Mississippi Public Health Association

STATE LEGISLATIVE AGENDA 2019

The Mississippi Public Health Association (MPHA) legislative and policy committee developed and recommended seven state legislative agenda items, subsequently reviewed and approved by the Board of Directors, for the 2019 legislative session. Any additional public health issues of interest to MPHA that are introduced during the session will be addressed by the Board.

MPHA’s Priorities include the following:

1. Increase Mississippi State Department of Health (MSDH) funding by at least 9.98%.
2. Fund essential health services by increasing taxes on state-sold tobacco products.
3. Provide stable funding to maintain Mississippi’s trauma care system.
4. Protect immunization requirements for the children of Mississippi.
5. Prohibit the use of tanning facilities by minors (children under 18).
6. Support approaches to address opioid misuse, abuse, and diversion.
7. Protect the State Public Employee Retirement System for current and future employees.
Increase MSDH funding by at least 9.98%.

The Mississippi State Department of Health (MSDH) requests a $3,008,854 increase in its General Fund appropriation, 9.98% more than FY18-19, and MPHA supports this increase to ensure MSDH is adequately funded to provide public health services.

Background:
MSDH provides the foundation for the public health system in Mississippi, but the state's general funding for public health is one of the lowest in the nation. Funds may support, among other programs, the following initiatives:

- $1.4 million STD/HIV funds for four disease intervention specialists, two nurse practitioners, two nurses, suitable medications, and laboratory testing, as well as expansion of the existing pilot project in the Jackson Metro area to other areas, such as the Coast and the Delta
- $1.2 million Hepatitis A funds for vaccine purchase and nine nurses to be staffed statewide
- $195,500 environmental health funds for staff to conduct quality improvement projects, including training and assurance for each program
- $150,000 Public Employees' Retirement System of Mississippi (PERS) employer funds for a rate increase to cover the increased employer contribution rates
- $62,754 Milk and Bottled Water Program funds for state inspections and one additional full time employee

Additional funds:
- $1.5 million matching funds for the Local Government Rural Water Loan Program (Generally included in bond bill funding)

Why it matters:
When MSDH is not fully funded, it has less capacity to deliver quality services and protect the public, including providing the basic services that ensure access to clean water, safe food and restaurants, and controls for disease outbreak. Failure to fund MSDH also limits its ability to maintain the physical and human resources required to offer these important services. Reducing MSDH’s funding threatens basic public health protections that many Mississipians take for granted. Failure to fund MSDH’s essential services reduces capacity for all statewide health offices and threatens Mississippi’s public health infrastructure.

Why MPHA supports this initiative:
Adequate state funding for Mississippi’s lead public health agency enables it to promote and protect the health of all Mississipians. MPHA remains concerned that ongoing budget cuts and other lost revenue threaten the vital public health infrastructure in Mississippi.

Based on MSDH’s current financial situation, increasing its funding is necessary to its continuing to provide adequate levels of public health services. MPHA also supports polices and funding that ensure adequate compensation and workforce training, as well as staffing the necessary public service positions and educators of a robust public health workforce that keeps all state citizens healthy and safe. To prevent ongoing cuts to vital public health services and programs, MPHA strongly supports consideration of other revenue sources to bolster the state’s financial support.
Fund essential health services by increasing taxes on state-sold tobacco products.

MPHA, with more than 20 other Mississippi health organizations, supports a $1.50 tax increase on tobacco to generate approximately $200 million and reduce Medicaid expenditures.

Background:
Tobacco use is the single most preventable cause of disease, disability, and death in the United States. In Mississippi, smoking costs an estimated $1.23 billion in direct health care costs, including $396 million in tobacco-related disease costs covered by Medicaid.

Why it matters:
Not only can the proposed tax increase prevent as many as 14,000 smoking-related deaths and stop as many as 22,800 children from becoming adult smokers in Mississippi, but also the estimated $200 million generated will support essential public health services statewide. MPHA also supports raising state tax rates for other tobacco products to parallel the increase in the cigarette tax rate.

Why MPHA supports this initiative:
Increasing taxes on state-sold tobacco products is a reasonable and cost-effective public health policy that will save lives and money and provide much needed resources for our public health system.

NOTE: Electronic nicotine delivery devices (e-cigarettes) are not currently considered a tobacco product and would not be affected by the increase in the tobacco tax. A recent advisory by the U.S. Surgeon General notes that e-cigarette use by teens has skyrocketed in the past year. Immediate efforts to protect children from the use of e-cigarettes, a lifetime of nicotine addiction, and associated health risks should be addressed through evidence-based strategies.

MPHA joins the American Public Health Association and other public health organizations in monitoring and supporting efforts to address the use of electronic nicotine delivery devices and the associated health risks for all consumers.
Provide stable funding to maintain Mississippi’s trauma care system.

The Mississippi Trauma Advisory Committee recommends the budget authority for trauma care funding be increased by $8 million for a total of $28,000,000.

Background:
Mississippi’s trauma care system has decreased injury death rates across the state and is a model for other states. One important element in this success is the trauma care system’s stable funding structure, established by state statute. However, recent statutory changes threaten to weaken the structure of the trauma care system.

Why it matters:
From 2013 to 2017, Mississippi’s annual total trauma care expenditures were between $22 million and $24 million. In 2017, the trauma care fund was decreased from $40 million to $20 million. Thus, in FY17-18, when trauma care funding decreased, actual funding to trauma centers also decreased by $1.9 million. Based on MSDH’s projections and those of MSDH’s vendor for trauma care trust fund distribution, Horne CPA, the current authorization of $20 million could annually cost the trauma system an additional $2-$4 million, affecting trauma centers directly.

