



## *Action for Public Health*

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Secretary John Polanowicz  
Executive Office of Health and Human Services  
One Ashburton Place, 11<sup>th</sup> Floor  
Boston, MA 02108

Dear Secretary Polanowicz -

Thank you for the opportunity to provide comments on the development of your FY14 budget recommendations for the Department of Public Health (DPH).

DPH has suffered from a trend of disinvestment over the last five years that has eroded essential safeguards that we all rely on each and every day. Between FY09 and FY13, more than \$70 million was slashed from the DPH budget for community-based programs. That amounts to more than 17% of state funding in just four years, and it resulted in the loss of 117 FTEs from the Department's community-based programs. This is in addition to more than 100 DPH hospital staff that have been lost due to state funding cuts and 110 federally-funded staff lost due to federal budget cuts during this same time. While funding for all state departments suffered during the difficult economic times we have faced, DPH cuts have consistently been disproportionately large.

The public health infrastructure has been especially hard hit. This infrastructure is comprised of the systems, structures, and people that provide the basic protections to protect all of us from harm – things like food inspections, health care facility licensing, emergency preparedness, and infectious disease lab work and investigations. These systems are largely invisible to the public, but we all benefit from them each and every day.

We are happy to say that the Governor's FY14 budget proposal and the final FY14 budget passed by the legislature gave some long overdue attention to funding for some areas of public health infrastructure. This included additional funding in **Environmental Public Health Services** (4510-0600), **Health Care Safety and Quality** (4510-0710), and the **Board of Registration in Pharmacy** (4510-0722). For this we are grateful to the Governor and to the Legislature. But more importantly, the public is safer as a result.

However, the progress in FY14 was uneven. The overall budget for non-hospital programs was slightly below levels needed just to maintain the current level of services, leaving too many areas of the Department struggling to address basic needs. Some areas received additional cuts in the FY14 budget which further weakened basic public health protections.

As you make recommendations for the FY15 budget, I ask that you maintain the commitment to the public health infrastructure that was made with the recent investments. That funding is just beginning to make an impact, as systems and staffing are put in place. It is critical that that

funding be maintained in order to provide the intended impact on essential programs, such as the Food Protection Program.

Additionally, I ask that you give additional attention to two areas of the public health infrastructure:

1. **DPH Critical Operations and Essential Services (4510-0100).** This line item supports vital DPH services, including emergency preparedness, environmental health assessments, implementation and enforcement of regulations, reducing disparities in health care, and monitoring and inspections of nursing homes, food safety, and water quality. This account was cut by more than \$4 million, or about 8%, between FY09 and FY13. Compared to funding needed to maintain current services (and accounting for new earmarked funding added in FY14), this account was cut by roughly an additional \$300,000 in the FY14 budget.
2. **State Laboratory (4516-1000).** The Hinton State Laboratory is actually comprised of 17 separate laboratories. Collectively, the State Lab is responsible for:
  - testing of samples for influenza, tuberculosis, salmonella, lead poisoning, bioterror agents, food and insect-borne diseases, and other hazards;
  - routine surveillance and quality assurance of disease reporting by physicians, hospitals and laboratories;
  - training in disease surveillance, reporting criteria, data quality, investigation, and control for local health departments;
  - investigation of and intervention in response to disease outbreaks; and
  - helping local health departments respond to communicable disease threats

As you know, the Lab is the first state laboratory in the nation to identify a new flu strain for the Centers for Disease Control and Prevention (CDC). In recognition of the finding, the strain was named “influenza B/Massachusetts/2/2012-like virus” and this strain is included in vaccines being produced and distributed throughout the northern hemisphere this winter.

However, despite these responsibilities and the daily impact of its work, funding for the State Lab was cut by about \$3.5 million, or about 23%, between FY09 and FY13. An additional \$100,000 was cut in the FY14 budget, compared to levels needed to maintain existing services.

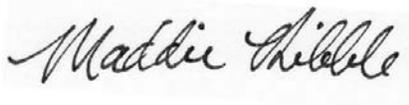
Lastly, we ask for your support to address the ongoing cuts to the state’s **Tobacco Control Program (4590-0300)** that address prevention and cessation of tobacco use. Once the envy of the nation, the program has been decimated over the last ten years. Massachusetts spends over \$4.5 billion a year on healthcare costs from tobacco-related diseases, yet we invest just a tiny fraction of state revenues from tobacco taxes and the Tobacco Master Settlement Agreement in tobacco use prevention efforts. With an increase in funding, the state can support additional youth prevention programming, local enforcement efforts, local boards of health, and cessation

services. These services will increase the health of Massachusetts residents and can save millions in preventable health care costs due to tobacco-related illnesses.

Thank you for your attention to these important matters, and thank you for your leadership on behalf of public health in Massachusetts.

MPHA stands ready to work with you, the Governor, and the Department of Public Health to bolster our public health system and improve the health of the Commonwealth.

Sincerely,

A handwritten signature in black ink that reads "Maddie Ribble". The signature is written in a cursive, flowing style.

Maddie Ribble  
Director of Policy and Communications  
Massachusetts Public Health Association