Chairman Romanchuk, ranking member West, and members of the House Health and Human Services Subcommittee, I am Julie Miller, Health Commissioner of the Knox County Health Department and President of the Association of Ohio Health Commissioners (AOHC). Thank you for the opportunity to provide this testimony regarding HB 166. AOHC applauds Governor DeWine for presenting a budget proposal that prioritizes the health of Ohioans, especially our most vulnerable citizens – moms and babies, medically fragile children, those suffering from mental health and addiction, and at-risk youth, to name just a few.

AOHC supports the new investment in newborn home visiting, firmly believing that local public health nurses possess invaluable expertise that has been underutilized due to the lack of funding. The program enhancements must include renewed investment and policy changes in the current Help Me Grow (HMG) Home Visiting program that will help to alleviate the provider shortage and assess families earlier in the pregnancy. Also necessary are statutory changes to authorize reimbursement for accredited local health departments who provide home visiting through a team approach using nurses and community health workers. The model for which we are advocating is in place in Lorain County – HMG home visiting provided by two agencies, supplemented by one-time visits by the local health department. This approach was implemented to target the African American community, whose infant mortality rate was well above the state average. In this county, the average number of African American infant deaths per year has decreased by 43% since 2009-2013. From 2014—2018, the average annual Black Infant Mortality Rate for Lorain County was around 8.6* infant deaths per 1,000 live births, 41% lower than that of the Ohio African American Infant Mortality Rate (14.7). We are working actively with the administration – the Governor’s office, ODH and Medicaid - to discuss ways to implement this model on a broader scale. We ask for your support of the amendment that will allow accredited local health departments to be reimbursed by Medicaid for this work.

We support the recommendations of Recovery Ohio. I will specifically mention two – overdose fatality review and harm reduction. The fatality data is essential in assessing and addressing root cause, and comprehensive harm reduction, that includes needle exchange coupled with pathways to treatment, will help to stem the epidemic of communicable disease related to this crisis.
AOHC supports the proposal to raise the legal age to 21 for individuals purchasing tobacco and nicotine-containing products. We join other interested parties in our efforts to work with ODH to strengthen the proposal in the bill. We ask for your support of those changes offered jointly by ODH and interested parties.

ODH has proposed new regulations for body art and tattooing. We are currently working with our partners, the Ohio Environmental Health Association, ODH, and the industry, to improve the proposal currently in the bill. Specifically, we believe that fees should not be too high, which might result in driving the industry further “underground” because the cost of compliance is prohibitive for the small business owner.

Lastly, AOHC is in support of the creation of the H2Ohio fund. Local health departments throughout Ohio work in our communities to help address non-point source pollution which can lead to water quality problems including harmful algal blooms. A long-term funding plan is important to address issues around water quality and protect our valuable water resources. The creation of this fund will allow water quality initiatives, ranging from agricultural concerns to local sewage treatment systems, to have a long term impact on water quality. We look forward to working with the administration on initiatives to solve this important issue.

Thank you for your valuable time. I would be happy to answer any questions you may have.