

State Aid Support for Local Public Health Units

Why should state aid be increased from \$8M to \$10M for this biennium? (increase based on lost revenue (federal), retirement and insurance increases over the biennium)

Readiness and response

- Local public health works with local (school, city, county), state and tribal partners and leaders to coordinate efficient response to local emergencies.
- Ensure ability to respond to emergent public health needs across the state including but not limited to floods, tornadoes, winter storms, formula shortages, drug abuse/misuse response, food and housing insecurity response, etc.
- Need to build capacity to have the ability to respond to local needs and adapt to situations as they arise.

Attracting and retaining local public health professional workforce

- Retention of local public health professionals and qualified workforce has increased in cost due to economic factors, like inflation, and competition within the segment due to shortages. As with many agencies, the increase in insurance and retirement costs have added a fiscal burden. These benefits continue to be critically important for recruitment and retention of the workforce.
- Turnover in local public health workforce due to non-competitive salaries compared to private companies.
- Salary and fringe for staff needs to further increase provide a living wage that is competitive with private industry to retain the needed workforce. The cost of living has increased in the 2024 first quarter by 3.25%.
- Emphasizing and offering healthy living is helpful in attracting businesses and people to ND which increases the State's workforce. Efforts to cultivate wellness also help to "achieve the overarching goal of making North Dakota the healthiest state in the nation."
(hhs.nd.gov/SHIP, page 2)

Addressing public health challenges

- Local public health units reported that the top health issue identified in their community health assessments are mental health, behavioral health and obesity.
- Local public health continues to see public health challenges of obesity, diabetes, substance use, lack of preventive screenings, etc.
- The state of North Dakota has been investing in growing the economy and attracting businesses to the state. Local public health serves a critical role in supporting growth in these communities. Local public health often fills gaps in our communities and increases access to services for those in need in our communities, e.g., helping senior citizens remain in their homes.

- Funding is essential to provide the level of fundamental public health services and programs that are needed. More outreach and services are required to meet the community's needs.
- North Dakota has seen an increase in state population through births and immigration. The staff available to serve communities needs to be retained both for community response and work in areas of prevention and screening.
- Many local public health units serve as regional hubs for many public health services. This highlights the importance of strong staffing levels, not only for emergency response, but also to rebuild the many other health department and community health priorities that have been impacted in recent years.

How will local public health use these funds?

- State aid funds are used to address community health priorities and community-based services not typically funded through grant sources or community partners.
- State aid dollars are used for grant matches.
- State aid funds are used largely for activities to reach disadvantaged, marginalized and disparate populations. These activities are not reimbursed through other mechanisms and require more staff time and travel, along with personal care and other practical assistance for children, young people and adults who need extra support: local public health focuses on meeting the client where they are at.
- State aid funds help decrease the cost burden of city/county governments as these entities are covering large portions of local public health budgets in some areas.

What is the risk if state aid is not increased?

- Every North Dakota citizen has the right to live a healthy and safe life. Local public health makes this right possible through the use of this funding as we are responsible for providing the following core functions as detailed out in NDCC 23-35-02:
 - Communicable disease control
 - Chronic disease and injury prevention
 - Environmental public health
 - Maternal, child, and family health
 - Access to clinical care
- Local public health response in the last two years included team members working to serve communities during shortages of infant formula, flooding, drought, winter storm outages, and disease mitigation and prevention services to implement routine programs.
 - These team members also conduct home visits for medication administration and foot care; serve families and foster families through health tracks for vision screenings and oral health screenings; they conduct nursing and developmental screenings; support schools with health screenings and routine wellness immunization clinics; and conduct environmental health inspections.
- Underfunding local public health will hinder the ability to respond to community needs.

- The need for local public health services has increased over the decades due to community growth, increased need for public health services and to assist with local needs.
- Local public health units are managed and administered locally to provide efficient and nimble response as necessary. Cities and counties support much of what local public health does which is augmented by the additional State contribution to reduce local financial burdens. There is growing concern among local jurisdictions about increasing local public health funding without more state investment especially with the outcry for lower property taxes and the Property Tax Elimination measure.
- Dedicated State Aid for Environmental Health is needed to address unfunded, locally emerging issues such as partnering with Department of Environmental Quality on Harmful Algal Blooms, nuisance complaints, education on Avian Influenza and other issues as they develop. Other areas of focus funded only by license/permit fees for our Environmental Health programs are onsite septic systems, safety inspections for food and beverage establishments, aquatic venues, tanning/body art establishments, lodging, and mobile home/RV campgrounds.

ND Local Public Health State Aid Funding History

	Biennium								
	2007-09	2009-2011	2011-13	2013-15	2015-17	2017-19	2019-21	2021-23	2023-25
General	1,900,000	2,400,000	3,000,000	4,000,000	4,250,000	3,250,000	4,725,000	4,725,000	4,725,000
Community Health Trust Fund								525,000	3,275,000
Tobacco Prevention & Control Trust Fund						2,000,000	525,000		
Total	1,900,000	2,400,000	3,000,000	4,000,000	4,250,000	5,250,000	5,250,000	5,250,000	8,000,000

- **Local public health cannot continue to meet the needs of the growing population without a strategic investment in State Aid to support workforce and program resources.**