

Communiqué

PRESIDENT'S MESSAGE

June 2015



*Linda Cooperstock
Retired
Columbia-Boone County Health Department*

Dear Colleagues,

Over the past few months we have followed several important bills that influence public health, as well as the state budget process. You will read about these later in the newsletter. The important message here is to be active and diligent in your messages to your legislators. You can make a difference.

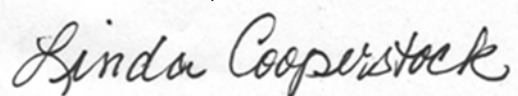
It has been a busy season for everyone especially as we move forward in planning the next MPHA-MOALPHA Annual Meeting in September, the MINK (Missouri, Iowa, Nebraska, Kansas) public health meeting in May, the end of semester activities for our academic members, and the activities of the Transforming the Future of Public Health Steering Committee.

I am particularly excited about the possibility of an organized statewide public health student consortium. Several students are interested in this effort, as are several academic leaders in the various public health programs across the state. I hope this will come together such that a “kick-off” of sorts will be part of our annual meeting. Stay Tuned.

We have also heard that some of the meeting attendees would like some use of social media tools for announcements, tweets, and facebook activities. We will see some interesting happenings.

I hope each of you will be interested in participating in at least one of the activities mentioned above and throughout this newsletter. It's time for EVERY member to become engaged in the promotion of public health at whatever level is good for you.

Yours in Health,



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APHA Legislative Update

May 2015



House and Senate budget resolutions propose cuts to critical health and safety net programs

Budget resolutions adopted last week in the House (H. Con. Res. 27) and Senate (S. Con. Res. 11) fail to address the damaging impacts of sequestration in 2016 and instead would make additional hurtful cuts to nondefense discretionary funding, which funds public health, environmental protection, education and other critical programs below sequestration levels. Both resolutions would repeal the benefits of the Affordable Care Act. The ACA makes major strides in lowering our skyrocketing health costs, providing better access to preventive services and wellness programs, ending discriminatory practices by health insurance providers, expanding coverage to more than 16 million uninsured Americans and closing the prescription drug coverage gap for our nation's seniors. The proposals would also repeal the Prevention and Public Health Fund which is funding programs across the country to fight obesity, curb tobacco use

and increase access to preventive care services. The resolutions introduced by Senate Budget Committee Chairman Mike Enzi, R-Wyo., and House Budget Committee Chairman Tom Price, R-Ga., would also block grant the Medicaid program, cutting hundreds of billions in federal funding for the program and likely forcing states to cut back benefits and eligibility. The House proposal would block grant and cut \$125 billion over the next decade from the Supplement Nutrition Assistance Program, causing millions of families and their children to lose their benefits or see them significantly reduced. The House version of the budget would also turn the Medicare program into a voucher program beginning in 2024. Such a move would likely lead to increased costs and force seniors out of the traditional Medicare program. The Senate adopted its resolution by a vote of 52-46, and the House passed its version by a vote of 228-199. In the coming weeks, the two chambers will try to work out the differences between the two measures and develop a final conference report which would

set the parameters for the upcoming annual appropriations process and also issue reconciliation instructions to various House and Senate Committees to develop legislation to address the various policy changes outlined in the resolutions, including replacement of the Affordable Care Act. APHA will continue to oppose the measures as passed by both chambers.

APHA sent a letter to all members of the House and Senate urging them to oppose the resolutions, and hundreds of APHA advocates sent messages to their senators and representatives urging them to reject the measures.

Health groups urge EPA to strengthen ozone standard

APHA joined with the American Lung Association, the American Thoracic Society, the American Academy of Pediatrics and other leading health organizations in submitting comments to the U.S. Environmental Protection Agency in support of EPA's effort to strengthen the existing ozone standard to better protect public health. The Clean Air Act requires EPA to set the primary national air quality standard for ozone to accurately reflect current science and to protect the public's health, including those most vulnerable to the effects of air pollution, with an adequate margin of safety. Scientific evidence shows that the current ozone standard of 75 parts per billion is not protective of public health and in order to best protect public health with an adequate margin of safety, EPA should set a more health protective standards of 60 ppb. In addition, numerous APHA and Affiliate members joined more than 1,000

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APHA Legislative Update (continued)

health professionals in sending a letter to EPA Administrator Gina McCarthy urging her to support a standard of 60 ppb.

