

Executive Director Report

June 18, 2025

Organizational Updates

- 2025 Audit of budget year 2024 underway. The auditors were on site at KALHD office on June 10th. Auditors have asked for additional information or clarifications on a daily basis and are expected to finish their work soon. Their internal review may take some additional time due to an apparent backlog of audits for other clients. The audit staff estimated presentation of the report to the Board at our September meeting.
- Invoice paid to NACCHO for 54 LHD's who elected to continue their membership for the next year.
- IRS notice confirming the extension request filed May 15, 2025 has been received and retained in our permanent files. The tax return for calendar year 2024 is due November 15, 2025 and will be performed by SSCCPA sometime in the fall and after completion of the audit.
- Unemployment Insurance to State of Kansas. Our payroll software provider, Paychex, sent a notice indicating changes in their policies and procedures related to unemployment insurance. Upon investigation no history of KALHD paying this as part of tax withholdings was identified. I have reviewed the Kansas Department of Labor employer guidelines and am reasonably confident that we are exempted from these laws due to our non-profit status and employing fewer than 4 employees. I will be attempting to verify this interpretation through KDOL before reaching a final conclusion. And if that is unsuccessful, I mentioned this to the audit staff while they were here and we could engage SSCCPA to assist with this topic.

Project Updates

- Requested a meeting with KDHE regarding the reduced WIC funding for LHDs in the current federal budget year that they announced at the beginning of June. KDHE granted the meeting request and shared in greater detail how the reductions were calculated while also committing to sharing more information with LHDs after the meeting.
 - KDHE committed to sending additional information to WIC programs on how the decreased allocations were determined and to update their FAQ. That information was sent out on June 10th.

- KDHE shared that their federal partners have advised them not to anticipate funds above the base level grant for the remainder of this year. The Kansas WIC Program has in past years received more than base level funding and built that into WIC program allocations.
 - KDHE encourages WIC programs to contact them for one-on-one conversations about the reduction, particularly when staff work hours and/or staff layoffs will be necessary to meet the KDHE defined reduction amount for a LHD.
 - Funding methodology for federal fiscal year 2026 (beginning October 1, 2025) has not been determined.
- 2025 MYM Update. Finalizing the last details for this event was the priority this month. Thank you to everyone on the planning team and at WSU for your contributions and to everyone who could attend.
- Periodic meetings with the KDHE Secretary and KPHA resumed this month. Topics discussed included:
 - WIC funding – no ability for KDHE to mitigate the impact of these cuts.
 - Courier Services – shared a KALHD recommendation to reduce frequency of pickups while continuing the same number of local pick-up sites. KDHE is exploring reductions in one or both to sustain the service for a longer period of time.
 - Legislative Interim Committees – the Bethel Committee on KANCARE Oversight is requesting updates on measles but so far (early) no other topics have been requested by this or other committees that impact public health.
 - State Budget – Expecting a tight budget for FY2026 and the Governor or Legislature including enhancement requests in a future budget will be challenging. In a change from prior years, agency enhancement requests will go to the Legislature this fall different than historical process of them going to the Governor first for consideration.
 - KDHE will provide a process again this year for stakeholders to make policy and budget recommendations to the agency. This will occur in August.
 - KDHE staff continue working on the 2024 KALHD Taskforce Recommendations. More information will be shared soon.
- State of Kansas Revenue and Expenditures FY2026. To help inform KALHD discussions on policy and budget priorities, particularly in light of experienced and potential reductions in Federal funds, I researched the final state budget documents so we can see the big picture that the Governor, Cabinet Secretary's, Division of the Budget, and the Legislature will be looking at when they build a budget request this fall for the 2026 legislative session.
 - The April Consensus revenue projection is \$10.066 billion SGF ([source KLRD Adjusted Consensus Estimates for FY2025 and FY2026](#))
 - The Legislative approved FY2026 budget expenditures are \$10.629 billion SGF ([source KLRD 2025 Legislative Highlights](#))
 - In effect, the State is dipping into fiscal reserves in FY2026 due to spending more than is expected in revenue. Some projections during the session indicated this will worsen in FY2027 and future years.

- These figures do not contemplate the lost federal funding Kansas is beginning to experience or may experience.
 - Given the Legislatures changed budget process, and the previously mentioned KDHE process, KALHD should prepare any budget requests for submission beginning as early as August.
- Outreach to Kansas Congressional Delegation. As we discussed at our May meeting, outreach to our elected officials in Washington, D.C. is a key step in our advocacy in light of recent cuts and the Presidents proposed budget and reconciliation efforts. Then the additional WIC funding cut notification from KDHE added to the importance of attempting to engage the members of our delegation. Attached to this report is a copy of the letter sent to them on June 17, 2025. As of this report, only an auto-response has been received so far from any of their offices. I cc'd the KPHA President on the letter based upon our discussions about our associations working together on advocacy and if any member offers to meet with us, we will do that in unison.

