



Indiana
Department
of
Health

**GOVERNOR'S
PUBLIC HEALTH
COMMISSION**

KRISTINA M. BOX, MD, FACOG
STATE HEALTH COMMISSIONER

OUR MISSION:

To promote, protect, and improve the health and safety of all Hoosiers.

OUR VISION:

Every Hoosier reaches optimal health regardless of where they live, learn, work, or play.





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The Case for Public Health

Public Health vs. Health Care

- Health care or clinical care refers to treating injuries or disease with the goal of restoring people to wellness.
- Public health has an upstream focus to prevent illness and injury and premature deaths and treat communicable diseases and prevent their spread.

Ten Great Achievements in Public Health



**Control of
Infectious Diseases**



**Family
Planning**



**Healthier Mothers
and Babies**



**Motor Vehicle
Safety**



**Tobacco as a
Health Hazard**



**Declines in deaths from
heart disease and stroke**



**Fluoridation of
Drinking Water**



Immunizations



**Safer and
Healthier Foods**



**Workplace
Safety**

Public Health and Health Outcomes

To drive down the costs of health care, investments in public health must be made – this is where the greatest effect of interventions lies.

A holistic restructuring of public health will ensure resources are consistent and efficient.

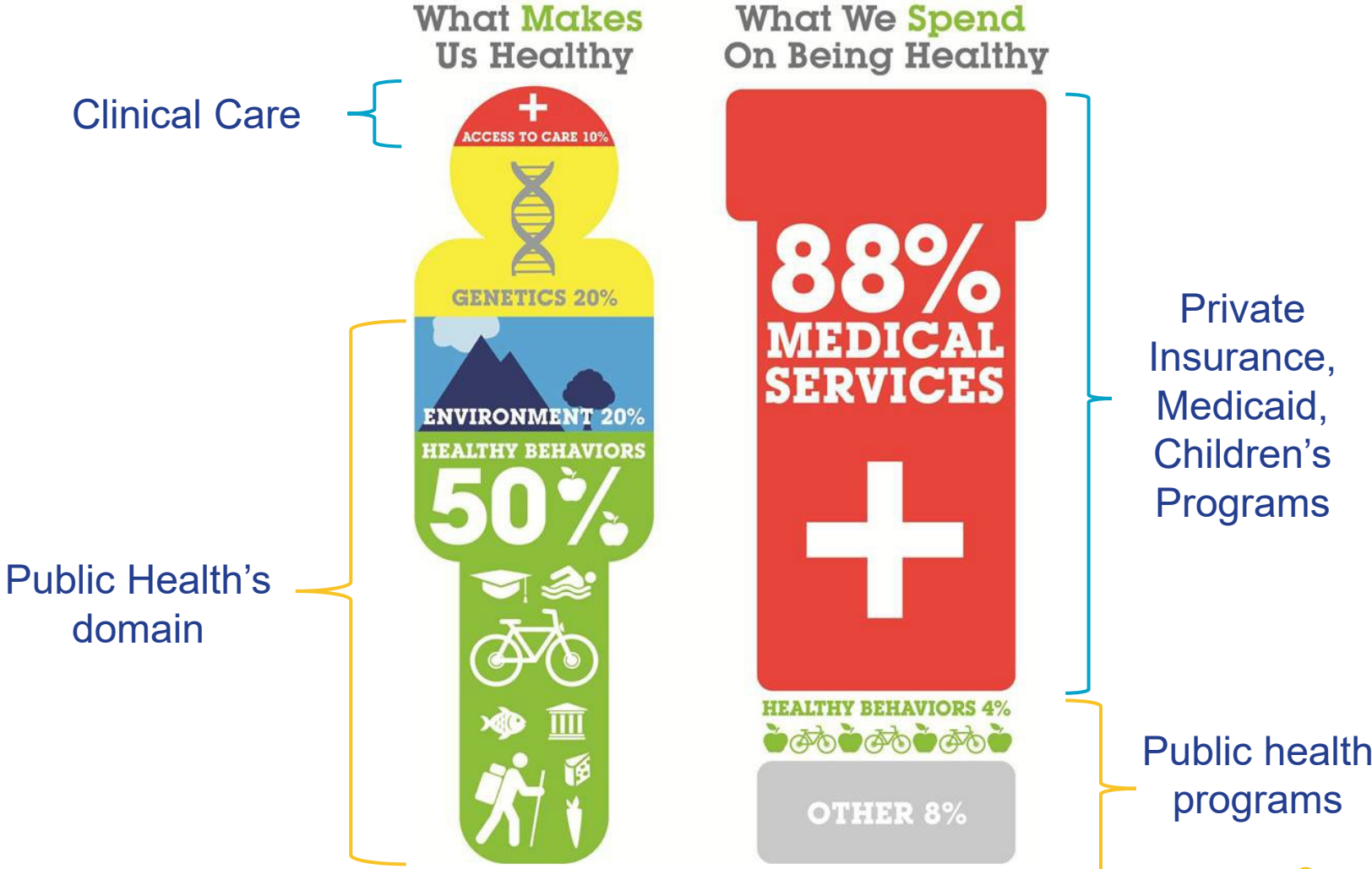


Figure from Bipartisan Policy Center. (2012). What Makes Us Healthy vs. What We Spend on Being Healthy. Retrieved from <https://bipartisanpolicy.org/report/what-makes-us-healthy-vs-what-we-spend-on-being-healthy/>



