



COALITION *for*  
HEALTH FUNDING

Congressional Briefing and National Webinar:

Beyond Emergency Funding: Sustaining Public  
Health Funding in the Post-COVID Landscape

June 22, 2022

1:30 – 2:30 PM Eastern Time

🐦 @HealthyAmerica1 @HealthFunding

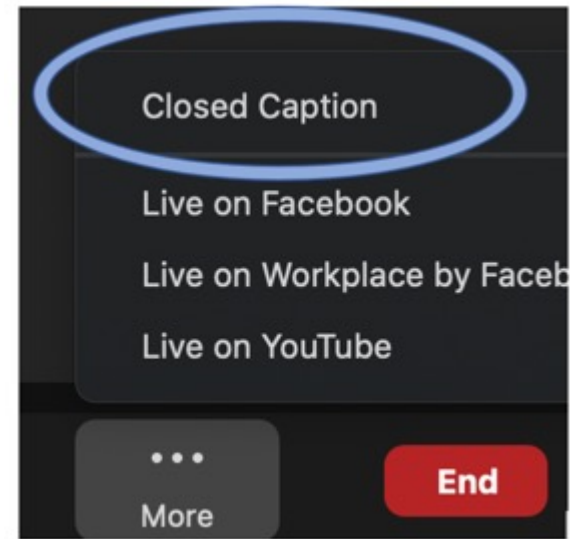
🌐 tfah.org publichealthfunding.org



# Closed Captioning

To see real time captioning:

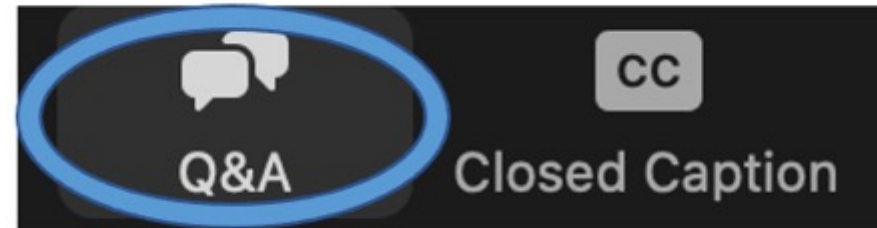
1. At the bottom of your screen, click to open **More**
2. Click **Closed Caption**



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# Q&A Feature

1. At the bottom of your screen, click to open the Q&A panel
2. Type your question in the Q&A box
3. Hit Enter



# Moderator



Mila Becker, JD

President

Coalition for Health Funding

Chief Policy Officer

Endocrine Society

[publichealthfunding.org](http://publichealthfunding.org) [endocrine.org](http://endocrine.org)

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# Agenda

Welcome and Overview

Presentations from Panelists

Questions and Answers

Closing



# Welcome to Our Panelists



**Michael Fraser, PhD, MS,  
CAE, FCPP**  
Chief Executive Officer  
Association of State and  
Territorial Health Officials



**Lisa Macon Harrison, MPH**  
Health Director  
Granville-Vance Health  
Department, NC  
Board President  
National Association of County  
and City Health Officials



**J. Nadine Gracia, MD, MSCE**  
President and CEO  
Trust for America's Health





Michael Fraser, PhD, MS, CAE, FCPP  
Chief Executive Officer  
Association of State and Territorial Health  
Officials

[astho.org](http://astho.org)





# **Beyond Emergency Funding: Sustaining Public Health Funding in the Post-COVID Landscape.**

Michael Fraser

June 2022





1,000,000+ lives

Est. \$16 trillion+ USD

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- “As I have told our own side, and, I think, the last year has illustrated to all of us, sometimes you need to spend billions to save trillions. And just look at the cost of what this pandemic has been...”
- \$4.6 trillion in emergency assistance to people, businesses, state and local governments, health care systems (US)

# How different would our public health response have been if public health agencies...

Were fully resourced to carry out a complete range of infectious disease surveillance and monitoring that included global “signals” and trends

Had data systems that were fully integrated between health care and public health organizations at the local, state, and federal levels

Had the capacity needed to quickly scale/surge disease investigation and health communications workforce

Had the Infrastructure to quickly develop needed tests and supplies

Had adequate investments in community-based public health work focused on achieving health equity and optimal health for all

# Public Health Funding “Roller Coaster”

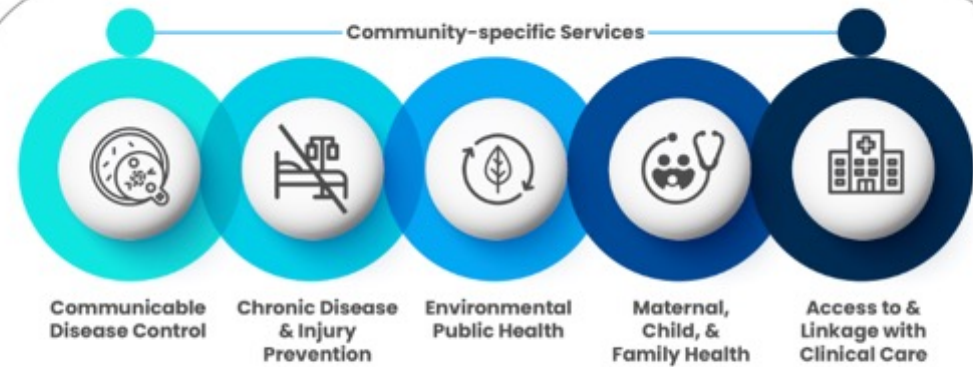
- Feast or famine, panic/neglect  
“boom and bust”
- H1N1
- Zika
- Ebola
- SARS-CoV-2/COVID-19



