



LOCAL PUBLIC HEALTH

The invisible force upholding and protecting the most basic elements of life many people take for granted.



8 Mandated Essential Public Health Services



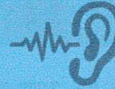
FOOD PROTECTION



PRIVATE GROUNDWATER PUBLIC WATER SUPPLY



ON-SITE SEWAGE DISPOSAL



HEARING SCREENING



VISION SERVICES



STD CONTROL & PREVENTION



IMMUNIZATIONS



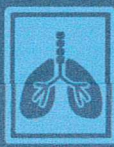
INFECTIOUS DISEASE CONTROL

THESE THINGS DON'T JUST HAPPEN...

This is public health at work, invisible, in the background.



Kids no longer die of polio or diphtheria thanks to vaccines



Death due to lung cancer and heart disease is dramatically reduced



Foodborne illness due to contaminated food and water has greatly declined



Work-related deaths and occupational injuries have significantly decreased



Air quality in Michigan restaurants & bars has greatly improved

BUT CHRONIC UNDERFUNDING THREATENS US

Michigan cannot afford to underinvest in public health infrastructure.



Lead and PFAS in our water supply is depleting funds and exhausting resources



Hepatitis A is spreading across Michigan with the largest outbreak in the U.S.



Measles, a disease once eradicated, is on the rise in Michigan



Vapor intrusion is threatening thousands of Michigan residents



The opioid epidemic is raging across Michigan with thousands of deaths occurring each year

HELP US PROTECT MICHIGAN

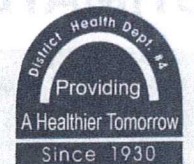
Our families and economy depend on being able to take for granted that we can eat in restaurants without risk, swim in our beautiful lakes without worry, be safe on the job, and have toxin-free homes. Protect your state by funding public health.



A partnership of seven local health departments dedicated to increasing capacity, maximizing assets, and containing costs to improve public health









Central Michigan District Health Department
Promoting Healthy Families, Healthy Communities







What's the RETURN ON INVESTMENT for Local Public Health?

Take a look at how **Essential Public Health Services** across Michigan consistently save money for patients, the healthcare system, and the government

FOR EVERY \$1 INVESTED, WE SAVE:


CHILDHOOD IMMUNIZATIONS 	\$22.00
FLU VACCINATIONS 	\$11.00
STD SCREENING 	\$2.50
INFECTIOUS DISEASE SURVEILLANCE 	\$2.00
HEARING SCREENING 	\$112.00
VISION SCREENING 	\$162.00

Michigan Association for Local Public Health (MALPH) "Return on Investment Analysis: Local Public Health Funding", 2013

FLUORIDATED WATER 	\$40.00
SUBSTANCE ABUSE TREATMENT 	\$7.00
CHILD SAFETY SEAT 	\$42.00
FOOD & NUTRITION EDUCATION 	\$10.00
TOBACCO CESSATION PROGRAMS 	\$1.26
WORKPLACE SAFETY PROGRAMS 	\$6.00

American Public Health Association (APHA) "Public Health and Chronic Disease: Cost Savings and Return on Investment", 2015


ESTIMATED COSTS WITHOUT PUBLIC HEALTH:



ANNUAL MEDICAL COSTS FROM A FOODBORNE ILLNESS OUTBREAK IN MICHIGAN¹

\$5M

Statewide



COST OF CHILDHOOD DISEASES FROM CHEMICAL SUBSTANCES IN THE ENVIRONMENT²

\$77B


Nationwide



COST TO REPLACE FLINT'S LEAD WATER PIPES IF NO ANTICORROSIVE TREATMENT ADDED³

\$1.5B

Citywide



COST OF A WEST NILE OUTBREAK IN LOUISIANA DURING 8-MONTH PERIOD IN 2002-2003⁴

\$20M

Statewide

For the past 34 years, Michigan law has required the state to fund 50% of the cost for all 8 mandated Essential Local Public Health Services.

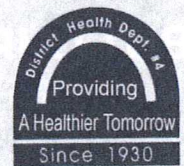
For the past 20 years, the state has not funded local health departments at the statutorily required level, forcing them to scramble for funds through extra fees and unsustainable grants.



