

New York State Public Health Association
Policy and Advocacy Committee (PAC)
February 26, 2020

NYSPHA PAC 2020 Legislative Agenda

1. Flavored Tobacco ban

- a. A.47-A/S.428-B (Rosenthal/Hoylman): AN ACT to amend the public health law, in relation to prohibiting the sale and distribution of flavored e-liquid for use in e-cigarettes (amended to include all flavored tobacco products including menthol cigarettes). (Included in the Executive Budget Article VII bill).
- b. A.8808/S.6809 (Bichotte/Hoylman): AN ACT to amend the public health law, in relation to prohibiting the sale of menthol cigarettes, and all other flavored combustible/smokeless tobacco products.

2. Additional Tobacco-related items.

- a. A.389/S.592 (Galef/Carlucci): AN ACT to amend the public health law, in relation to enacting the “tobacco-free pharmacies act.” (Included in the Executive Budget Article VII bill).
- b. A.2299/S.2655 (Dinowitz/Stavisky): AN ACT to amend the public health law, in relation to prohibiting smoking in certain outdoor areas.
- c. A.4365/S.1148 (Rosenthal/Carlucci): AN ACT to amend the public health law, in relation to prohibiting the use of coupons or use of a “price reduction instrument” to lower the price of certain tobacco products. (Included in the Executive Budget Article VII bill).

3. Well Campaign

- a. A.7607-A/S.7767 ((Benedetto/Biaggi). AN ACT to amend education law to develop a New York State model school wellness policy.
- b. Invest \$21M in funding and technical assistance to support school districts—particularly high-needs districts—to improve and implement wellness policies.
 - i. \$20M: Funds for New York’s 205 high-needs school districts to bring strong, comprehensive wellness policies to life for our state’s most vulnerable children.
 - ii. \$1M: Funds for the Department of Education to fill a health and wellness position and create a resource hub to provide wellness policy technical assistance to all districts that need

help.

4. Recreational Cannabis Statement

NYSPPH & NYSACHO have concerns and recommendations regarding the Marijuana Regulation and Taxation Act:

A.1617/S.1527 (Peoples-Stokes/Krueger): While criminal justice reform with regard to cannabis is urgently needed, our members have serious concerns related to the adverse impact an adult-use regulated cannabis program will have on public health. If this legislation is passed, it is imperative that funding from cannabis-related tax revenues should be earmarked for public health programs to address the potentially adverse impact of cannabis with public and medical education and to address health inequities that exist with regard to cannabis use. Such programs should be informed by information from the proposed cannabis research center, when available.

5. Childhood Lead Poisoning Prevention Program funding

NYSPPH fully supports the lowering of New York's cutoff for Elevated Blood Lead Level to 5 mcg/dL. An additional \$36 million in funding is needed for local health departments to follow up on the estimated 17,000 additional EBL cases this will generate. Funding be in the form of grants, not increased Article 6 General Public Health Work funding since the latter does not cover fringe benefits and indirect costs..

6. Increase funding for New York's local public health and safety infrastructure.

Local health (LHDs) departments are New York State's partners and operational extensions, working in the forefront of communities, addressing public health issues and serving as the first line of defense against all public health crises by protecting communities and residents. Emerging challenges to LHDs include threats to water quality: monitoring suspected coronavirus cases, harmful algal blooms, presence of PFOA/PFOS; opioid overdose deaths; vector borne diseases: rabies and tick-borne illnesses; the vaping epidemic in our youth; communicable disease outbreaks such as STDs which are at their highest rates ever among young people, Ebola virus and Zika virus; environmental hazards: lead in housing stock and legionella and natural disasters such as hurricanes or flooding.

Local health departments have not received an increase in core public health aid in more than six years, nor have they received adequate compensation needed to respond to emerging health issues. Now is the time for a call to action to reinvest in public health and safety infrastructure in New York State, bolstered through funding of Article 6, Public Health Law and

demonstrate the State's commitment to public health preparedness and safety measures aimed to protect residents in New York State.

NYSPHA Recommends: Increase Article 6 base grants and state aid reimbursement to ensure public health services are eligible for full reimbursement of local expenditures:

- From \$650,000 to \$750,000 in full services LHDs;
- From \$500,000 to \$550,000 in partial service LHDs;
- In the six largest counties, a per capita reimbursement increase from 0.65 to \$1.30;
- Increase the beyond-base-grant state aid reimbursement from 36% to 40%.
- Provide 100% reimbursement for the first full year of any new and/or significantly expanded mandates emerging from law, rule or regulation including reimbursement of salary and fringe expenses under Article 6 State Aid Appropriation.

7. Increase funding for State's public health programs.

Years of flat funding and cuts have eroded the Department of Health's ability to achieve its own goals found in a variety of state plans such as the NYS Prevention Agenda/State Health Improvement Plan and the NYS Comprehensive Cancer Control Plan. Tobacco control, for example, is currently funded at \$39 million, which is only 19% of what CDC recommends for an optimally effective, comprehensive tobacco control program (\$203M/year for New York) and it was cut from \$85 million 10 years ago.

Additionally, while New York State has made significant fiscal and programmatic enhancements to assist municipalities in protecting drinking water, the same cannot be said for support for the county-level role of monitoring and regulation of drinking water supplies.

NYSPHA Recommends:

- Increase the Bureau of Tobacco Control's funding from \$39 to \$52 million;
- Target other funding increases to impact health behaviors where there is a large potential return on investment such as tobacco control, increasing HPV vaccination, and colorectal cancer screening rates;
- Initiate a new program in the Bureau of Occupational Health and Injury Prevention to fund research at one or more NYS Schools of Public Health on policy options to reduce gun violence.
- Fully restore the COLA for Department of Health programs, which was removed in the 2018-2019 State Budget.
- Restore drinking water enhancement grant funding to original 2007-2008 appropriation in funding at \$6M. Increase drinking water enhancement grant funding to equal 1% of Clean Water Infrastructure Act appropriation, totaling \$30M.

8. Clinician Preceptor Tax Credit

- a. S.4033A (Stavisky) / A.3704 (Gunther): An act to amend the tax law, in relation to establishing a personal income tax credit to preceptor clinicians who provide preceptor instruction

9. Other issues under study.

- a. Restore Nurse family partnership funding
- b. Rural Health
 - i. Restore the AHEC (Area Health Educations) funding
 - ii. Restore funding for workforce programs
 - iii. Area Health Education Centers (AHEC) (\$1.6M)
 - iv. Rural Health Networks (\$13M)
 - v. Diversity in Medicine Program (\$1.2M)
 - vi. Ambulatory Care Training Program (\$1.8M)
 - vii. Center for Health Workforce Studies (\$140k)