



April 8, 2025

**RE: SF 2669 – Health and Human Services Omnibus Budget Proposal**

Chair Wiklund and Members of the Committee:

I am writing behalf of the Local Public Health Association of Minnesota (LPHA) and our more than 250 member public health leaders of city, county and Tribal public health departments across the state. LPHA appreciates your continued support of public health departments who are fulfilling core, state-mandated services that protect and promote the health of all Minnesotans. LPHA would like to highlight several items in SF 2669 that would help our health departments best serve their communities:

- **Substance Misuse Prevention Grant Restoration** – During the 2023 legislative session, \$10 million per year was allocated to local and Tribal health departments for creating and disseminating cannabis educational related materials, safe use and prevention training, technical assistance, and community engagement. At the end of the 2024 legislative session, \$3.6 million of those funds allocated for local public health were reallocated to other programs. Thank you for the provision in the bill that reallocates funds to restore \$2.5 million per year to these grants. While we hope for a full restoration of funds, we are grateful for the partial restoration. This will allow local health departments to have the resources to advance education, prevent substance use before it starts, reduce stigma, and implement evidence-based prevention strategies to enhance community resilience.
- **Align Collection Schedule of the Statewide Hospitality Fee** – Although LPHA is supportive of efforts to ensure MDH has capacity to do environmental health-related inspections, ensuring restaurants and other facilities are safe, LPHA is concerned about the provision in this bill that would change the way that the Statewide Hospitality Fee is collected from establishments licensed by delegated agencies. Under this proposal, delegated local public health agencies would be responsible for collecting this hospitality fee annually and remitting these payments to MDH by July 1 of each year. MDH has struggled to successfully collect these fees in the past – citing a 64% collection rate. There are unresolved questions—would MDH bill local governments if they face similar challenges and are unable to collect fees from establishments? Further, many local health departments have very limited capacity. If locally delegated agencies are serving in a fee collection role for the state, a percentage of that fee should be retained by the local licensing jurisdiction for costs associated with collecting the fee.
- **Infectious Disease Infrastructure** – LPHA appreciates the inclusion of the provision that provides \$1.3 million per year in ongoing funding to support infectious disease prevention, early detection, and outbreak response. Infectious disease outbreaks are making the news including measles, tuberculosis and H5N1. Building capacity at MDH to respond to these and other infectious diseases through conducting case investigation, providing technical assistance, and educating the community will make Minnesota more resilient and prepared to address these challenges now and into the future.

- **Emergency Preparedness and Response Sustainability Grants** – Thank you for maintaining stable funding for local and Tribal public health emergency preparedness and response. Responding to disasters and emergencies—whether health focused or not—is a core responsibility of Minnesota's local public health departments. This funding has already provided each Community Health Board with crucial added capacity to fill gaps in emergency preparedness infrastructure, allowing for dedicated staff that can focus on preparing for and responding to emergencies.
- **Public Health Infrastructure Pilot Projects Grant Program** – Thank you for maintaining stable funding for public health pilot project infrastructure grants. This program provides funding to selected Community Health Boards and Tribal governments to pilot new public health delivery models that make health departments adaptive to workforce shortages, use resources more effectively, and better address community health needs.

Local public health agencies are on the front lines every day to protect and promote the health of our communities. To do so successfully requires stable and reliable funding. Thank you for your continued support of these critical sources of public health funding and other programs that will improve the health of our state. We look forward to continuing to work with you to advance prevention strategies that promote the public's health.

Sincerely,



Kari Oldfield-Tabbert, Executive Director