# Sustainable Post-COVID Funding

## Foundational Public Health Services

Foundational  
Areas



Foundational  
Capabilities

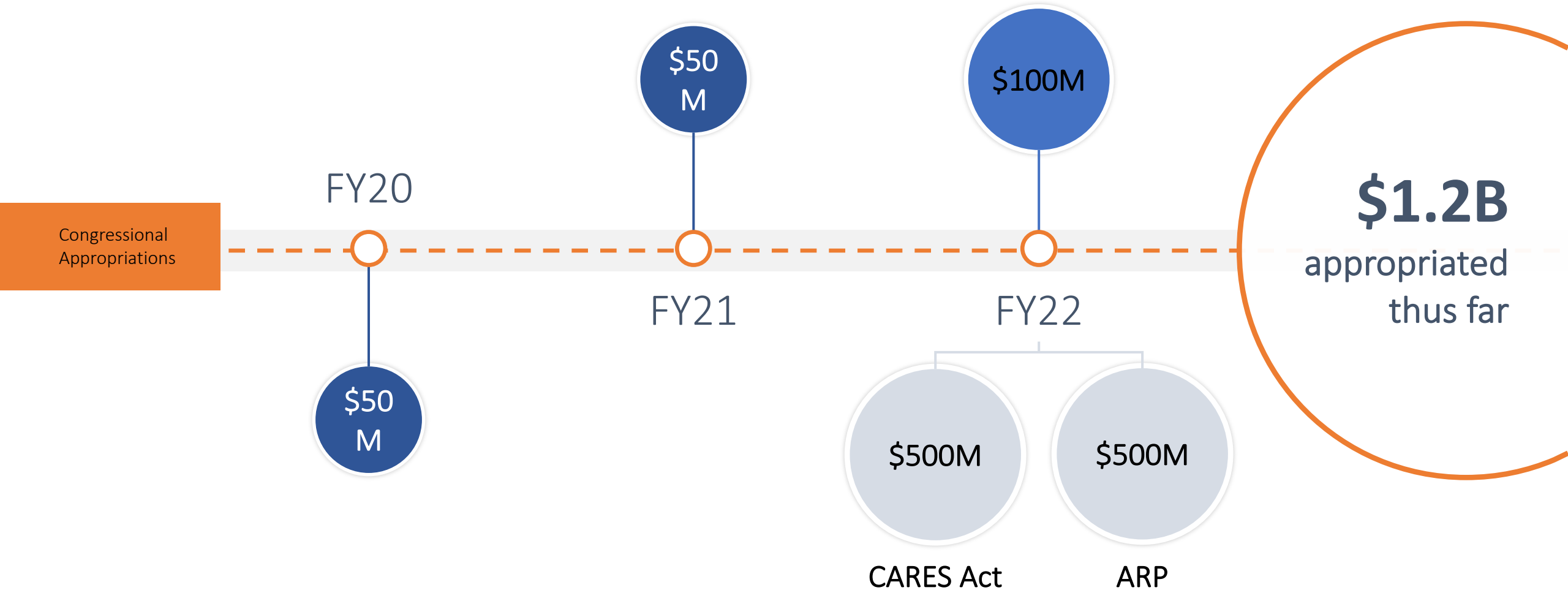
Assessment & Surveillance	Community Partnership Development	Equity	Organizational Competencies
Policy Development & Support	Accountability & Performance Management	Emergency Preparedness & Response	Communications



E Q U I T Y

February 2022

# Progress: A Down Payment on Modernization



# Future Investments Needed

Healthcare Information and Management Systems Society (HIMSS) investment recommendation over the next decade:

Electronic case reporting and contact tracing

Electronic laboratory results reporting

Establish a nimble rapid cycle learning health system

Syndromic disease surveillance

Immunization registry reporting and query

Interoperable platforms to facilitate broad-based data exchange

Nationwide notifiable disease surveillance

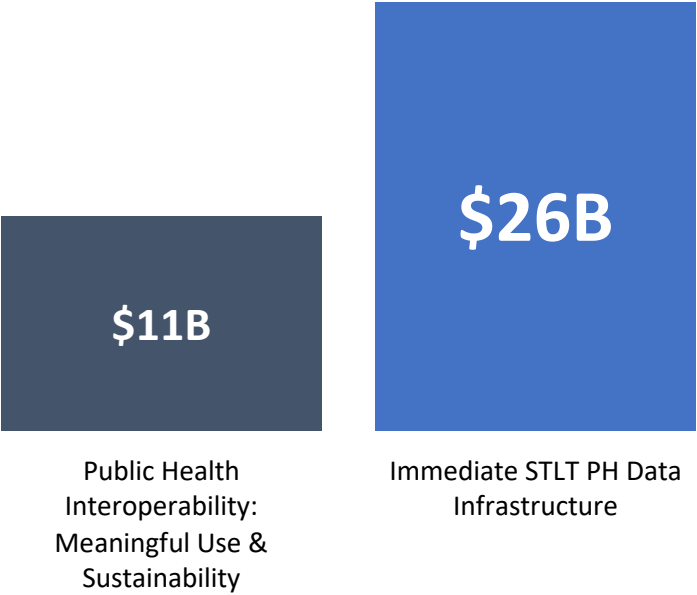
Health IT innovations and workforce capacity