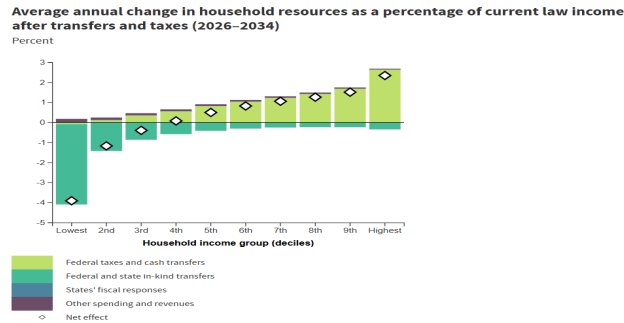
Federal Updates

Federal Fiscal Year 2026 Budget

- On May 2, 2025, President Trump submitted his [Federal Fiscal Year \(FFY\) 2026 budget](#) to Congress which was followed by a more detailed [Technical Supplement to the 2026 Budget Appendix](#) at the end of May. The 2nd document is additional specifics it is not a more hopeful document in terms of how the Administration views the value of public services.
- The House Appropriations Committee Chairman has established a [schedule](#) for various subcommittees working on Fiscal Year 2026 (which begins Oct 1, 2025) that began earlier this month and is currently scheduled to progress through the end of July. The Senate has also begun [hearings](#) on the Presidents budget and will continue on a similar timeline.
- As this is a new appropriations bill, it should be subject to rules in the Senate that require 60 votes to pass an eventual budget bill. Because there are currently 53 Republicans, 45 Democrats and 2 Independent Senators in office, Republicans cannot pass a budget bill without at least some support from the other party.

Federal Reconciliation Bill House Resolution 1 (H.R.1)

- The Congressional Budget Office has released its analysis of the [distributional effects](#) of H.R.1 the One Big Beautiful Bill Act. The following is one illustration of the impact.



- The House passed H.R. 1 on May 22, 2025 by a vote of 215 Yeas - 214 Nays and 1 present.
- The Congressional website does not currently list any official action by the Senate on H.R. 1. As you probably have seen in the media, there are any number of opinions on how this will advance in that chamber.

Important Dates to Remember

- July 15, 2025, KALHD Board Meeting (virtual)
- September 16, 2025, KALHD Board Meeting (virtual)
- [Kansas Public Health Association Conference](#), September 23-24, 2025, at the Eugene M. Hughes Metropolitan Complex, located in Wichita, Ks.



Healthy People Build Strong Communities

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June 17, 2025

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Dear Members of the Kansas Congressional Delegation,

My name is Randy Bowman, and I am the Executive Director of the Kansas Association of Local Health Departments ([KALHD](http://www.kalhd.org)). Organized in May of 1979, for decades our member administrators of Local Health Departments (LHD) have dedicated themselves to strengthening those departments for the purpose of improving and protecting the health of all Kansans. Our local health departments are on the front lines working to ensure the health security of our communities by serving the whole community and focusing on primary prevention. This approach can be the difference between preventing negative outcomes from ever occurring and more costly and dangerous ones.

I am writing because the Federal government plays a vital role in this mission. However, recent and proposed changes at the federal level are creating deep uncertainty around funding for local health departments. This instability is already undermining our capacity to provide essential services.

Due to imposed federal cuts, the Kansas Department of Health and Environment (KDHE) has recently implemented the following reductions:

- 1) On March 24, 2025, \$12.6 million in funding was slashed across 87 local government, university, and community organizations integral to our public health system. Thirty-five local health departments experienced direct reductions in services in their communities, and statewide the funding for the laboratory courier service was lost. The courier service is an essential link ensuring that every Kansan has access to the clinical and environmental tests provided at the Kansas Health and Environmental Laboratory (KHEL) located in Topeka, Kansas. According to KDHE, that laboratory performs approximately 1 million clinical and environmental tests each year.
- 2) These same cuts also forced KDHE to reduce their workforce by 52 full-time equivalent positions (FTE). Those employees were part of the critical public health infrastructure that supports a healthier workforce, keeps kids in school, and provides essential support for local public health departments. Those staff provided state level support such as epidemiology and laboratory services that often are not cost effective to provide at the local level, particularly in our rural communities.
- 3) On June 2, 2025, KDHE announced a \$2.6 million dollar cut to Women's Infant and Children (WIC) programs statewide, most of which are operated by local health departments. This reduction represents an average decrease of 14.9% (range of – 1 to 90% with a few seeing increases of + 1 to 74%) which must be absorbed in the remaining 4 months of the current federal fiscal year. These cuts reduce funding for local staff who work to safeguard the health of low-income pregnant, postpartum, and breastfeeding women, infants, and children up to age 5 who are at nutritional risk by providing nutritious foods to supplement diets, information on healthy eating including breastfeeding promotion and support, and referrals to health care. Infants and children who, if healthy, will become vibrant participants in our future workforce and leaders in our communities.
- 4) Compounding the situation, state-level funding reductions include the June 9th dismissal of 8 disease intervention specialists (DIS) staff at KDHE are further eroding the capacity to respond to public health threats. These staff worked alongside healthcare providers, patients, and local health departments in efforts to reduce the transmission of sexually transmitted infections that threaten the health and safety of our communities.

These funding rollbacks come at a time when the President's proposed budget includes further reductions, and when restructuring at the Department of Health and Human Services and other agencies adds even more uncertainty to the continuation of critical federal programs. If legislation like House Resolution 1 (H.R. 1) advances, or future appropriations follow a similar path, the consequences could be dire—especially for counties already facing difficult budgetary decisions.

Kansas families deserve a resilient public health system that can mitigate infectious disease, prevent chronic illness, and support maternal, child, and elder care. I respectfully urge you to oppose harmful funding cuts and advocate for sustainable investment in the programs that keep our communities safe and healthy. As you consider your position on this vital issue, please feel free to contact me or use me as a resource as I would be glad to provide additional information, insight, or context from the front lines of local public health.

Respectfully,



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Cc: Stephen Maheux, President – Kansas Public Health Association