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Central Michigan District Health Department
Promoting Healthy Families, Healthy Communities



1. MALPH, "Return on Investment Analysis: Local Public Health Funding", 2013; 2. APHA, "Establishing Environmental Public Health systems for Children at Risk or with Environmental Exposures in Schools, 2017; 3. APHA, "Environmental Playbook: Investing in a Robust Environmental Health System, 2017; 4. Ibid.



NORTHERN MICHIGAN
PUBLIC HEALTH
ALLIANCE

EMERGING PUBLIC HEALTH ISSUES

Protecting and improving the health of people and communities is an ever-evolving endeavor. The public health issues we faced in the past were different from the issues we see today; and today's issues will be different than in the future. Below is a look at some of the emerging public health issues we are facing within the 31-county region of the Northern Michigan Public Health Alliance.

Marijuana

THE ISSUE



Recreational marijuana use is now legal in Michigan

PUBLIC HEALTH CONCERNS

IMPACTS ON YOUTH

38%
of high school students report using marijuana
CDC

1 in 6
Teens can become addicted with repeated use
CDC

The **developing teen brain** can have permanent negative impacts from use
CDC

IMPACTS ON PREGNANCY

1 in 20
women in the United States report using marijuana while pregnant
CDC

Chemicals in marijuana can **pass to baby** in utero or through breast milk and impact development
CDC

An **exposed child** may experience decreased growth, impaired cognitive function, decreased academic ability, or increased depression
CDC

Substance Misuse

THE ISSUE



Addiction and death from substance misuse continues to escalate

PUBLIC HEALTH CONCERNS

DRUGS/OPIOIDS

2,686 deaths
from drug overdoses in Michigan
MDHHS, March 2019

2,053 deaths
from opioids in Michigan
MDHHS, March 2019

Up 13.8%
compared to 2016 rates
MDHHS, March 2019

VAPING

1 in 5
12th grade students in the US vaped nicotine in the last 30 days
U of M, Dec. 2018

28.5%
12th graders in Michigan said they currently use vaping products
MI Youth BRFS, 2015

23%
9-12th graders in Michigan said they currently use vaping products
MI Youth BRFS, 2015

PFAS

THE ISSUE



PFAS, a large group of man-made chemicals, is now present in drinking water

PUBLIC HEALTH CONCERNS

Safe drinking water is critical for health, and PFAS in drinking water is a new health concern that requires increased resources.

46 sites

under investigation
in Michigan
Through Mar 2019, MPART

16 sites

are within NMPHA
31-county region
Through Mar 2019, MPART

62 locations

will be quarterly tested,
including schools,
daycares, and community
water supplies in Michigan
Through Mar 2019, MPART

21 locations

are within NMPHA
31-county region
Through Mar 2019, MPART

Vaccine-Preventable Diseases

THE ISSUE



Vaccination rates
are falling

PUBLIC HEALTH CONCERNS

We continue to see illnesses and outbreaks of vaccine-preventable diseases each year. The World Health Organization lists Vaccine Hesitancy as one of the top 10 global health threats of 2019.

917 cases

Hepatitis A Outbreak
in Michigan
Through Mar 2019, MDHHS

30 cases

Measles Outbreak
in Michigan
Through Apr 1, 2019, MDHHS

879 cases

Flu Virus
in Michigan
2017-18, MDHHS

Social Determinants Of Health

THE ISSUE



Access to healthy
resources in rural
communities is
a struggle

PUBLIC HEALTH CONCERNS

Residents living in the 10-county Northern Michigan Community Health Innovation Region expressed specific needs for healthy resources:

2,110

Need
employment

740

Need
healthy food

591

Need
housing

1,137

Need
insurance

2,164

Need
education

978

Need
transportation

1,720

Need help
with utilities

497

Need
supplies

1,026

Have poor
mental health

3,932

Have poor
physical health

Community Connections HUB data for 2018

WHAT WE NEED...

