

# Kansas Association of Local Health Departments

## 2023 Policy Statement

### Public Health in Kansas

Public health's primary function is to protect and promote the population's health through prevention, environmental protection, and public regulations and policies. Population-based prevention efforts improve the health of Kansans more efficiently than clinical care alone. According to the Centers for Disease Control and Prevention, "health care accounts for only 10% of health outcomes; the remaining 90% are influenced by a complex mix of determinants of health including behaviors, socioeconomic, and physical environments."

KALHD is actively working with public health and other systems partners to develop policy changes to modernize the public health system in order to ensure the health and safety of all Kansans.

#### Policy Priorities

**State/Federal Financial Support for Local Public Health** KALHD recognizes and appreciates the recent increases in the State's "Aid to Local" (aka State Formula) funding for local health departments which had previously remained flat since 1992 (increases of \$1 million in FY2022, \$800,000 in FY2023 and \$800,000 in FY2024). However, these additional investments do not yet fully account for all inflation and population factors experienced by health departments and Boards of County Commissioners from 1992 to 2023. KALHD seeks an additional \$843,493 million<sup>1</sup> in Aid to Local funding (increasing the total to \$5,663,743 million in FY2025). Further, we support changing K.S.A. 65-242 to a base plus population allocation model, rather than a capped minimum that disqualifies departments from having a population modifier and encourage passage of House Bill 2330 to enact these formula changes. We also support increased funding, both state and federal, for public health services to strengthen the public health system and protect the health of Kansans, for both local health departments and partner organizations such as KDHE's Division of Public Health. Funding for public health should be enhanced and substantially modified to support core infrastructure and services as well as modernization efforts.

**Social Determinants of Health** Social Determinants of Health are the social and physical environments that promote good health for all. The determinants are broadly categorized as economic stability, education, health and health care, neighborhood and built environment, and social and community context. Local public health departments, functioning as the chief health strategists for their communities, are working to coordinate solutions to gaps within the social determinants of health and to address racial equity. We believe funding streams should be identified and created to help fund this work and legal barriers to making progress in these realms removed as necessary.

**Behavioral Health Services** Untreated mental illness, including substance misuse, has been identified by the National Council for Community Behavioral Healthcare as a public health crisis. It leads to chronic and long-term public health issues. We acknowledge recent investments by the Kansas Legislature and support sustaining current investment levels. We also encourage additional investment in funding for both community-based and in-patient crisis stabilization and treatment.

**Medicaid Expansion** We support expansion of the Kansas Medicaid program, which will complement counties' efforts in public health by bringing federal dollars to Kansas, provide vital revenues to our local providers, and reduce the number of uninsured Kansans.

#### Additional Policy Statements

**Immunizations** Vaccines have reduced or eliminated many diseases that once killed or seriously harmed infants, children, and adults. We oppose increasing allowable exemptions, which leads to decreased vaccination rates and poses a significant risk to the health and well-being of Kansans. In addition, we feel the existing exemptions should be reviewed and those that pose significant risk to the public's health be repealed. We also oppose efforts to shift immunization decision-making from public health professionals or other steps designed to eliminate immunization regulations or requirements.

**Substance Misuse** The current challenges with substance misuse require direct action to combat the impact of alcohol and illicit substance use on public health. Local health departments play a critical role in responding to the needs of individuals and we support increased funding to implement evidence-based policies and programs for the prevention and treatment of substance use disorders. Investment is recommended in education and training

for professionals, continuing to increase public access to naloxone, expansion of medically assisted treatment (MAT), and we encourage the Legislature to support creative approaches for local governments to explore to reduce abuse and improve health.

**Climate Change and Clean Environment** Local health departments play a key role in environmental protection which impacts overall public health. This includes enforcement of local sanitation codes and ensuring proper wastewater and sewage disposal, which are vital to ensuring a safe and clean water supply for Kansas families. For which, the State eliminated financial support when the Local Environmental Protection Program (LEPP) was defunded in 2012 and we urge the Legislature to restore. In addition, the Kansas Clean Air Act is an effective public health strategy aimed at reducing the negative consequences of second-hand smoke and vape cloud exposure. We oppose any efforts to diminish the effectiveness of the law through exemptions that provide no public benefit and would negatively impact the health of Kansans. Towards these ends, KALHD supports environmental, energy and land-management policies that balance use and practicality with preservation that are achieved through scientifically based regulations without undue restrictions. This includes funding for executing state regulations.

**Regulation of ENDS (Electronic Nicotine Delivery Systems)** In recent years ENDS devices (e.g., electronic cigarettes and vaping devices) have increased in use and sales, especially among youth. We support policies to regulate the sale, marketing and use of ENDS to protect the health of users, reduce youth initiation to nicotine and tobacco products, and promote enforcement of tobacco-free laws. We also support a ban on the sale of flavored nicotine vaping products, including menthol.

**Expand Access to Dental Care** We support passage of the dental therapist legislation in order to increase access to quality, cost-effective dental care for Kansas families.

**Community Fluoridation** We support preservation of community water fluoridation in Kansas. Community water fluoridation is proven to be a safe and effective way to reduce tooth decay.

**Women, Infants, and Children (WIC) Nutrition program** We support the priorities of the National WIC Association and support full funding of the WIC program; strengthening of the WIC Breastfeeding Peer Counselor Program; continued support of the electronic benefits model; continued support for fresh fruit and vegetable benefits; and fully funding of the Supplemental Nutrition Assistance Program (SNAP) through the farm bill process as the SNAP program works in tandem with WIC and other programs to support low-income families to meet their nutrition needs and to combat hunger.

**Resilient Communities** According to the CDC, childhood experiences, both positive and negative, have a tremendous impact on future violence victimization and perpetration, and lifelong health and opportunity. As such, early experiences are an important public health issue. We support funding and policies for public health to address both Positive and Adverse Childhood Experiences (PACEs or ACEs). We support the use of trauma-informed care for public health practitioners in order to reduce or prevent the resultant wide-ranging health and social consequences.

**School Inspections** We support making the requirements for the local health officer to inspect schools pursuant to K.S.A 65-202, optional. Prior to the enactment of HB2016 in 2020, in many counties this task was handled by another entities such as commercial insurance providers. Currently, local health officers are required to have a sanitary inspection conducted of each school building and grounds every fall term, when historically, this requirement could be chartered out by the Board of County Commissioners via home rule if another entity provided this function. The optional solution would be to permit the local health officer to handle the inspection if necessary.

**Access to Free and Reduced Cost School Meals** Given our mission in which we are dedicated to strengthening local health departments for the purpose of improving and protecting the health of all Kansans, we recognize the importance of access to free and reduced cost school meals on the long-term health of Kansas children. Benefits include, but not limited to, better health, improved performance at school, improved attendance and behavior, all of which contribute to improved long term health and life outcomes that make our Kansas communities stronger.

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<sup>i</sup> The 1992 allocation (\$2,220,250 million) factored against the population (2,532,00 million as of July 1992) resulted in a per capita value of \$0.87. [BLS CPI](#) inflation calculator of that value from July 1992 to September of 2023 increases per capita value to \$1.93. Multiplied by the Kansas 2021 population of 2,934,582 (certified July 1, 2022) sets the inflation- and population-adjusted State Formula at \$5,663,743 million.