House passes bills undermining EPA scientific process

On March 18, the U.S. House of Representatives passed two bills opposed by APHA and other leading public health organizations that would undermine EPA's scientific process to protect public health from environmental hazards. The Secret Science Reform Act of 2015, H.R. 1030, would compel EPA to either ignore the best science by prohibiting the agency from considering peer-reviewed research that is based on confidential patient information or force EPA to publicly release confidential patient information, which would violate federal law. Understanding the impact of air pollution on human health and the magnitude of harm caused by pollution at specific levels helps the agency meet its obligations under the Clean Air Act. Absent these data, it is unclear upon what basis the agency could make sound decisions. The second bill, the EPA Science Advisory Board Reform Act of 2015, H.R. 1029, would also undermine the scientific basis for EPA policy, specifically by compromising the integrity of EPA's Science Advisory Board, or SAB, the panel that reviews that science. This legislation would impose a hiring quota on the SAB that would require 10 percent of its members to be selected for qualifications other than their scientific expertise. This bill would compromise not only the scientific integrity of the SAB, but also its independence, as the quota would open the door for representatives of the regulated industries to serve on the board. APHA Executive Director Georges C.

Benjamin, MD, joined leaders from the American Lung Association, the American Thoracic Society, Trust for America's Health and the Allergy & Asthma Network in a letter to the House of Representatives opposing the bills.

Health organizations urge full funding for food safety programs

APHA joined other leading health organizations in sending a letter to House and Senate Appropriations Committee leaders in support of President Obama's request of \$109.5 million for food safety activities at the U.S. Food and Drug Administration for Fiscal Year 2016 to fully implement the FDA Food Safety Modernization Act. The FSMA strengthens and modernizes the regulatory, administrative, and information-technology systems that ensure the safety of our food supply. Foodborne illness remains a major public health threat. The U.S. Centers for Disease Control and Prevention estimates that contaminated food causes 48 million foodborne illnesses, 128,000 hospitalizations and as many as 3,000 deaths nationwide every year. These preventable illnesses inflict untold suffering and drive avoidable health system-related costs of about \$70 billion each year. All Americans are at risk for food poisoning, but young children, pregnant women, older adults and people with weak immune systems are at particular risk of severe infection and more serious outcomes.

Health groups support funding for antimicrobial resistance

APHA joined with other public health advocates in sending a letter to House and Senate appropriators urging them to provide adequate funding for antimicrobial resistance

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Calendar of Events

July 16, 2015

Board of Directors Meeting

MPHA Office
Jefferson City, MO

September 22-24, 2015

Joint Annual Conference

Stoney Creek Inn
Columbia, MO

October 2, 2015

Newsletter Submissions Due

October 31, 2015

APHA 143rd Annual Meeting

Chicago, IL

February 2016

Newsletter Submissions Due

APHA Legislative Update (continued)

initiatives as reflected in the administration's *National Strategy to Combat Antibiotic-Resistant Bacteria*, FY 2016 budget request and the recently released National Action Plan for Combating Antibiotic-Resistant Bacteria. The president's budget would provide various federal agencies, including CDC, FDA and the Department of Agriculture, among others, funding to combat antibiotic resistance through prevention and control activities, enhanced data collection and surveillance and antibiotic stewardship, as well as greater investment in research and development for antibiotics, diagnostics and vaccines.

Coalition presses for strong public health preparedness funding

APHA joined with other organizations as an informal

coalition on biosecurity and public health preparedness to support strong funding for programs critical to the nation's preparedness. As we were reminded by recent Ebola outbreak, our nation's vulnerability to threats remains high, and funding for programs that protect the U.S. and global community from health security threats must be robust and consistent. The coalition sent a letter to Sen. Roy Blunt, R-Mo., Chairman of the Senate Appropriations Subcommittee of Labor, Health and Human Services, Education, and Related Agencies, calling for robust fiscal year 2016 funding to help states and localities restore some of the core capabilities lost due to significant cuts over the past decade to programs under Public Health Emergency Preparedness Cooperative Agreements at the Centers for Disease Control and

Prevention. Funding for the Hospital Preparedness Programs, which is an essential program in supporting surge capacity and community and hospital preparedness for public health emergencies, has also been cut dramatically in recent years. Additionally, the coalition called for adequate funding for medical countermeasure development and procurement through the Biomedical Advance Research and Development Authority and the Project BioShield Special Reserve Fund to ensure continued development of national security products.

