Chairman Carpenter and Members of the Committee:

Thank you for the opportunity to speak today regarding the Kansas Department of Health and Environment’s (KDHE’s) budget. My name is Dennis Kriesel, and I am the Executive Director of the Kansas Association of Local Health Departments (KALHD). KALHD is a nonprofit association dedicated to strengthening local health departments for the purpose of improving and protecting the health of all Kansans.

KALHD is requesting the committee consider two enhancements for FY 2021, one regarding local health department aid and another regarding KDHE’s Local Public Health Program. To the first point, KALHD is requesting the committee consider adding $1.9 million in FY 2021 to Aid to Local Health Departments for statutory formula distribution as listed under KDHE’s Division of Public Health. The Governor’s budget allocates $2.2 million for such Aid to Local Health Departments in FY 2021. This enhancement would raise the total allocation to $4.1 million.

According to KDHE, this statutory formula aid (commonly referred to as State Formula funding by KDHE and the local health departments) has not been increased since 1992. Our requested amount was determined by using the Bureau of Labor Statistic’s Consumer Price Index Inflation Calculator in order to match the buying power $2.2 million had back in 1992. We did not include a full per capita adjustment (the population of Kansas has grown approximately 15% since 1992) as we understand the state is struggling with many competing financial priorities, and we feel the inflation adjustment alone can be leveraged for a lot of good statewide.

This State Formula funding is discretionary in its use, meaning local health departments can use it to help with a host of important public health functions. The funding exists because while Kansas has a decentralized public health system there are several statutory requirements the state places on the local level, including: disease investigation and control, school inspections, immunizations, enforcement of nuisance laws, and environmental health functions. But the work of local health departments goes much further. Local health departments serve as the chief health strategists for their communities, providing services identified as community needs (such as senior services, home visitation, car seat safety, and many more) and functioning to educate local populations about health issues and providing key emergency preparedness functions and readiness.

1 See page 106 of The Governor’s Budget Report, Volume 1, Fiscal Year 2021
2 The BLS CPI Inflation Calculator results, from comparing $2.2 million in January 1992 to its value in December 2019 dollars, is here: https://data.bls.gov/cgi-bin/cpicalc.pl?cost1=2200000&year1=199201&year2=201912
3 Kansas’s 1992 population was 2.526 million and its latest (2018) population is 2.912 million.
Almost thirty years without an inflation adjustment is a long time for any system to function, and Kansas’s is showing signs of strain. According to the 2019 America’s Health Rankings⁴ Kansas experienced the **greatest ranking decrease over the 30 years of the report’s existence**. We view this decline in comparison to the other states as unacceptable. Resources are desperately needed to help counteract this downward slide. Enhancing aid to local health departments to adjust for the losses in buying power due to inflation would provide critical assistance and help in addressing emerging threats like the recent coronavirus threat seen worldwide.

This leads to our second enhancement ask, which would be to add $100,000 to the Local Public Health Program (which resides under the Bureau of Community Health Systems within KDHE’s Division of Public Health). The Local Public Health Program provides critical infrastructure to the local health departments in Kansas. It not only allocates the State Formula funding, but it also provides important survey functions to local health departments, organizes regional meetings to benefit local health, serves as a primary source of information to local health, and partners with local health to resolve issues in the system and circulate important information. KALHD works very closely with the Local Public Health Program and it is a key partner to local health departments. Currently, the Program relies on a hodge-podge of funding streams but it lacks significant State General Fund support. We feel such support is warranted if we want to truly improve the health of all Kansans.

Thank you for listening and considering these two enhancement requests to KDHE’s Division of Health budget. I will stand for questions.

Respectfully,

*Dennis Kriesel*

Executive Director, Kansas Association of Local Health Departments

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