New threats to our communities' health are emerging all the time. We need more investment in public health capacity and local public health infrastructure to be able to respond to these issues and whatever new threat is around the corner. **Flexible funding is critical both to prevent these issues and to allow a quick and effective response to new threats we can't predict.**

Day at the Capitol: Talking Points



- 1. Public health is charged with protecting the most basic elements of life.**
 - a. Examples: Food, air, water, pregnancy & birth, sanitation, infectious disease control
- 2. We are the invisible force upholding the daily life you take for granted. These things are public health at work, invisible, in the background.**
 - a. Infographic: Success examples
 - i. Polio & diphtheria eliminated from US
 - ii. Drop in lung cancer deaths
 - iii. Drop in food/water-borne illness
 - iv. Safer workplaces, fewer injuries
 - v. Better indoor air quality
- 3. Chronic underfunding of public health in Michigan has serious consequences.**
 - a. Infographic: Consequences of underfunding examples
 - i. Lead & PFAS
 - ii. Hep A
 - iii. Measles coming back
 - iv. Vapor intrusion
 - v. Opioid epidemic
- 4. Michigan cannot afford to underinvest in public health infrastructure. No other investment will get the same returns as public health, in terms of both money and lives saved.**
 - a. State budget savings
 - i. If Michigan invested \$10 per person in strategic community-based disease prevention programs, we would see net savings of over \$545 million within 5 years, including nearly \$23 million in net savings from Michigan's Medicaid expenses.
 - b. Vaccines
 - i. Childhood immunizations: for every \$1 invested, save \$22
 - c. Workplace safety
 - i. Every \$1 invested in an effective workplace safety program may save \$4 to \$6 in avoided illnesses, injuries, and fatalities.
 - d. Chronic disease prevention
 - i. Every \$1 invested in biking and walking opportunities – like the Building Healthy Communities grant - can return benefits up to \$11.80
 - e. Car safety
 - i. Every \$1 invested in a child safety seat has a \$42 return in avoided medical costs.
- 5. We need your help to protect the state. We need you to be on our team, a strong voice for investing in public health.**

Day at the Capitol 2018: Framework/ “Elevator Speech”



Public health is charged with protecting the most basic elements of life. We protect your access to clean air and water. We protect safe birth and we protect dignity in death. We protect you while you are at work or school and we protect you while you are relaxing at restaurants, beaches, or campgrounds. We are the invisible force upholding the daily life you take for granted.

These everyday things are not inevitable; they *don't just happen*. It is not a coincidence that there are fewer deaths from car crashes now than ever before, or that workers can feel safe on the job. It's not by chance that kids no longer die of polio or diphtheria, or that lung cancer rates have plummeted. It is not inevitable that the air inside your home is safe to breathe, not luck that food poisoning in restaurants is rare. These things are public health at work, invisible, in the background.

It also isn't by chance that some cities have safe water, while in others kids get lead poisoning from drinking out of the tap. It's not coincidence that Michigan mothers are more likely to die from pregnancy than mothers in Thailand or Latvia. It's not just misfortune that Hepatitis A has spread more quickly in some communities than others, infecting over 800 Michigan residents so far. It's not just bad luck that syphilis rates are rising for the first time in decades, or that Michigan kids are now in danger of dying from measles – a disease once eradicated from this country. These things are the consequences of chronic underfunding of public health in Michigan. They happen when we devalue public health and take our progress for granted.

Michigan cannot afford to underinvest in public health infrastructure. Our economy depends on people taking for granted that they can eat in our restaurants without risk, that they can swim in our beautiful lakes without worry, and that workers will be safe on the job. Our families depend on assurance that they can find healthy food in their neighborhoods, that pregnancy won't be life-threatening, that kids have safe places to play, and that sitting in their homes they won't be breathing toxic vapors seeping up from the ground. Our state budget depends on the work of public health to prevent the chronic diseases currently driving up the cost of Medicaid. No other investment will get the same returns as public health, in terms of both money and lives saved.

We need your help to protect the state. We need you to be part of the essential work that lets people take the basic elements of their daily lives for granted. We need you to be in on the secret that Public Health is responsible for protecting Michigan families from threats they never knew existed. We need you to be on our team, a strong voice for investing public health.



How County Appropriations work for the residents of Benzie and Leelanau Counties.