Policy Watch: State and International Updates



Alaska: interplay of proposed budget cuts and Medicaid expansion

In mid-March, the Alaska House of Representatives passed an operating budget with over \$200 million in spending cuts, which represents the largest percentage cut in the state's history. The cuts are in response to a \$4 billion budget deficit in the state. The House considered multiple amendments to restore funding for early education, workforce development and health care, all of which were rejected. Before advancing, the House Finance subcommittee stripped out Gov. Bill Walker's proposal to include funding in the operating

budget for Medicaid expansion. In a continued effort to expand Medicaid, the governor has introduced a bill that would allow the state to accept federal funding to expand the pool of Medicaid recipients and offer reform measures. Currently, Alaska's Medicaid program predominantly covers low-income children and pregnant women. The state estimates that expansion would result in 20,000 eligible Alaskans enrolling within a year. Walker's bill would also promote the use of telemedicine to help reduce health care costs.

International state of play on plain tobacco packaging

In early March, Ireland became the first country in Europe to pass a law enforcing plain packaging of tobacco products, quickly followed by Britain. The laws are expected to go into effect in May 2016 for both countries. New Zealand was an early supporter of plain packaging, but legislative progress stalled due to impending threats of legal and trade challenges that would be brought on by the tobacco industry and tobacco-producing nations. Health officials have estimated that a legal challenge could cost the country \$8 million. Australia continues to be tied up in defending its plain packaging law against legal challenges, which has had a chilling effect on New Zealand and other countries. According to the first comprehensive evaluation of Australia's law, selling cigarettes in identical brown packets predominantly covered with graphic health warnings has helped reduce appeal.

Missouri Legislative Update

Bert Malone, MPA

Deputy Director, Kansas City Health Department

HB 10 – budget bill – Passed both houses and went to the Governor on 4/23/15, with **Core Public Health GR appropriation the same as last year**. If he uses his line-item veto power, the legislature can override his vetoes before the session ends 5/15/15. However, he still has the obligation to balance the budget, so I expect he'll withhold funds later if needed. Best that can be expected at this time,, I guess. MPHA testified as did MOALPHA

Other Good News:

HB 450 prohibits anyone from sending, reading, or writing a text message while operating a motor vehicle, was voted out of committee and sent to the House Select Committee on State and Local Governments. This is a good injury prevention measure!

SB 63, which establishes a Prescription Drug Monitoring Program, passed the Senate and had a hearing in the House.

Bills we oppose that moved:

- HB 523 Motorcycle helmets passed the House and had a public Hearing by the Senate Transportation, Infrastructure, and Public Safety Committee; you may recall Governor Nixon vetoed this bill in his first term.
- HB 897, which removes local authority to inspect food service or fire safety of nursing homes, was voted Do Pass by the House Professional Registration and Licensing Committee; this requires action.
- HB 1093 was approved by the House and SB 500 was approved by the Senate (both loosen regulations for honey processors).
- HB 215, which prohibits the enforcement of any federal regulation by any state department or agency unless the enforcement is approved by the General Assembly, was assigned to the House Emerging Issues Committee. This needs action.

Bills we have concerns about that moved this week:

Veterinary Public Health:
HB 1094 and HB 1096 Captive deer—reported do pass by House Select Committee

Vital Records:

HB 1113 - Allows Physicians Assistants (PA) and

Advanced Practice Nurses (APN) to assign cause of death and sign death certificates, and allows anyone designated by that person to enter the data, with no civil liability for mistakes. This was voted out of House Select Committee.

SB 517 - Allows PAs and APNs to investigate and assign cause of death and sign death certificates; passed the Senate.

Environmental Health:

HB 1058, which would require Department of Natural Resources (DNR) to consider cost when limiting discharges from water or sewer treatment plants, passed the House.

SB 358, which would weaken the Clean Water Act and possibly jeopardize federal funding for DNR, was voted out of committee in the Senate.

School Food:

HB 1111 would allow up to 30 non-healthy food fundraisers per year, passed out of Select committee.

State Revenue/Budget:

HJR 34 Constitutional amendment to limit general revenue appropriations and mandate state income tax rate reductions—passed the House and voted out of committee in the Senate.

