PWTF: Avenues for Continued Funding

On June 6th, Monica Valdes Lupi, BPHC Executive Director, testified at a Joint Committee of Public Health about Massachusetts’ Prevention Wellness Trust Fund (PWTF).

Monica testified with Margaret Van Cleve-Rocchio, a nurse at the Trotter Innovation School – a Boston PWFT partner. Monica spoke to the wide impact of the program. She noted from January 2015 through March 2017, over 1,900 patients were referred from clinics and community programs to falls prevention classes, hypertension management classes, and Assisted Home Safety Assessments. Over 110 home safety assessments for Boston elders occurred in that time frame and nearly 700 patients participated in Tai Chi and Matter of Balance classes.

Margaret recounted the individual experience of a fourth grader who needed nine administrations of albuterol in the three months prior to getting services funded by PWTF. The student had just two administrations in the past three months.

Unfortunately, the Fund is scheduled to sunset at the end of this month unless: 1) this legislation is passed into law, or 2) the language in the Senate budget to continue PWTF is accepted in the final Massachusetts FY18 budget.

BPHC has partnered with Massachusetts Public Health Association and a coalition of numerous organizations who want to see this fund continue.

Legislation 101 Brown Bag Lunch

**When:** Friday June 23rd at Noon

**Where:** 1010 Mass Ave, The Hayes Conference Room, 2nd Floor

**Who:** All are welcome

**What:** Learn how an idea becomes a bill and eventually a law in Massachusetts, the BPHC priority bills, racial equity in our bills, and your role in the process.

**Why:** Laws impact the work we do.

Laws impact the health of Boston’s residents.

You may have an idea to improve current laws or for a new law.

Light refreshments will be served.
Lead Abatement & Earned Income Tax Credit Legislation

June 6th was a busy day at the State House. Two other priority bills for the Commission were heard at the same time as the Prevention and Wellness Trust Fund bills.

The first bill is An Act relative to lead abatement sponsored by Representative Jeffrey Sanchez. The Commission weighed in with written testimony.

Under current Massachusetts law, our state lead standard is set at 25 micrograms per deciliter. This is five times the standard set by the Centers for Disease Control and Prevention. Our current levels are unacceptable. We jeopardize the health of our youngest residents in the Commonwealth, because these levels often lead to severe and permanent health problems. The lead abatement bill would lower the blood lead level to 10 micrograms per deciliter to trigger lead abatement.

The second bill is An Act improving earned income tax credits (EITC) sponsored by Senator Jamie Eldridge and Representative Marjorie Decker. The bill would increase the Massachusetts EITC from 24 to 50 percent of the federal credit. The Commission’s written testimony stated, “Boston is facing unprecedented levels of economic inequality and this inequality is affecting the health of our children, families and communities. Almost a third of children in Boston live in poverty, but this burden is not evenly distributed… S.1521 and H.1504 would help low-income families improve their health by keeping more of their income in their pockets to pay for the basic necessities that keep families healthy and for some can lift them out of poverty.”

Health Disparities Legislation

The Commission has had a very active month advocating for important policy work! Monica Valdes Lupi was back at the State House on June 13th testifying in support of An Act eliminating racial and ethnic health disparities in the Commonwealth. This bill is another filed by Representative Jeffrey Sanchez and would establish an Office of Health Equity at the executive level in Health and Human Services. The bill also requires an annual report on health disparities within the Commonwealth. Both actions mirror those the Commission has undertaken for more than a decade.

Monica testified, “In 2006, Boston became the nation’s first city to address racial and ethnic disparities in healthcare. As the Executive Director, eliminating disparities in health is one of my three strategic priorities…. At the Boston Public Health Commission, we support and promote the adoption of new strategies and work tirelessly with community partners to promote health equity in our city. Creating a statewide Office of Health Equity at the Executive Office level is the best way to address the systemic disparities which impact health.”

Monica Valdes Lupi testifies in support of an Office of Health Equity
Tobacco 21 Legislation

Despite major gains in reducing the number of adults and youth who smoke cigarettes, smoking is still the leading cause of preventable death in the United States, contributing to more deaths than HIV, illegal drug use, alcohol use, motor vehicle accidents and firearm-related incidents combined. This is why Monica Valdes Lupi, Executive Director, testified in support of An Act to protect youth from the health risks of tobacco and nicotine addiction sponsored by Senator Jason Lewis and Representative Paul McMurtry. The bill would raise the legal age of sale in Massachusetts to 21. Our Board passed a Tobacco 21 regulation in December 2015.

The Federal and State Budget

The White House released President Donald Trump’s detailed budget for Fiscal Year (FY) 18 on May 23rd. The Association of State and Territorial Health Officials (ASTHO) provided a key summary of the provisions that impact public health. You can access it on the IGR intranet page, where we will start adding more resources on a regular basis. Congress is responsible for passing an annual budget for each new fiscal year that begins on October 1st. The practice of passing short-term appropriation bills has become more common. Though President Trump’s budget proposal is not binding, it may have impact on Congressional decision making.

Massachusetts has been progressing through its annual budget process for FY18 which begins on July 1st. The Senate passed its budget in late May. You can read a recap of specific items that interest the Commission on the IGR page. During June, a Conference Committee will hash out differences between the House and Senate versions with the intent to have a budget for the Governor’s signature prior to July 1st. An update on the passage of the state budget will be included in next month’s newsletter.

City Council Budget Hearing

As part of the yearly budget process for the City of Boston, the City Council’s Ways and Means Committee held its budget hearings in May. On May 23rd, the Boston Public Health Commission went before the Council. Monica Valdes Lupi, Grace Connolly, Director of Administration and Finance, Chief Jim Hooley, Chief of Emergency Medical Services, and Jen Tracey, Director of Office of Recovery Services presented The Fiscal Year (FY) 17 accomplishments and outlined funding requests for FY18.

This hearing is a critical step to the final approvals of the Commission’s FY 18 budget. It gives the Councilors the opportunity to ask questions to better understand how the Commission will utilize our resources in the coming year. Expectations are that, before the end of June, the City Council will approve and Mayor Walsh will sign a budget for FY18 which begins on July 1, 2107.
Nutritional Facts Label

Big City Health Commissioners, including Boston, signed a letter urging the Food and Drug Administration to maintain the current July 2018 compliance date for the updated Nutrition Facts label for packaged foods. The updated label will be the first to require disclosure of the amount of added sugars contained in a product serving and include a percent Daily Value for added sugars. This update will give consumers important information to help lower the sugars they consume. Some food industry members have asked the Department of Health and Human Services to delay implementation of the updated Nutrition Facts label for an additional three years, until 2021. Several food companies have demonstrated the feasibility of these updates by already implementing the changes.

The Mission of the IGR Office

The **mission of the IGR office** is to promote a strong effective advocacy voice and presence for public health policy at all levels of government, and to accomplish BPHC strategies for good health and health equity through laws and regulations. We believe that staff, clients, and community members should have the skills and opportunities to participate meaningfully in the policymaking process and work for policy changes that benefit the health of residents, especially the most vulnerable.

**WHAT WE DO**

- Track information on health policy and major priority issues
- Advocate to improve public health through laws, regulations and public budgets at the local, state and federal level
- Support programs to develop policy priorities and advocate for them
- Provide training and support for staff, clients/constituents, and community partners to develop advocacy skills to speak up for issues they care about
- Coordinate Voting for Health, to educate and mobilize voters to support neighborhood health

**PLEASE NOTE:**

All advocacy opportunities we present are strictly voluntary.