

MINUTES OF THE MEETING OF THE
INDIANA DEPARTMENT OF HEALTH
EXECUTIVE BOARD
July 9, 2025

The in-person and virtual (Microsoft Teams) meeting of the Executive Board of the Indiana Department of Health (IDOH) was called to order at 10:35 am in the Robert O. Yoho Executive Board Room of the IDOH building by Dr. Stephen Tharp, Chairperson. The following Board members were present for all or part of the meeting:

Amelia Clark, DrPH, MA
Brenda Goff, HFA
Robin Marks, DVM, JD
Joanne Martin, DrPH, RN, FAAN
Rex McKinney, FACHE (virtual)
Holly Robinson, MD (virtual)
Suellyn Sorensen, PharmD, BCPS (virtual)
Armando Soto Rojas, DDS (virtual)
Stephen Tharp, MD (Chair)
Lindsay Weaver, MD, FACEP (Secretary)

Board members not in attendance:

Dan Cutshaw, PE
Matthew Sprunger, MD
Troy Weirick, MD

The following staff members were present for all or part of the meeting (in-person or via teams):

Jon Ferguson, Chief Operating Officer
Amy Kent, Chief of Staff
Dr. Guy Crowder, Chief Medical Officer
Eldon Whetstone, Assistant Commissioner, Health and Human Services
Eden Bezy, Assistant Commissioner, Women, Children and Families
Miranda Spitznagle, Director, Tobacco Prevention and Cessation
Katelin Rupp, Tobacco Prevention and Cessation
Nelly Chawla, Director, Oral Health
Katie Etter, Lead and Healthy Homes
Rose Douglass, Maternal and Child Health
Jordan Young, Interim Director, Food Protection Program
Michelle Shippy, Executive Director, Healthy Hoosiers Foundation
Kelly MacKinnon, JD, Office of Legal Affairs
Kian Hoss, Office of Legal Affairs

Call to Order

Dr. Stephen Tharp, Chair, stated that a quorum was present. He then called the meeting to order at 10:35 am. He asked if Board members had any known conflicts of interest to declare. Hearing none he proceeded with the meeting.

Minutes

Dr. Tharp asked for discussion and/or corrections to the minutes of the May 14, 2025, Executive Board meeting. Hearing none, he entertained a motion for approval. On a motion made by Brenda Goff, seconded by Joanne Martin and passed by majority roll call vote of in-person and virtual attendees, the Board approved the minutes as presented.

OFFICIAL BUSINESS OF THE INDIANA DEPARTMENT OF HEALTH

Secretary's Report

Dr. Weaver reported that the HFI funding which was previously allocated for \$150M per year has been decreased to \$40M per year. Even though the funding has been decreased, the silver linings are the partnerships between local health departments, hospitals and other stakeholders as a result of the HFI funding. Dr. Weaver reported that Pam Pontones, Deputy Health Commissioner of Local Health Services is planning to retire in September. She reported that the Indiana Health Fair from July 17 to 20, 2025, will provide \$4,000 worth of screenings with a one stop, one stick approach. Dr. Weaver provided a demo of the Dashboard of All Dashboards where all data is in one place on the IDOH website.

Dr. Weaver introduced Jessica Krug, Assistant Commissioner for Consumer Services and Health Care Regulation. Jessica replaces Jordan Stover, who left IDOH to work at FSSA. She also introduced Michelle Shippy, the new Executive Director for the Healthy Hoosiers Foundation, replacing Jon Ferguson. Jon will be the new Chief of Staff, replacing Amy Kent whose last day at IDOH will be July 18, 2025.

Public Health Protection Commission

Amendment to the Schedule of Civil Penalties Rule 410 IAC 7-23 for Discussion

Kelly MacKinnon, Chief Legal Counsel and Jordan Young, Interim Director, Food Protection Program presented Rule 410 IAC 7-23 amendments for discussion. These amendments are related to food establishments. The purpose of this rule is to complete the adoption of the 2022 Model Food Code that was started by the rulemaking process in LSA#24-375 by adopting civil penalties for new provisions of the Indiana Food Rule. In that rulemaking, the IDOH replaced provisions of the Indiana Food Rule with the substantive provisions of the 2022 Model Food Code. This also included revised civil penalties. However, that rulemaking did not include civil penalties for provisions of the 2022 Model Food Code that did not exist in Indiana's previous food code. This rulemaking is not expected to create compliance costs for retail food establishments because it merely creates an enforcement mechanism for provisions of Rule 410 IAC 7-26. Instead, this rulemaking will reduce compliance costs for retail food establishments

because it will prevent regulatory authorities from imposing civil penalties without offering establishments an opportunity to correct. Upon receiving approval from the Board, the IDOH will submit this rule for review by the Office of Management and Budget. Since this amends civil penalties, the IDOH will also be submitting this rule to the State Budget Committee for review once approval is received from the Office of Management and Budget.

Dr. Tharp asked for discussion and/or comments from the Board, staff or public. Joanne Martin inquired about the violation timeline. Jordan Young explained how the timeline for violations works and indicated that civil penalties are a last resort. Robin Marks asked about potential health hazards to the public. Jordan said this violation is dealt with via a cease-and-desist order.