Cost of Poor Health in Indiana

- Obesity: accounts for more than \$3.5 billion in medical costs in Indiana yearly.
- Chronic disease
 - **\$53.3 Billion** – indirect cost **including lost productivity** of major chronic diseases
 - **\$22.4 Billion** – direct cost of major chronic diseases
 - **\$75.5 Billion** - total direct and indirect cost of major chronic disease
- Smoking
 - Nearly \$3 billion in annual health care costs, including \$590 million in Medicaid costs
 - Indiana taxpayers pay over \$900 per household in smoking-caused expenditures
 - Smoking during pregnancy resulted in an estimated \$3.37 million in healthcare costs in 2019
- Cervical cancer: More than \$54 million in estimated direct healthcare costs

U.S. News and World Report 2021 Best States Ranking, Indiana ranks 32nd

Achievements

- Affordability #6
- Opportunity #7
- Pre-K through 12th grade #9
- Growth of the economy #19
- Public safety #25

Opportunities

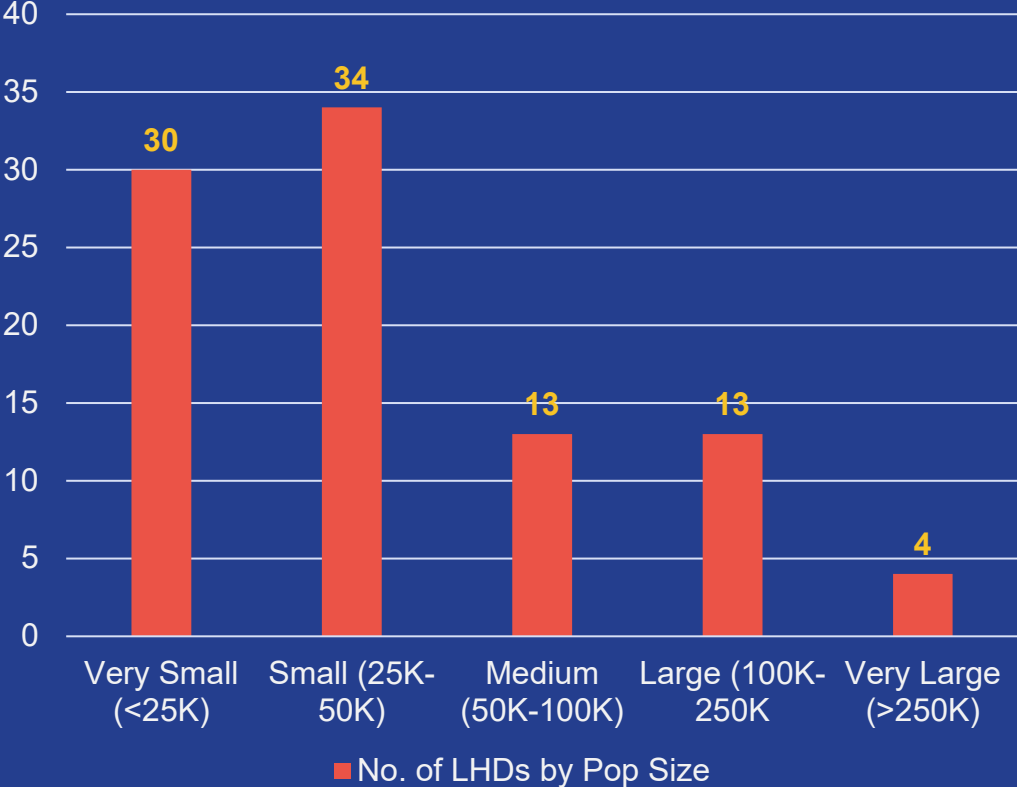
- Health care access #23
- Health care quality #27
- Air quality #38
- **Public health #40**
- Pollution #48