Other:

Immunization bills: HB 976 was passed by the House and SB 533 is on the Senate calendar for a vote soon. Both would require day care centers, preschools, and nursery schools to notify parents, upon request, of whether there are any children attending who are not immunized.

Be Aware Of:

- HB 882 Agri-Ready incentives for counties with few regulations and HB 100 pesticide applicator requirements passed the House and were reported Do Pass by the Senate Ag Committee. Senate Committee Substitute language not available online yet, so we don't know what changes were made.
- HB 865 and SB 455 prohibit political subdivisions from raising the minimum wage. Both bills

Tobacco Free Missouri

Linda Cooperstock, MPH

Mission: Tobacco Free Missouri will work statewide to reduce tobacco use and eliminate secondhand smoke for all Missourians through education and policy change.

Surgeon General's Comments

In his commissioning speech, Surgeon General Vice Admiral Vivek H. Murthy, MD made the following remarks related to tobacco. He indicated he would like to see tobacco-free campus policies for:

- every college and university
- for federal campuses
- for public housing

Further, he called on leaders in sports and entertainment to follow Disney's example in eliminating smoking from movies intended for children.

Tobacco Related Bills

HB 531 would require child-proof packaging for e-juice – the toxic nicotine liquid, sold separately, that is used in electronic cigarettes.

SB 276 would designate the 3rd Thursday in November as Great American Smoke Out.

HCR 9 would designate May 31 as Missouri No Smoking/Tobacco Day.

Other News

Farmington, MO city council once again is discussing a smokefree ordinance. It will include E-cigarettes.

Public Hearings will take place May 14 and June 11.

Ten Chicago residents have been indicted in federal court in St. Louis for buying low tax Missouri cigarettes to re-sell in high tax Chicago, reaping millions of dollars.

Previous news stories have told of federal indictments, convictions, etc about smuggling Missouri cigarettes to high tax areas. One such story reported FBI agents arresting a Lebanese national at Lambert airfield with \$400,000 in counterfeit cigarette tax stamps. He admitted he was smuggling cigarettes to raise funds for Hezbollah. This is an example of our low tax being used by terrorist organizations.

The CDC reported e-cigarette use among middle school and high school students has surpassed that of cigarettes. There was no decline in overall tobacco use between 2011 and 2014.



Missouri Legislative Update (continued)

- advanced. These need to be watched.
- HB 1284 Criminalizes drug use during pregnancy passed out of the house committee.
- HB 1305 Establishes legislative “regulatory improvement committee,” voted out of House and referred to committee in Senate
- SB 283 Allows political subdivisions to assign operation of a retirement plan to the Missouri Local Government Employees' Retirement system and passed out of House Select Committee.

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End of Legislative Session Report

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The 2015 session of the Missouri General Assembly came to a close on Friday, May 15, at 6:00 p.m. What a session, and a crazy last week!

The frenetic last week of session started off in the Senate where legislation was impeded due to the Senate filibustering in an effort to pass the Right to Work legislation for Missouri. Basically, the entire session came to a standstill with the Senate stopping debate on a 19-14 vote ending the filibuster. Right to Work was passed on a 20-14 margin. However, most legislation stalled and was not addressed in the last week. The Governor will veto the legislation. The capitol was packed with unions throughout the week. The filibustering continued on Federal Reimbursement Allowance provider tax that brings in \$3+ billion to the state. FRA passed in the Senate last minute with a 30-0 vote.

Things got even more hectic when the Speaker of the House John Diehl resigned due to "INTERNGATE", which involved suspicious relations between the Speaker and a 19 year old collegiate intern. The situation necessitated the election of a new Speaker of former Majority Leader, from Poplar Bluff, Todd Richardson. Former Speaker John Diehl's released the following statement:

"In my time in the General Assembly, I am proud of my long legislative legacy that was built upon being honest with members and doing what is in the best interest of our caucus and this body. I am proud to have led us to the largest Republican majority in state history, the first income tax cut in nearly one hundred years, and an override of the governor's veto of Missouri's redistricting map. I have acknowledged making a

serious error in judgment by sending the text messages. It was wrong and I am truly sorry. Too often we hear leaders say they're sorry, but are unwilling to accept the consequences. I understand that, as a leader, I am responsible for my actions and I am willing to face the consequences.

