Governor’s Public Health Commission

Commission Meeting Minutes

Meeting held in person and via Zoom

Indiana State Library
315 W. Ohio Street, History Reference Room
Indianapolis, Indiana

Thursday, June 30, 2022
1:00 – 3:00 pm

Members Present in Person:
Judith A. Monroe (Co-Chair)          Mindy Waldron          Dennis Dawes
Luke Kenley (Co-Chair)              Cara Veale              Carl Ellison
Kristina M. Box (Secretary)         Kim Irwin
David J. Welsh                      Mark Bardsley

Members attending via Zoom: Paul K. Halverson, Brian Tabor, and Susan Brooks (Non-voting Citizen Advisor)

Members absent: Bob Courtney, Hannah Maxey, and Virginia Caine

Indiana Department of Health (IDOH) Staff Present:
Shane Hatchett                      Jeni O’Malley
Lindsay Weaver                      Micha Burkert
Pam Pontones                        Tami Barrett

I. Call to Order, Welcome, and Approval of Minutes

Co-Chair Luke Kenley called the meeting to order at 1:09 pm, noted the presence of a quorum (following a roll call by Shane Hatchett) and delivered opening remarks regarding the meeting agenda and his appreciation for the work of the Commission members. He then called on Co-Chair Monroe and Secretary Box for opening remarks. Co-Chair Monroe added her thanks to the Commission members and commented on the importance of health as an economic driver. In addition to the Commission members, Secretary Box also recognized the important
contribution of the Designated Policy Advisors and the Department of Health staff and consultants. She noted that the report document distributed for the meeting is still a draft, subject to additional edits and changes recommended by the Commission. She also reported that Indiana has been chosen as one of the eighteen “21st Century Learning Community” (21C) states that are coming together to work on statewide public health system transformation and that Indiana would also be applying, as an entire state, for a new CDC funding opportunity that can support public health infrastructure, workforce, and service delivery improvements.

Co-Chair Kenley then called for the approval of the minutes of the May 19, 2022, Commission meeting. Dr. David Welsh made a motion to approve the minutes as presented, the motion was seconded by Mr. Carl Ellison, and the minutes were approved.

II. Public Input Summary, Shane Hatchett, IDOH Chief of Staff

Co-Chair Kenley recognized Mr. Shane Hatchett, IDOH Chief of Staff, who presented a summary of the 26 comments received through the GPHC website since the June meeting. The majority of these commenters (18) expressed support for, or otherwise addressed, the draft recommendations relating to school nurses.

III. Funding and Service Delivery Proposal, Co-Chair Luke Kenley

Co-Chair Kenley presented a proposed funding model for consideration by the Commission that would allow counties to opt-in or opt-out of participating in a public health improvement program that would include the availability of enhanced state funding to fund enhanced public health services, but also a requirement for a county matching contribution based on an equity formula similar to the approach taken in the state’s school funding formula. After discussion regarding the nature of the county contribution and the process for opting in or out, Secretary Box agreed to modify the model to provide for a maintenance of effort requirement that would allow all counties to opt-in but prevent them from reducing current local public health funding levels, provide that a county that opted out could reconsider its decision and revote after one or two years, and include a requirement that an education session for local officials be conducted within the county regarding the full ramifications of opting out before an opt out vote is finalized. Secretary Box also agreed to revise the report to reference that enhanced public health funding would be conditioned on meeting enhanced public health service levels (to be defined).
IV. Consideration of Draft Commission Report, Shane Hatchett, IDOH Chief of Staff

Mr. Hatchett led a discussion of the six chapters of the draft Commission report to obtain Commission feedback on proposed changes, additions, and modifications. Commission members agreed to the following changes:

a. **Data and Information Integration**: No changes proposed or suggested.

b. **Workforce**: It was agreed that the report would be revised to:
   1. Charge the Governor’s Administration with investigating whether the licensure of all healthcare professionals should be centralized within IDOH.
   2. Recommend that job descriptions and minimum qualifications should be developed for Public Health Administrators.
   3. Recommend that the state should develop non-mandatory salary schedules for public health positions.

c. **Child and Adolescent Health**: It was agreed that Recommendation #26A regarding the ratio of school counselors, social workers, and psychologists per student should be clarified (i.e., ratio should be “improved” rather than “reduced”).

d. **Emergency Preparedness**: It was agreed that:
   1. The report should recommend that IDOH evaluate EMS reimbursement issues, acknowledging, however, that the scope of control for this issue lies with third-party payers like Medicare and Medicaid.
   2. The report should include a recommendation pertaining to injury prevention for adults (in addition to the injury prevention recommendation already included in the Child and Adolescent Health chapter).

e. **Governance and Infrastructure**: It was agreed that the report should include language previously agreed upon at the May Commission meeting allowing counties to appoint a Local Health Officer, other than a physician, APRN or PA, with the approval of the IDOH Executive Board.

f. **Funding**: Commission members agreed to the following report changes:
   1. Revise Recommendation #9A to clarify that the Commission is recommending a permanent funding increase, not just an increase for one biennium.
2. Reflect in the report where Indiana currently stands in relation to the national average per capita public health spending (after excluding Marion County funding which skews the state average).
3. Revise the goal of increasing Indiana's per capita public health funding to be “comparable to” the national average to being “at the national average,” perhaps reaching this goal over time.

Following a discussion of the need for a July Commission meeting, it was agreed that the draft report could be approved with the agreed-upon changes that IDOH would make to finalize the report without the need for another meeting and further Commission action. Dr. Veale made a motion to approve the report with the agreed-upon changes to be reviewed by all the members, and that motion was seconded by Commissioner Dawes. The motion passed with 12 votes in favor and 0 against.

**VII. Final Thoughts and Adjourn**

After Secretary Box thanked Clare Fiddian-Green and the Richard M. Fairbanks Foundation for funding the Commission's work, Co-Chair Kenley adjourned the meeting sine die at approximately 3:06 p.m.

*Minutes attested to by staff since this is the last meeting of the Commission.*