Amendment to Lead Dust Rule 410 IAC 32 for Discussion

Kelly MacKinnon, Chief Legal Counsel and Katie Etter, Lead and Healthy Homes presented Rule 410 IAC 32 for discussion. On November 12, 2024, the U.S. Environmental Protection Agency (EPA) finalized a rule revising the Dust-Lead Hazard Standards (DLHS) and Dust-Lead Post-Abatement Clearance Levels (DLCL). Prior to this revision, DLHS and DLCL were 10 ug/ft² for floors and 100 ug/ft² for windowsills, and the DLCL for window troughs was 400 ug/ft². With this revision, DLHS have been lowered to any reportable level as analyzed by a laboratory recognized by EPA's National Lead Laboratory Accreditation Program (NLLAP). The DLCL have been lowered to 5 ug/ft² for floors, 30 ug/ft² for windowsills, and 100 us/ft² for window troughs. The IDOH is seeking to amend Rule 410 IAC 32 to update the language to be consistent with this rule. As a result of this revision, lead professionals who collect dust wipe samples and labs who analyze dust wipe samples will report any reportable level of lead in samples as hazards. Additionally, abatement contractors will need to meet lower DLCL to pass clearance inspections. States that have EPA-authorized lead-based paint (LBP) activities programs must demonstrate that its program is at least as protective as EPA's revised DLHS and DLCL no later than January 11, 2027, which is two years after the effective date of this rule. Rule 410 IAC 32 was last amended on August 24, 2022, to bring the definition of Dust-Lead Hazard Standards into conformity with the 2019 EPA rule, which defined the DLHS as 10 ug/ft² for floors and 100 ug/ft² for windowsills. The proposed amendments to this rule are based on the IDOH Lead and Healthy Homes Division's evaluation of the EPA's Reconsideration of the Dust-Lead Hazard Standards and Dust-Lead Post-Abatement Clearance Levels final rule published on November 12, 2024.

Dr. Tharp asked for discussion and/or comments from the Board, staff or public. Hearing none he proceeded to the next agenda item.

Women, Children & Families Commission

Update on Infant Mortality Rate

Eden Bezy, Assistant Commissioner, Women, Children & Families Commission and Rose Douglass, Director, Maternal and Child Health presented an update on Indiana's infant mortality rate. The press release issued on June 10, 2025, indicating an historic decrease in Indiana's infant mortality rate (IMR) was distributed. Provisional data show the 2024 IMR in Indiana is 6.3 deaths per 1,000 live births, a

decrease from 6.6 in 2023. If this IMR remains the same when finalized, it would be the lowest rate of infant deaths in Indiana since 1900. The previous lowest rate for infant mortality was 6.5 deaths per 1,000 live births in 2019. Rose attributed this decrease to strong partnerships with local communities and state and local agencies. To keep up the momentum, IDOH will continue to focus efforts on the highest causes of infant and maternal mortality; craft data-driven goals to ensure that fewer Hoosier babies are born too early and too small; and recognize that healthy babies come from healthy pregnancies.

Health and Human Services Commission

Update on Youth Tobacco Use

Miranda Spitznagle, Director, Tobacco Cessation and Prevention presented an update on youth tobacco use. The press release that was issued on June 24, 2025, indicating that Indiana's youth tobacco use is the lowest in decades was distributed. E-cigarette use among high school youth has dropped to 5% - its lowest level since data collection began in 2012. Cigarette smoking has reached a record low since data collection began in 2000, falling from 31.6%. Despite this progress, concerns remain as flavored tobacco products, frequent e-cigarette use, and the rising popularity of oral nicotine pouches indicate ongoing risks for nicotine addiction. Miranda also distributed the highlights from the 2024 Indiana Youth Tobacco Survey (IYTS). Dr. Armando Soto Rojas asked about the sample size for the survey. Miranda stated it was 60 middle and high schools with an average of 4 to 6 classes per school which equates to approximately 2,000 middle school age and 3,000 high school age students. Dr. Tharp asked if parents are notified about students who are smoking. Miranda stated it depends on the specific school policy. Miranda reported the key take-aways from the 2024 IYTS are: Tobacco and e-cigarette use rates continue to drop; most students who use tobacco want to quit; and concerns remain with flavors, emerging products, and nicotine addiction among students who use tobacco.

Division of Oral Health Update

Nelly Chawla, DBS, MPH, CPH, Director, Division of Oral Health presented an update on oral health in Indiana. Tooth decay is the #1 chronic disease among children – more common than asthma or obesity. Over 2 million U.S. children visit the ER each year for preventable dental issues. Early childhood caries is severe, rapidly progressing tooth decay in infants and young children. Pregnant women with untreated oral infections face high risks of preterm births. Nelly reported that only five local health departments have oral health programs, and three counties do not have a dentist nor a dental hygienist. Some of the IDOH oral health initiatives are: 1) Hoosiers: Give Kids a Smile which is an annual volunteer program that provides dental kits ordered from the American Dental Association. 2) Publication of an Oral Health Book in Braille which has been distributed to visually impaired students in preschools, enhancing oral health education for the visually impaired and to the Indianapolis Central Library, 3) CDC Grant: Oral Health Curriculum suitable for grades K to 12. The Oral Health Division is working on Access Practice Agreements (APA) which would allow dental hygienists to provide preventive services without the presence of a dentist in an emergency situation. The Donated Dental Services (DDS) program helps individuals with disabilities or who are elderly or medically fragile and cannot afford or otherwise access treatment for severe dental conditions. The Oral Health Division is collaborating with several external partners to make oral health part of everyday life, not just the dental chair.

Distribution

Dr. Tharp thanked staff for the professional new hire and separation reports.

Adjournment

Dr. Tharp asked for any other business to come before the Board. Hearing no additional comments from the Board, staff and/or public, he adjourned the meeting at 12:05 pm. The next meeting is scheduled for September 10, 2025, at the IDOH building.