Ongoing licensing costs, software updates, hardware updates

Vital records reporting

Trusted and secure access to multi-modal health data

**\$37B** proposed 10-year investment



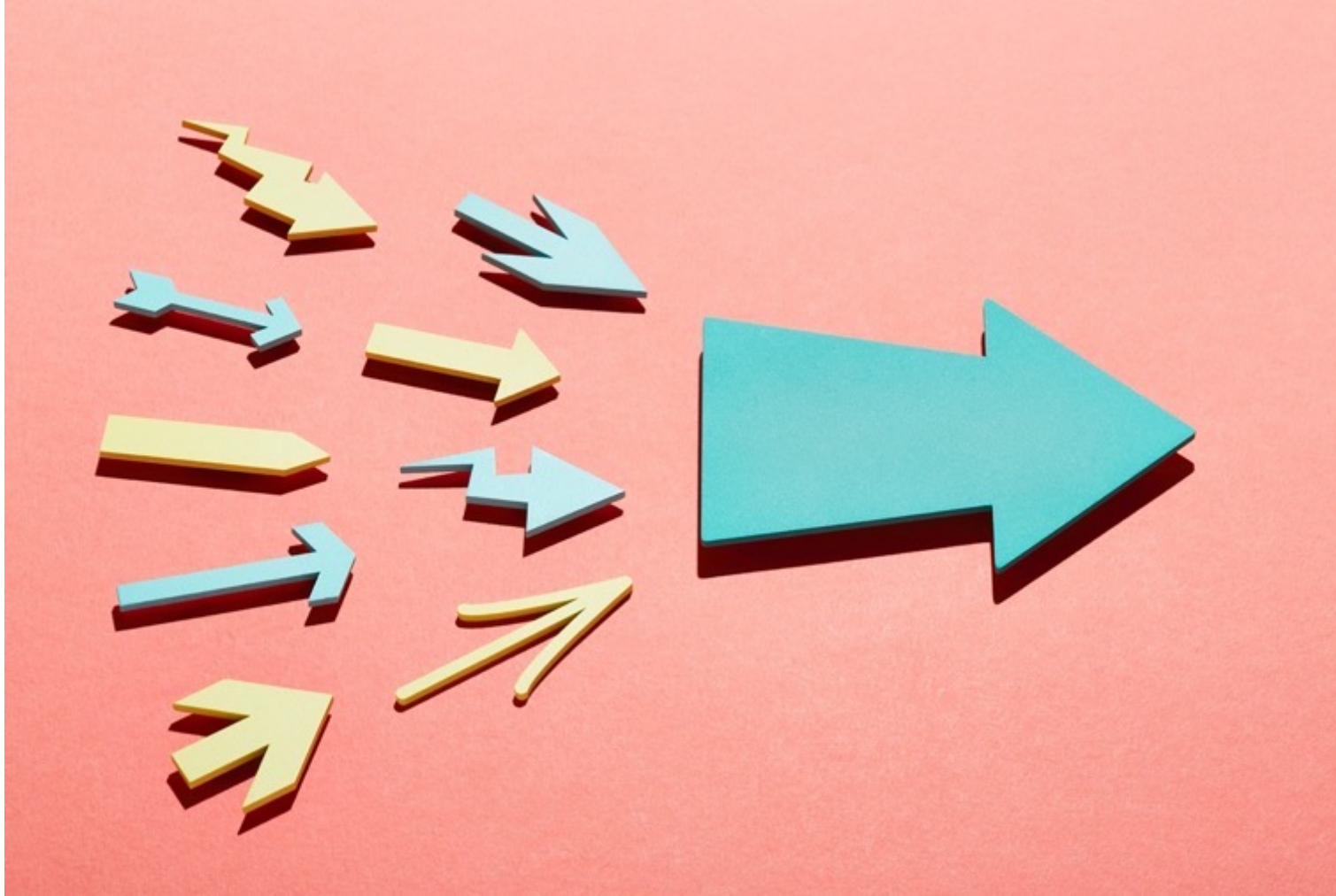


# COVID Funding “Cliff”





# The Future – FY23 and Beyond







Lisa Macon Harrison, MPH

Health Director

Granville-Vance Health Department, NC

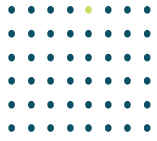
Board President

National Association of County and City

Health Officials

[gvph.org](http://gvph.org) [naccho.org](http://naccho.org)

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# LOCAL PUBLIC HEALTH

## *Working in Partnership for Healthier Communities*

*Lisa Macon Harrison, MPH  
Granville Vance Public Health and NACCHO  
[lharrison@gvdhd.org](mailto:lharrison@gvdhd.org)*







**Public health works every day to promote and protect health and prevent disease.**

Overall, Local Health Departments are the only community entities concerned with protecting the health of the entire community...**advocating for and promoting health in its broadest form.**

# **The Workforce Community by Community: Our Most Significant Public Health Asset**



# About NACCHO

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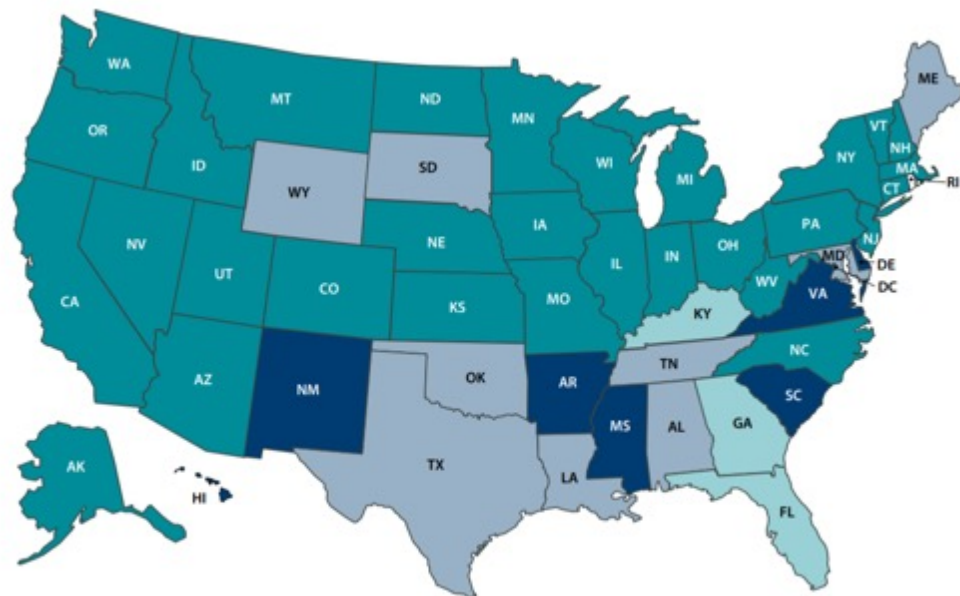
NACCHO is the **only** organization dedicated to **serving every local health department** in the nation.

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NACCHO serves 3000 local health departments and is the leader in providing cutting-edge, **skill-building**, professional **resources and programs**, seeking **health equity**, and supporting **effective** local public health **practice and systems**.

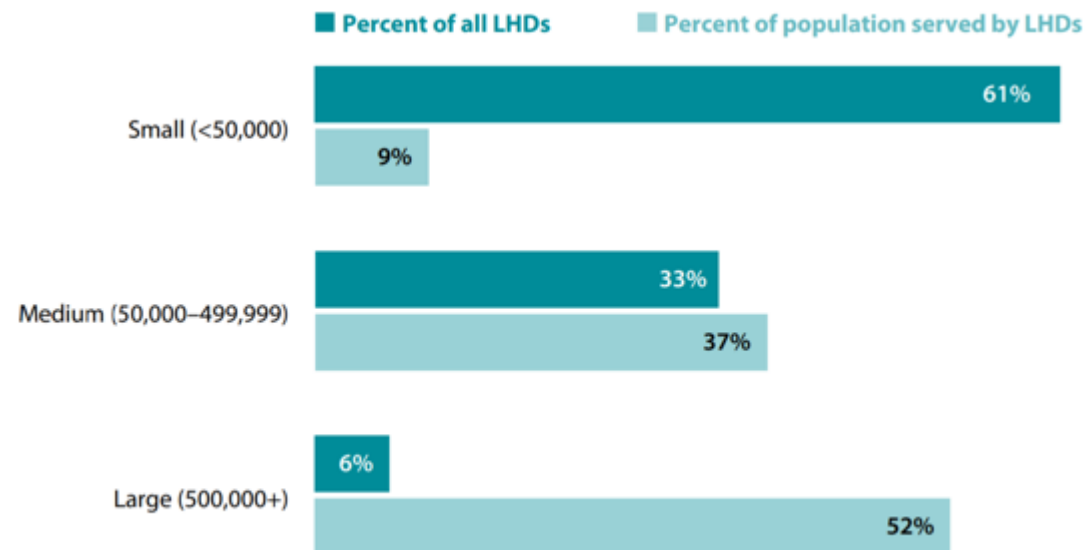


# The Local Public Health Landscape


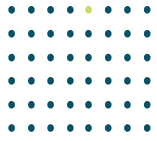


RI was excluded from the study  
N=2,459

- Local (all LHDs in state are units of local government)
- State (all LHDs in state are units of state government)
- Shared (all LHDs in state governed by both state and local authorities)
- Mixed (LHDs in state have more than one governance type)



N=2,459

A group of approximately 15 diverse people of various ages and ethnicities are standing around two large, overlapping teal circles. The circles contain text. The people are dressed in a mix of professional and casual attire. One woman is in a wheelchair. The background is plain white.

