sexual Assault Prevention and Services – level funded

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