Why MPHA supports this initiative:
Mississippi’s trauma care system, integrated with the local public health system, provides an organized, coordinated effort in defined geographic areas to deliver the full range of care to all injured patients. The key to sustaining the trauma care system is maintaining a stable source of funding designated to MSDH that does not impact the agency’s general operating budget. MPHA also supports enhanced Medicaid reimbursement for trauma in Mississippi.
Protect immunization requirements for the children of Mississippi.

MPHA opposes any policy changes that allow philosophical exemptions for childhood immunizations.

Background:
Mississippi ranks top nationwide for the rate of children immunized and its low rates of vaccine-preventable disease outbreaks. Immunizations against many childhood diseases are currently required by law for children to enter Mississippi schools and childcare centers, though state physicians may grant limited exemptions for medical reasons.

The state’s longstanding immunization requirement for school entry was upheld by the state Supreme Court in 1979. In 2015, the Mississippi Senate passed a resolution to recognize public and private healthcare providers statewide for achieving the highest kindergarten vaccination rates in the United States; see http://billstatus.ls.state.ms.us/documents/2015/pdf/SR/SR0001PS.pdf.

Sixty-seven different studies on vaccine safety recently examined the adverse events associated with childhood immunizations. These events are extremely rare, and the absolute risk is low.

A relationship is established between the ease of obtaining an immunization exemption and the increase of a community’s disease risk. Communities with low immunization rates have experienced a resurgence of vaccine-preventable diseases.

Why it matters:
Research demonstrates the benefits of immunizations far outweigh any risk. Meanwhile, incomplete immunization coverage increases the risk of disease for everyone, including those who have been immunized and those who cannot be immunized for medical reasons.

Why MPHA supports this initiative:
Laws protecting childhood immunizations help families stay active, healthy, and productive.
Prohibit the use of tanning facilities by minors (children under 18).

MPHA supports legislation that prohibits the use of commercial tanning facilities by children under 18 years of age.

Background:
Thirteen states and one territory have already enacted laws to ban the use of tanning facilities by minors. Mississippi currently requires parental consent for minors to use tanning facilities but has not yet enacted legislation to prohibit their use of commercial tanning facilities altogether.

Studies consistently show that indoor tanning increases a person’s risk of getting skin cancers, including melanoma. Preventing minors’ exposure to indoor tanning will reduce their risk of developing life-threatening skin cancers in their most productive adult years.

Why it matters:
Cancer is a leading cause of death for Mississippians. Research shows the use of tanning facilities before the age of 35 significantly increases the risk of developing deadly skin cancers, including melanomas. Indoor tanning also increases the risk of potentially blinding eye diseases if proper eye protection is not used.

Why MPHA supports this initiative:
MPHA and the MSDH Board of Health support prohibiting the use of tanning facilities by minors. Already, members of the Mississippi Senate and other legislators support this public health initiative and have expressed interest in co-sponsoring a bill.
Support approaches to address opioid misuse, abuse, and diversion.

Policies addressing opioid misuse, abuse, and diversion will safeguard Mississippians.

Background:
Mississippi is a leading prescriber of prescription opioids. Since 2011, the number of opioids prescribed statewide for addiction-treatment medications rose significantly, which suggests an increased number of opioid substance-use disorders.

During 2016, opioid analgesics were the most prescribed opioid category in Mississippi and accounted for 88.3% of all opioid prescriptions. Addiction-treatment medications accounted for 5.8%, and cough suppressants containing hydrocodone or codeine accounted for 5.9% of all opioid prescriptions. This translates to, on average for every 100 Mississippians, 108.4 opioid analgesics prescribed, 7.0 addiction-treatment medications prescribed, and 7.2 opioid-containing cough medications prescribed.

Why it matters:
Opioid over-prescription leads to unnecessary deaths and hospitalizations, as well as increased health expenditures, many of which are not reimbursed. Maternal substance abuse may be undetected or undocumented during pregnancy, but newborn hospitalizations related to Neonatal Abstinence Syndrome are associated with serious comorbid conditions, high in-hospital charges, and racial and economic disparities.

Why MPHA supports this initiative:
Laws supporting policies and initiatives that address opioid misuse, abuse, and diversion will safeguard Mississippians from unintentional overdose, dependency, and increased heroin use. Identification and treatment of maternal substance abuse will improve neonatal outcomes in Mississippi.
Protect PERS for current and future employees.

Protect PERS retirement benefits and offer competitive salaries to current and future state employees.

Background:
Employees staffing some of our largest and most impactful state agencies and institutions are the very heart of Mississippi’s Public Health System.

After a decade of stagnant state employee salaries, coupled with increases in the levels of mandatory employee contributions to support state employee benefits, maintaining the high caliber workforce necessary to improve public health in our state is challenging. The PERS Board of Trustees voted to increase the employer contribution rate from 15.75 percent to 17.40 percent, effective July 1, 2019.

Why it matters:
The state will not be able to maintain a competent workforce without competitive compensation and benefits packages. Protecting the health and welfare of Mississippians is dependent on attracting and retaining educated, trained, and skilled talent. A strong PERS has been and must continue to be an integral part of the state’s compensation package.

Why MPHA supports this initiative:
The retirement benefits promised to state employees through PERS have been a powerful and effective retention tool and must be protected. State employees have served our citizens at salaries often well below their counterparts in the private sector in Mississippi or their public-sector peers in contiguous states.

If changes must be made for future state employees, it should protect the retirement benefits promised to existing state employees and offer competitive salaries and retirement benefits for new employees.