

March 25, 2025

Re: SF2669

Dear Senators,

Thank you for the opportunity to share my strongest support for Senate File 2669, which will provide critical resources to the Minnesota Department of Health (MDH) for infectious disease prevention, response, and outbreak control. I come to this issue having served for 24 years at the MDH, 18 of those years in charge of infectious diseases for the state. I also served as State Epidemiologist for 15 years. I currently am a Regents Professor and Director the Center for Infectious Disease Research and Policy (CIDRAP) at the University of Minnesota.

During my tenure at the MDH, the general support from the state of Minnesota for infectious disease prevention, response and control was continually reduced as federal funds from the Centers for Disease Control and Prevention (CDC) became more available to the state. This trend has continued in the years since I left the MDH. In fact, today infectious disease activities are over 90% federally funded in Minnesota. But that funding has been decreasing or remained static while the costs for controlling these diseases have been increasing. Most concerning is what will happen with federal funding going forward. All indications from discussions with senior colleagues at the CDC point to major cuts in federal funds to states for infectious disease activities in the immediate months ahead. Such cuts will devastate the MDH's capacity to respond to these infectious disease threats without state resources.

The \$1.3 million requested by the MDH is essential support for protecting Minnesotans against the ever-growing threat of infectious diseases. As we witness the US government withdrawing critical support for infectious disease control around the world, we can expect spillover of those diseases right here in Minnesota. In addition, we have an increasing risk of domestic-related infectious challenges like measles and other childhood vaccine-preventable diseases, H5N1 influenza in poultry and dairy cattle with potential for human illness, rapidly increasing fatal antibiotic-resistant infections, growing threats from foodborne disease, and the expanding range of mosquitoes carrying viruses that are transmitted to humans. The list goes on!

In short, it is my best professional judgment that Minnesota is on a collision course between a serious future lack of public health resources and the growing threat of emerging and existing infectious diseases. All citizens are at risk for these infections, and that risk will grow substantially if the MDH does not have the resources to respond.

Thank you for the opportunity to provide my input for your consideration. I'm happy to discuss this issue with the committee members and staff if that will be helpful.

Sincerely yours,

A handwritten signature in black ink that reads "Michael T. Osterholm". The signature is written in a cursive style with a long horizontal line extending from the end of the name.

Michael T. Osterholm, PhD, MPH

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