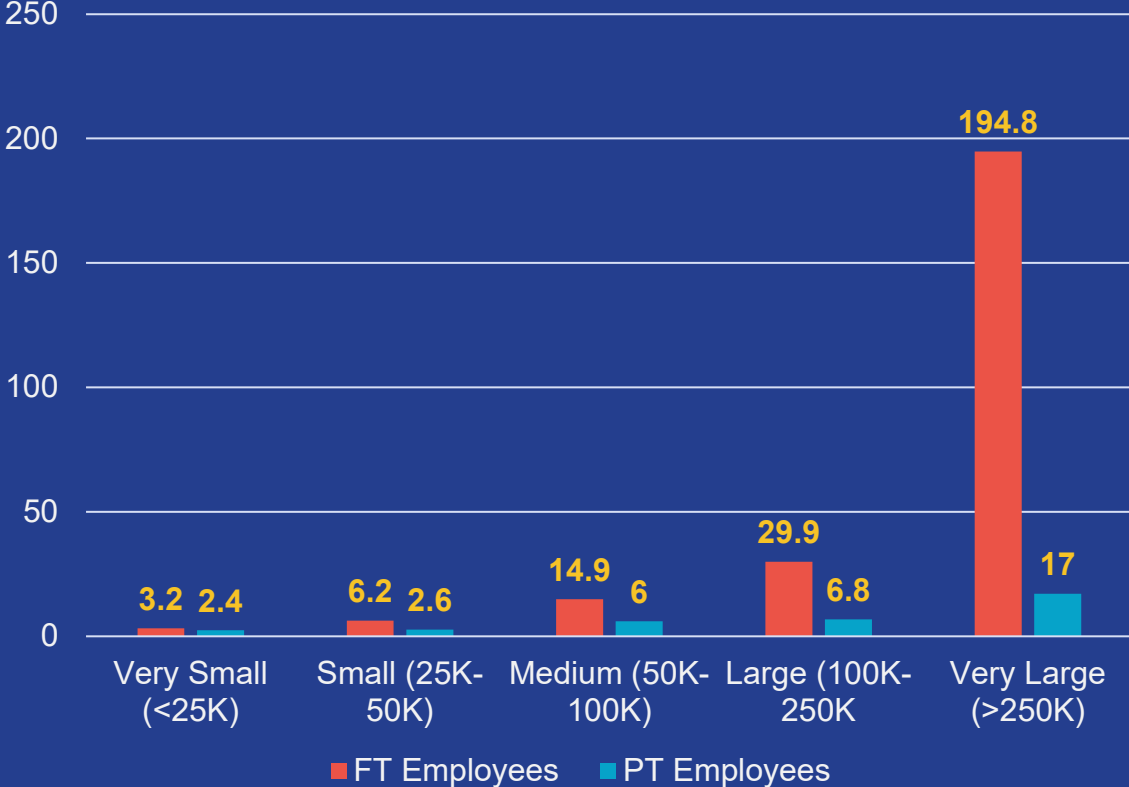
Indiana Public Health System Review

LHD Disparities

No. of LHDs by Population Size



Avg. No. of Employees by LHD Size



Source: Halverson, P.K., Yeager, V.A., Mayes, G.P., Tilson, H, et al. (2020). Indiana Public Health System Review. Retrieved from <https://fsph.iupui.edu/research-centers/public-health-system-review.html>. Data found on page 18.

Local Functions

Every local health department, regardless of size, must perform dozens of statutory and regulatory functions. Some key activities include:

- Immunizations
- Vital Records
- Case management (TB, lead, STIs, etc.)
- Public Health Emergency Preparedness
- Communicable disease reporting, investigation, and monitoring outbreaks
- Septic permitting, pool monitoring, and other respond to environmental concerns
- Inspect and license restaurants, lodging, festivals/gatherings, and other facilities
- Administration (Board, local health officer, and public health administrator)

Governor's Public Health Commission

- Executive Order 21-21 established a 15-member commission to study public health, hear testimony, and make recommendations. Dr. Judy Monroe and Sen. Luke Kenley are Co-Chairs, and Congresswoman Susan Brooks serves as Citizen Advisor.
- Our mandate is to generate a report by late next summer that:
 1. Analyzes Indiana's current public health system, including strengths and weaknesses;
 2. Makes recommendations to improve the delivery of public health services, address funding challenges, promote health equity, and ensure the sustainability of our local health departments;
 3. Analyzes the performance of state and LHDs during the 2019 Coronavirus Pandemic and make recommendations to ensure Indiana is well positioned for future emergencies; and
 4. Proposes draft bill language for future legislation to address these recommendations for 2023 session.

Workstreams

- Emergency preparedness
- Governance, structure, and services
- Funding and financing
- Data and information integration
- Healthcare and public health workforce
- Childhood and adolescent health integration

Project Timeline / Communication Plan

- Monthly meetings open to public Sep. 2021 – Jul. 2022 in Indianapolis
- Final report by Jul. 2022 followed by coalition building for 2023 legislative session
- Pre-meeting media advisories and post meeting press release
- Public comment can be provided online at www.in.gov/gphc
- Listening sessions scheduled in 2022 across the state
- Stakeholder meetings
- Social media