

Testimony of the **Kansas Public Health Association** to the Kansas Senate Committee on Ways and Means Proponent for HB 2248 • **March 24, 2021**

Chairman Billinger and Members of the Committee:

Thank you for the opportunity to provide written testimony in support of House Bill 2248. This bill would increase the minimum funding formula for local public health departments from the state general fund. Recent findings published by Trust for America's health indicates Kansas ranks in the bottom tier in state financial support for public health funding, investing \$13 per Kansan. This is considerably lower than several of our neighboring states, including Oklahoma (\$44/person) and Nebraska (\$38/person). As we emerge from the worst public health crisis in a century, the need for a strong, equipped and well-coordinated public health system has never been more evident.

The local public health departments which serve Kansas counties operate on diversified revenue streams, which includes critical support from the state general fund. K.S.A 65-242 dictates the amount each health department receives from the state. This formula has not been modified since 1992, resulting in massive underfunding of one of the state's critical systems to ensure the health and safety of the population. Currently, 69 of the state's 105 counties receive just the \$7,000 minimum allowed by the state formula.

The amount allocated through the state formula is currently \$2.2 million, the same amount since it was last updated in 1992. While all counties need an increase in funding, the dollars are especially critical for the state's smaller health departments which struggle to maintain the capacity required to deliver public health's essential services. This bill assures that if an increase were to happen to at minimum \$3 million, then this change helps ensure the minimum increase will not decrease the larger health departments from their current allocations (all health departments would see more funding under this bill than they currently receive). The \$7,000 minimum would continue to be used if less than \$3 million is allocated to the State Formula. While this bill has no direct fiscal impact, the bill authorizes a change to the language so that if additional state funds were made available the state's smaller counties would share in that increase.

As funding has continued to dry up so too have the critical programs, services and coordination efforts that local public health departments provide to their communities. It is time we increase the investment to local public health departments to assure that more counties can deliver the full scope of what public health is intended and expected to provide.

Respectfully Submitted,

Brandon Skidmore, President Kansas Public Health Association

KPHA is a professional association for Kansas public health practitioners, professionals, and advocates. As a voice for public health, KPHA provides a forum for individuals and organizations to work collectively to assure conditions in which Kansans' lives will be healthy. (This position reflects the collective position of association members through the action of the Board of Directors and may not necessarily reflect the views of each KPHA member's employer.)

http://www.kpha.us/ kpha@kpha.us

ⁱ SHADAC analysis of Shortchanging America's Health, Investing in America's Health, The Impact of Chronic Underfunding on America's Public Health System, Trust for America's Health (TFAH)., State Health Compare, SHADAC, University of Minnesota, statehealthcompare.shadac.org, Accessed 2/21/2021