I appreciate those who have stood beside me and the overwhelming number of caucus members that have offered continued support, but for the good of my party, the caucus, and this state, I'm not going to further jeopardize what we have accomplished this year and what can be accomplished in the future. Therefore, I will be resigning the position of Speaker of House and the office of State Representative in a way that allows for an orderly transition.

Gov. Jay Nixon issued the following statement in response to Diehl's resignation:

"Missourians deserve elected officials who reflect their values and comport themselves to the highest standards of integrity. Rep. John Diehl's resignation from the position of speaker and state representative is an appropriate and necessary step. Our thoughts go out to the families who have been affected by the speaker's conduct. I look forward to working with the next speaker to restore the public trust and continue building a brighter future for our state."

As a result of these developments, the General Assembly gave approval to the lowest number of bills in recent history. This was not necessarily a bad development when thinking back to last year, when, in the final hours, the General Assembly passed \$600 million dollars in sales tax exemptions.

There were a total of 131 bills passed this session, 76 House Bills and 55 Senate Bills. This is unusual as compared to the usual 150-200. The budget is up 7% at this time and that bodes well for next session. Final recap of legislative activities for MOALPHA included:

Administration and Personnel

HB 112 provides that certain licensing boards of health care professionals may contract with entities to collect workforce data from their licensees. The bill was set on the Senate Calendar, but was never laid out for consideration. <http://www.house.mo.gov/billtracking/bills151/sumpdf/HB0112P.pdf>

SB 266 prohibits municipalities from providing certain services already being provided within the boundaries of the municipality without a vote of the people. The bill was set on the Senate Calendar but was not laid out for consideration. <http://www.house.mo.gov/billtracking/bills151/sumpdf/HB0226I.pdf>

SB 283 allows political subdivisions to assign operation of a retirement plan to the Missouri Local Government Employees' Retirement System and modifies provisions relating to the Police Retirement System of the City of St. Louis. The bill went to a Conference Committee but the Senate and House did not adopt the Conference Committee Report. <http://www.house.mo.gov/billtracking/bills151/sumpdf/HB0283I.pdf>

Agriculture

SB 131 modifies provisions relating

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End of Legislative Session Report continued

to weight limitations on vehicles hauling certain agricultural products. The bill was third read and passed in the House. Two floor amendments were adopted in the House; one amendment contained the honey bill language, and the other amendment contained language on agri-ready. The bill could not be sent back to the Senate for approval because of the filibuster during the last week of session. http://www.senate.mo.gov/15info/BTS_Web/Summary.aspx?SessionType=R&SummaryID=711&BillID=317

HB 1094 specifies that the Department of Agriculture shall have the authority to regulate agricultural deer. The bill was passed out of House Select Committee but was never set on the House Calendar. <http://www.house.mo.gov/billtracking/bills151/sumpdf/HB1094C.pdf>

HB 1096 allows for the slaughter and processing of captive cervids for human consumption at facilities inspected by the USDA or Department of Agriculture. The bill was set on the House Calendar but was never brought up for floor debate. <http://www.house.mo.gov/billtracking/bills151/sumpdf/HB1096C.pdf>

Budget and Funding

House Budget Chair Representative Flannigan and Senate Appropriations Chair Senator Schaefer kept the \$3.3 million GR figure for local public health core funding. Given the vast cuts across the Department of Health and Department of Social Services budget it is very pleasing to see this remain at the current levels. The \$615 million cuts for managed care were not applied to the core public

health funding.

FQHC funding remained at 6.1 million after the Senate added an additional 700,000.

In April, FQHC grants amounted to 2.18 million of the Governor's 43 million dollar release of withheld funds from the 2015 budget.

A big success was that \$14,853 in GR was added to draw down \$2.336 million in federal funds for the Division of Community and Public Health Adolescent Health Programs the \$14,853 was left out of the House Budget recommendation. The funding provides for faith based abstinence education and personal responsibility education. "THANK YOU for all your contacts!!!"

HJR 34, which is a constitutional amendment to limit general revenue appropriations and mandate state income tax rate reductions, passed out of committee in the Senate and was set on the Senate Calendar but was never brought up for a third reading. <http://www.house.mo.gov/billtracking/bills151/sumpdf/HJR0034P.pdf>

SB 18 requires the Department of Revenue to notify sellers if there is a change in sales tax law interpretation. The bill was truly agreed to and finally passed. http://www.senate.mo.gov/15info/BTS_Web/Summary.aspx?SessionType=R&SummaryID=464&BillID=44. The numerous sales tax exemptions were not passed at the last minute this year.