What is the work  
that local public  
health **should be  
doing** right now?

What are the  
**structures,  
investments and  
policies** needed to  
get there?

# **Innovation** Influenced by Evidence **Funding** **Workforce**

**Americans should expect basic health protections no matter where they live, but funding varies greatly across local health departments.**

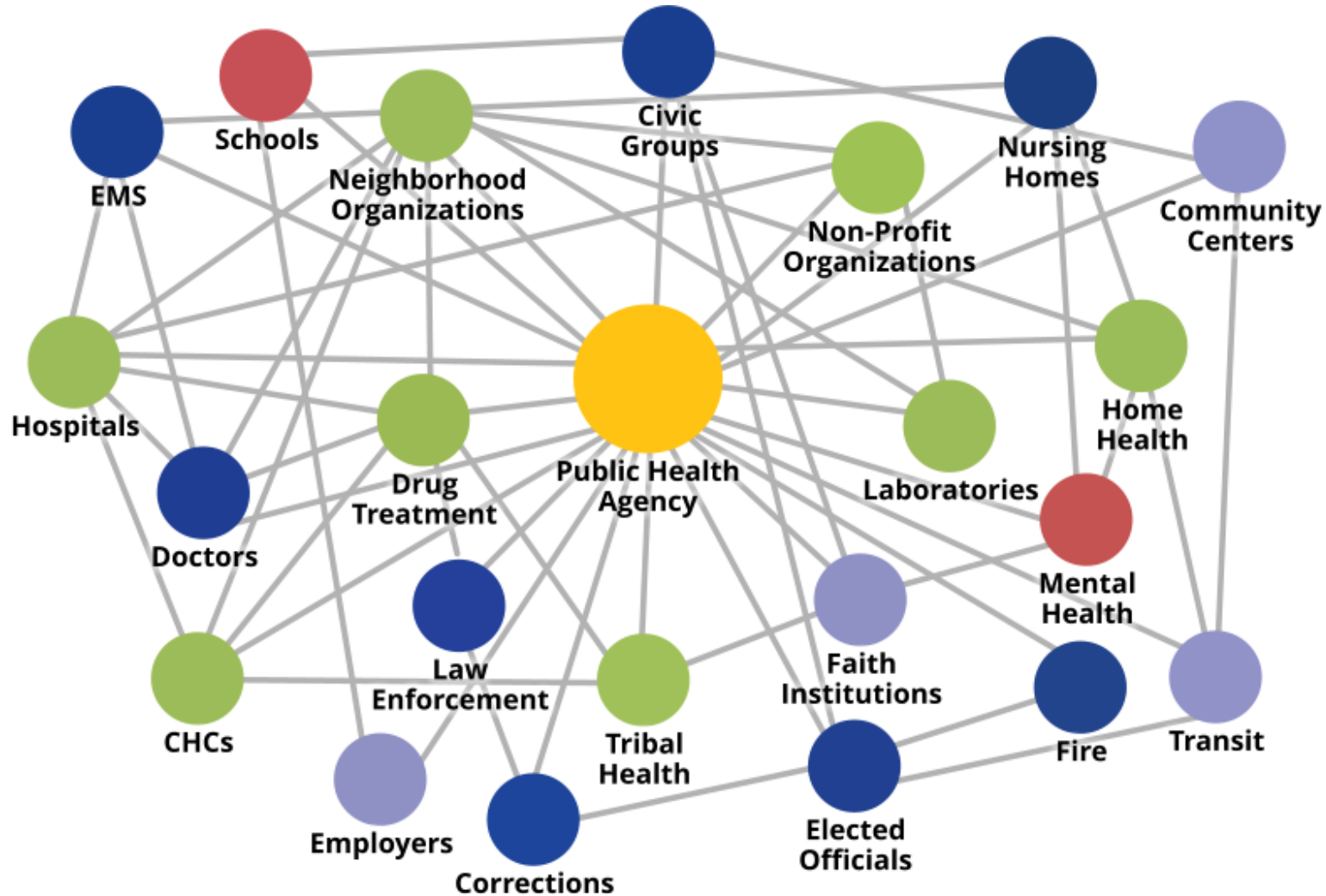
- So what exactly is the public health system made up of across the US and how is it currently funded?

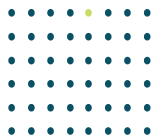


- ★ **10 Essential Services and 3 Core Functions**
- ★ **Chief Health Strategist in the Community**
- ★ **Foundational Capabilities:**

**Protecting the Public, Cultivating Leadership, Building New Models, Demonstrating Accountability, Mobilizing the Community, Forging Partnerships, Communicating with the Public, Using Integrated Data Sets, Assessment, Assurance, and Policy Development, Improved Surveillance, Epidemiology, Integrated Care, and Lab Capacity**

# Community Chief Health Strategists





# Who are we and what do we do?

## The Workforce:

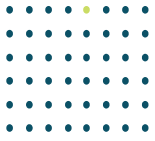
- Nursing and Medicine
- Social Work / Care Managers
- Behavioral Health Specialists
- Management Support/Admin
- Environmental Health
- Nutrition
- Information Technology
- Health Education
- Laboratorians
- Policy Leaders
- Epidemiologist / Data Mgrs
- Chief Health Strategists
- Researchers



## The Work:

- Health Promotion and Wellness
- Partnerships and Collective Impact
- Communicable Disease
- Maternal and Child Health
- WIC: Women, Infants, and Children
- Vital Records
- Laboratory Technology
- Management Support / Billing
- Environmental Health
- Family Planning
- Immunizations
- Care Management
- Grants Management
- Data Management
- Communications
- Health Equity
- Health Policy
- Clinics & Immunizations
- Family Planning
- Infection Control / STD
- Supports & Services
- Legal updates and protection
- Education and advocacy
- Project management & Quality Improvement
- Primary Care
- MAT / Behavioral Health / Integrated Care
- Dental Clinics