Local dollars working in Environmental Health:

Ideally permit fees and State cost sharing should cover costs in the food, well and septic programs. Permits fees are also used to help cover the costs in the land evaluations and point of sale inspections. As an Agency we try very hard to limit the amount of local dollars going in to those programs. Other Environmental Health programs that use local dollars to benefit the community include:

- Type II—Non-Community Water Supplies
- Safe Beach Monitoring
- Indoor Air and Water Contamination Education and Investigation
- Nuisance Complaint Activity
- Vector-Borne Diseases and Rabies

Local dollars working in Personal Health:

Approximately 70% of local dollars used in Personal Health programs are used in areas that have a matched State and/or Federal funding. These include programs like:

- Children's Special Health Care Services
- Medicaid Outreach & Advocacy
- Maternal and Infant Health Programs (MIHP)
- Immunizations
- Family Planning Services
- Healthy Futures
- Parenting Communities
- MomPower
- Community Connections
- Vision and Hearing

Other Personal Health programs supported by local dollars include:

- Communicable Disease and Infection Control; includes TB, STD and HIV testing and education
- WIC
- Health Promotion/Education
- Tobacco Cessation
- Breast and Cervical Cancer Control
- Wise Choices



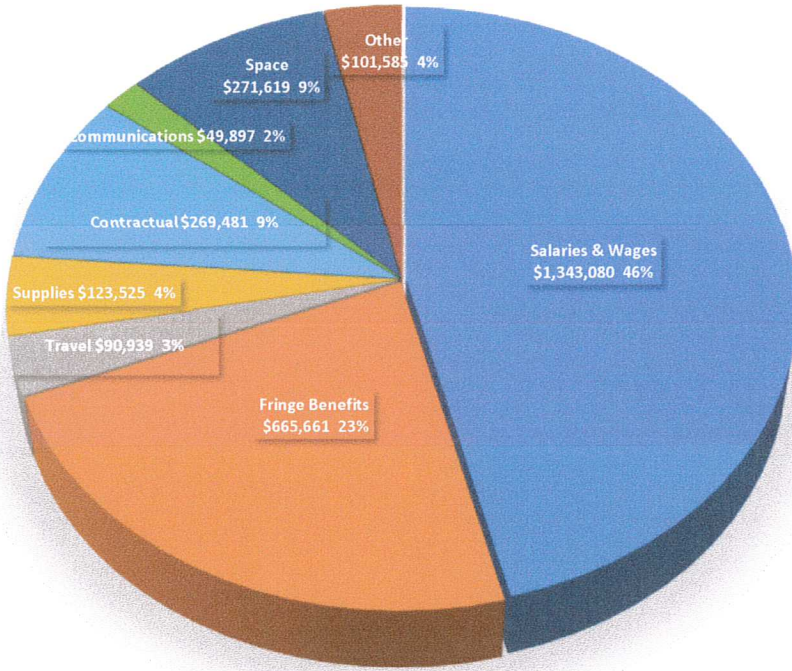
How County Appropriations work for the residents of Benzie and Leelanau Counties.

Ways the Health Department is fiscally responsible with local county appropriations:

- Contract with other community agencies for services; health officer, medical director, nurse practitioner
- Collaborate with other health departments and community agencies to secure grant funding ; FY 2019 has secured approximately \$347,165 and still growing
- Increased private insurance billing with insurance carriers to generate more revenue
- Maximize funds received through local and private sources through access to Medicaid match funding mechanisms.
- Look at employee benefit options and ways we can streamline costs. January 1st, switched to a health savings account plan saving the Agency money with little impact to employees.
- Health Department employees pay anywhere from 15 to 25% of their health insurance premium
- Invested in technology improvements to help make the Agency more efficient
- Regularly monitor performance metrics, staffing allocation and budgets and make changes as needed
- Group purchasing when available for clinic supplies
- Local Appropriations only constitute 19% of 2019 budget:
 - Benzie County Appropriations = 8% of budget
 - Leelanau County Appropriations = 11% of budget
- Approximately 70% of local dollars used in Personal Health programs are used in areas that have a matched State and/or Federal funding. Fiscal Year 2019 budget estimates that figure to be around \$409,029. Revenue that would be lost without local funding.

Benzie-Leelanau District Health Department FY 2019 Budget Breakdown

Expenses \$2,915,787



Revenue \$2,915,787

