



Oregon Public Health Association

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www.OregonPublicHealth.org

March 23, 2017

Chair Greenlick, Vice-Chairs Hayden and Nosse, and Members of the Committee:

I'm writing today to express the Oregon Public Health Association's support for House Bill 3276 and urge you to quickly advance this important piece of public health legislation.

The Oregon Public Health Association has over 430 members in every county in the state. We are public health professionals representing all components of our public health system: doctors, nurses, researchers, professors, community leaders, governmental public health professionals, and citizens who are committed to improving the health of every Oregonian.

Oregon's Local Public Health Authorities are responsible for tracking communicable disease data, receiving reports of infectious disease, and responding to outbreaks. Outbreaks can occur anywhere and, unfortunately, are not constrained to meningococcal disease. Public health investigated 291 disease outbreaks in 2015, up from 256 in 2014 (a 14% increase). ¹ Three outbreaks of influenza were declared just in the week of March 5-11, 2017. ² When an outbreak or epidemic has been declared, it is imperative that local public health and their partners have the resources they need to stop the spread of disease. One of those resources is the knowledge that insurance companies are required to reimburse all providers, whether they are in network or not, for vaccines, antibiotics and other preventive treatments. This guarantee will help assure that these treatments can be administered in a timely and equitable way to as many people at risk as possible.

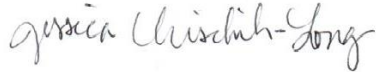
House bill 3276 will do just that. In the 2015 U of O and ongoing OSU meningococcal outbreaks, barriers to insurance payments for protective vaccination were encountered. Administering the vaccine takes about 10 minutes per person. However, students at the OSU Student Health Center, where vaccines were administered, waited between 30 minutes to more than two hours to have their insurance verified. It is likely that many students simply left because they could wait no longer. It is unlikely that those students will take the time to come back for their vaccine given they could face the same long wait time.

Even Oregonians with the most comprehensive private insurance coverage could receive a public health recommendation for immediate preventive treatment or vaccination while skiing or fishing in the Cascades, attending a music festival, rodeo, or sporting event, or while vacationing on the coast. In those cases, it is quite likely that the most accessible – and perhaps the only – provider would be out-of-network. Travel to an in-network provider could delay treatment and result in more and wider spread of the disease as that person comes into contact with more people and carries it to a new geographic area.

The cost of this effort must be paid somehow. Years of deep program cuts to education and public health mean that using public money to respond to outbreaks, as happens now, will result in further program cuts and shifting costs to students and our most vulnerable citizens.

Outbreaks will continue to occur because they are simply part of modern life. The Oregon Public Health Association urges your support of House Bill 3276 which will help assure that necessary preventive services can reach everyone who needs them more rapidly and more easily during declared disease outbreaks.

Sincerely,

A handwritten signature in cursive script that reads "Jessica Nischik-Long".

Jessica Nischik-Long, MPH
Executive Director

1. Oregon Health Authority. Selected Reportable Communicable Disease Summary, 2015. Available at: <http://public.health.oregon.gov/DiseasesConditions/CommunicableDisease/DiseaseSurveillanceData/AnnualReports/Documents/2015/arpt15.pdf>
2. Oregon Health Authority, Public Health Division. *Flu Bites*. Mar 17, 2017. Available at: <https://public.health.oregon.gov/DiseasesConditions/CommunicableDisease/DiseaseSurveillanceData/Influenza/Documents/data/FluBites.pdf>