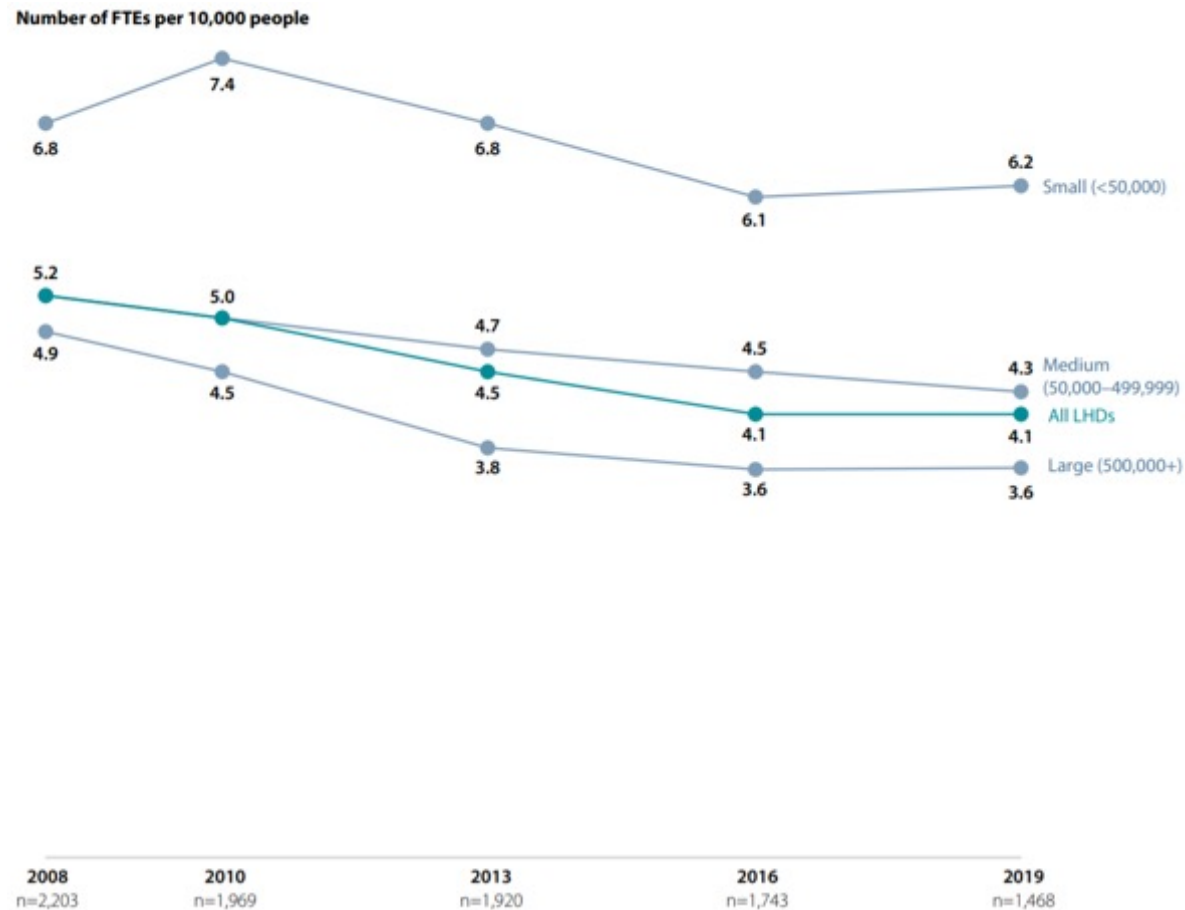


# Public Health Services

Provide:	Provide/Assure/Contract/Certify:
Food, lodging & institutional sanitation	Adult Health / Primary Care / Maternal Health / Child Health
Individual on-site water supply	Care management
Sanitary sewage collection, treatment & disposal	Dental public health
Communicable disease control	HIV / STD
Vital records registration	WIC (Women, Infants & Children)
Health Education & Promotion	Family planning
<i>Community Health Assessment</i>	Public health laboratory
	Preparedness and Response

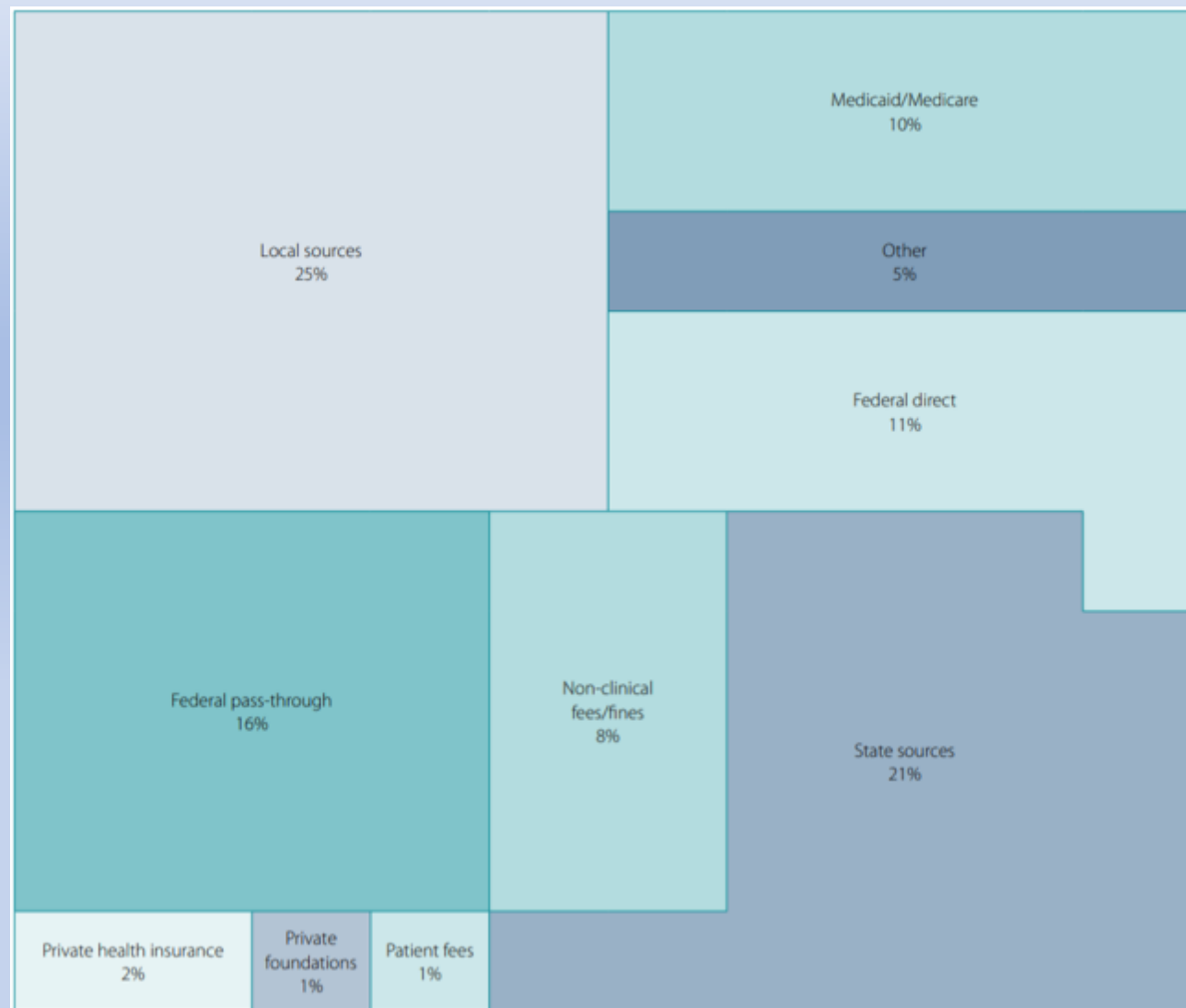
# Change in Full-Time Equivalents (FTEs) per 10,000 people

since 2008 by size of population served

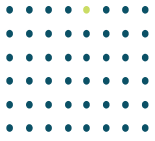




# Revenue sources



n=391-597



# FUNDING



## What to know about public health Funding:

- Funding sources vary tremendously from county to county:  
**Primary categories of revenue are: Local, State, Federal.**
- **Fees and 'Other' sources** (typically grants) fund the remaining balance of a local health department budget and staff.
- Approximately 25% of LHD operating budgets come from state/federal combined on average – lots of room to make up the difference county by county.
- Rural – Urban Continuum see incredible differences.
- Accountability is high to every dollar and reporting requirements are both variable and onerous across many different sources (in my LHD alone we have more than 85 different 'banks' of revenue and related reporting requirements).

**A Resilient Public Health System is more than just the sum of its parts, but to date, in the US, we have funded mainly just parts.**



“... the vast majority of government health spending in the United States is for individual illness care and treatment for disease; a far smaller and inadequate proportion is provided, ineffectively, to support governmental public health’s efforts to improve population health. **The current financing system for health in the United States is profoundly misaligned.**”

—National Academy of Sciences

**Thank you for being thoughtful together about how we can build a stronger public health system and be more prepared for emerging diseases, and public health challenges.**

**There are so many important parts to consider.**



**“Every system is perfectly designed to get the results it gets.” – *Batalden, Berwick, Deming***









We have so much  
to celebrate  
...and...

What has COVID  
exposed about  
our  
infrastructure?

What do we need  
to do our best  
work?





**J. Nadine Gracia, MD, MSCE**  
President and CEO  
Trust for America's Health

[tfah.org](https://tfah.org)



# Beyond Emergency Funding: Sustaining Public Health Funding in the Post-COVID Landscape

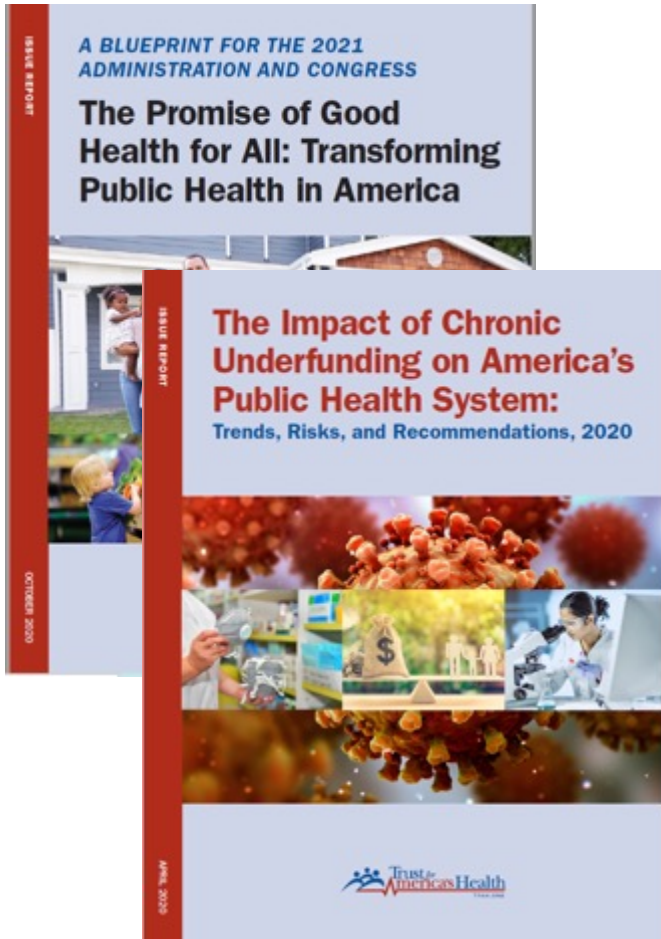
J. Nadine Gracia, MD, MSCE  
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# Trust for America's Health (TFAH)

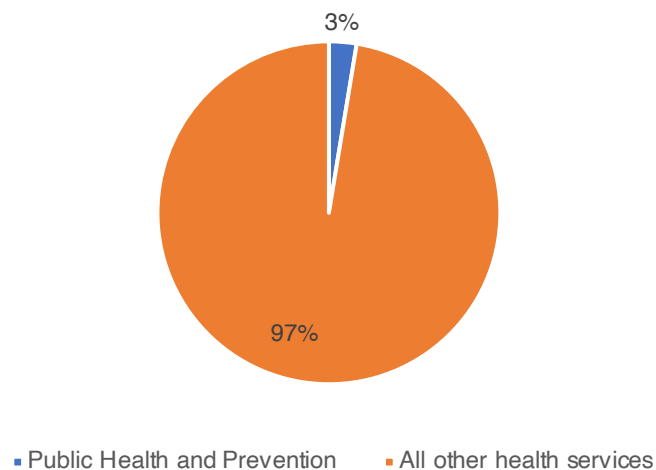
Independent, non-partisan, public health, prevention and equity focus, including:

- Data/research for action
- Health-promoting policies
- Strong public health system
- Informed policymakers



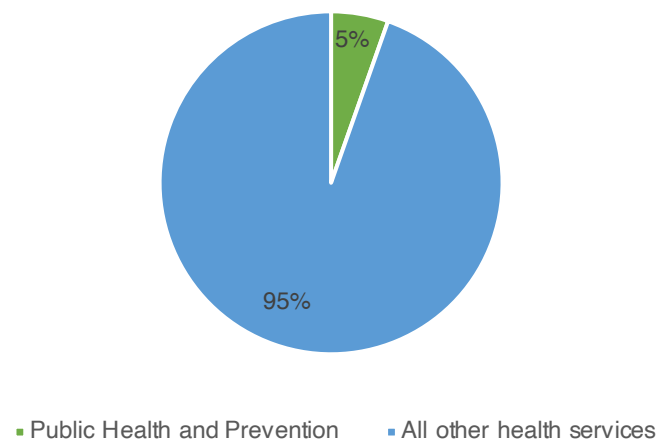
# Only a Fraction of Health Spending Goes to Public Health and Prevention

CY2019 National Health Expenditures



2019 Total: \$3.8 trillion

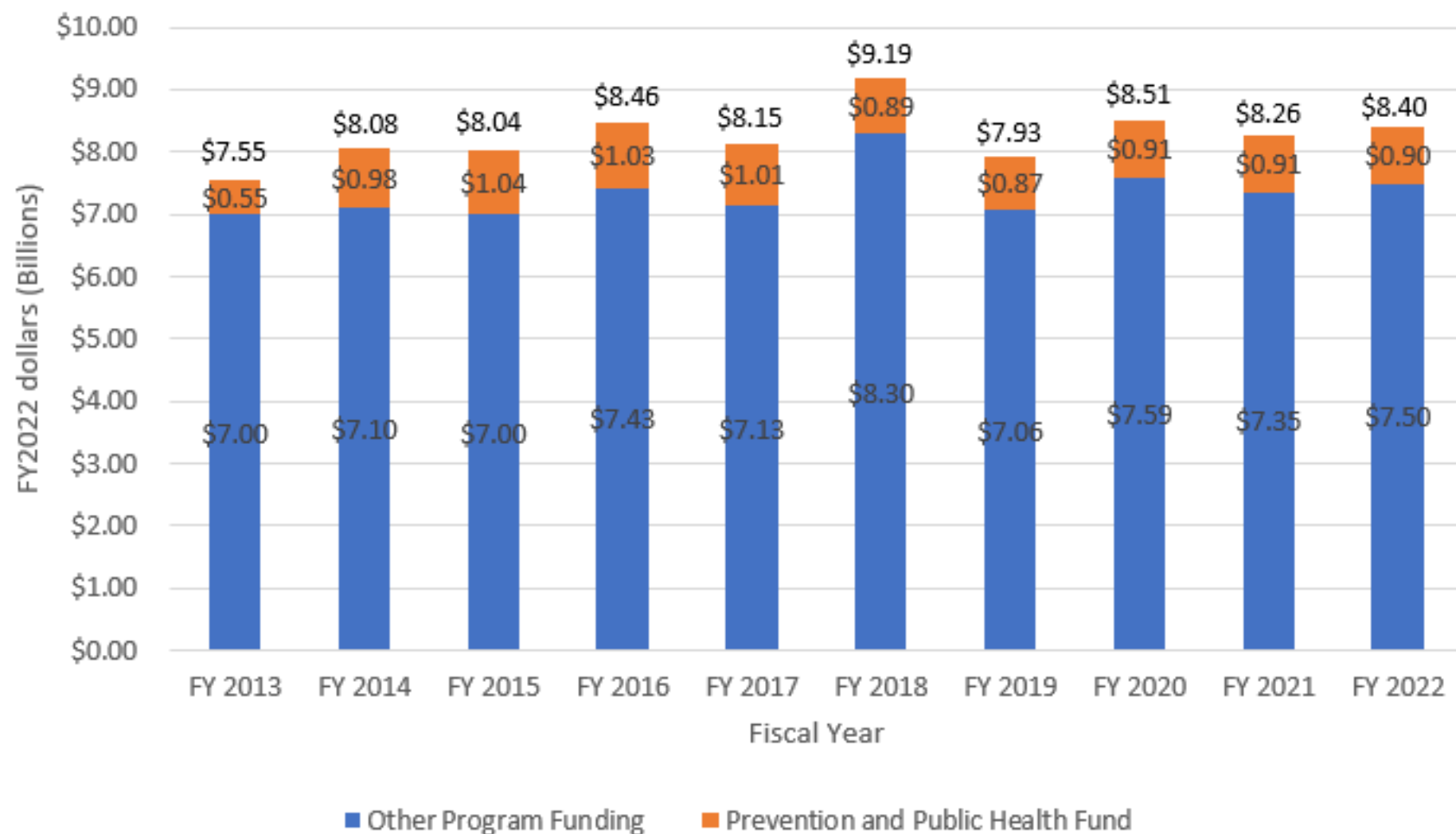
CY2020 National Health Expenditures



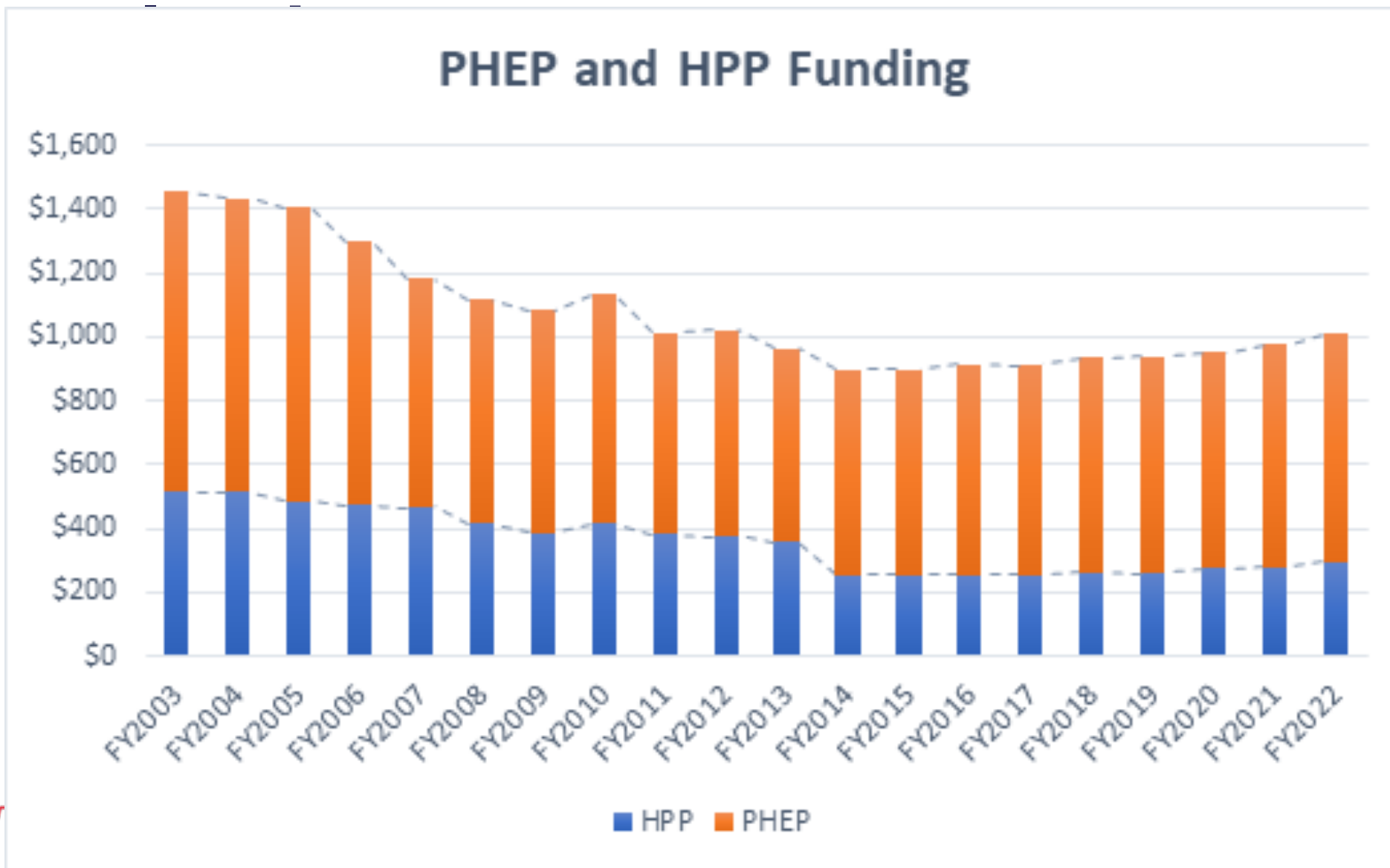
2020 Total: \$4.1 trillion

Source: TFAH analysis of CMS National Health Expenditures

## CDC Program Funding, Adjusted for Inflation



# Preparedness Funding to States Has





# Boom and Bust Cycle of Public Health

## 1 Underfunding

Public health receives little funding because there is no emergent public health threat

## 2 Crisis

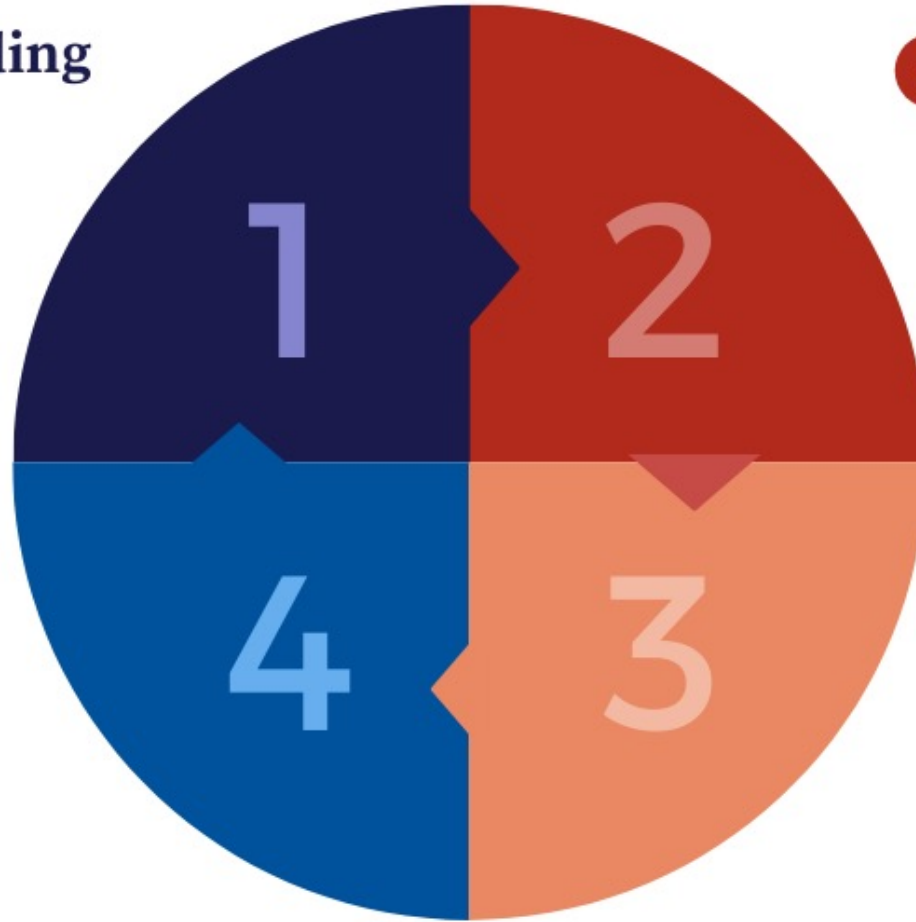
Public health system faces an acute public health threat

## 3 Funding Increase

Policymakers increase public health funding to respond to crisis

## 4 Crisis "Solved"

Acute public health mitigated. Emergency funding disappears



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# Federal Recommendations

- Increase overall CDC funding to \$11 billion in FY2023
- Enable modernization of public health at federal, state, local, territorial, and tribal levels with funding for core public health infrastructure, data, and workforce
- Invest in the nation's health security, including public health emergency preparedness and vaccine infrastructure
- Address health inequities and social determinants of health
- Ensure effective prevention programs can reach all states and territories



# Submit Questions for Our Panelists



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Chief Executive Officer  
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Coalition for Health Funding  
Chief Policy Officer  
Endocrine Society  
  
*Moderator*



# Thank You to Our Moderator and Panelists



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# Thank you!

@HealthyAmerica1 @HealthFunding 

The recording and slides will be available at [tfah.org](http://tfah.org) and [publichealthfunding.org](http://publichealthfunding.org).