Collaborative Practice Arrangements

HB 633 and SB 415 revise standards for collaborative practice arrangements between advanced

practice registered nurses and physicians. SB 313 and HB 720 allow advanced practice registered nurses to prescribe Schedule II controlled substances with certification. These bills did not pass

Communicable Disease Control

HB 976 modifies provisions relating to children, including immunization, amino acid-based elemental formula, court orders, juveniles with problem sexual behavior, safe sleep protocols, and the Children's Services Fund. The bill was set on the Senate Calendar but was never laid out for consideration. <http://www.house.mo.gov/billtracking/bills151/sumpdf/HB0976P.pdf>

SB 533 requires day care centers, preschools, and nursery schools to notify parents, upon request, of whether there are any children attending who are not immunized. The bill was set on the House Calendar and was not laid out for consideration. http://www.senate.mo.gov/15info/BTS_Web/Summary.aspx?SessionType=R&SummaryID=7185756&BillID=4627068

County Health Center Boards

SB 553 (Munzlinger) removes the ability for local public health boards and departments to promulgate ordinances and not receive approval. All authority to call for quarantines and other health decisions would have fallen on county commissioners taking away local control. The bill was never voted out of committee. http://www.senate.mo.gov/15info/BTS_Web/Summary.aspx?SessionType=R&SummaryID=721&BillID=4721665

Death Certificates

SB 517 (Wasson) modifies death

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End of Legislative Session Report continued

certification laws to include physician assistants. The bill was set on the House Calendar but was not brought up for consideration. SB 517 language was added to HB 618, which was truly agreed to and finally passed.
http://www.senate.mo.gov/15info/BTS_Web/Summary.aspx?SessionType=R&SummaryID=7285849&BillID=4601674

HB 1113, which changes the law regarding death certificates, passed out of the House Select General Laws but was not set on the House Calendar.
<http://www.house.mo.gov/billtracking/bills151/sumpdf/HB1113C.pdf>

Disease Prevention & Health Promotion

HB 119 requires a public water system to notify the Department of Natural Resources, the Department of Health and Senior Services, and its customers at least 30 days prior to a vote to cease fluoridation. The bill passed out of Senate Committee and was set on the Senate Calendar, but never was brought up for a third reading.
<http://www.house.mo.gov/billtracking/bills151/sumpdf/HB0119P.pdf>

Eating Disorders

Senate Bill 145 (Pearce) after seven years received approval and is on its way to the Governor. This act requires health benefit plans delivered, issued for delivery, continued or renewed on or after January 1, 2017, in accordance with current law requirements for coverage of mental health disorders, to provide coverage for the diagnosis and treatment of eating disorders. The act further requires that the provided coverage include a broad array of specialist services as

proscribed as necessary by the patient's treatment team. Coverage under this act is limited to medically necessary treatment and the treatment plan must include all elements necessary for a health benefit plan to pay claims. Under the act medical necessity determinations and care management for the treatment of eating disorders shall consider the overall medical and mental health needs of the individual with the eating disorder and shall not be based solely on weight. Coverage may be subject to other general exclusions and limitations of the contract or benefit plan not in conflict with the act. http://www.senate.mo.gov/15info/BTS_Web/Summary.aspx?SessionType=R&SummaryID=7392562&BillID=134952

Environmental Health

HB 897 changes the laws regarding inspections of certain nursing facilities. The bill was never voted out of the House Select Committee to which it was referred.
<http://www.house.mo.gov/billtracking/bills151/sumpdf/HB0897C.pdf>

HB 92, which changes the definition of "waters of the state", was truly agreed to and finally passed. There were senate amendments added to the bill regarding a state and oil gas council and solid waste management auditors. The bill contains a provision about Sulfur Dioxide Air Quality that requires any owner of a coal-fired electric generating source in a one-hour sulfur dioxide National Ambient Air Quality Standards nonattainment area currently designated as of April 1, 2015, to develop an ambient air quality monitoring or modeling network to characterize the sulfur dioxide air quality surrounding the source.

<http://www.house.mo.gov/billtracking/bills151/sumpdf/HB0092T.pdf>

HB 100 Changes the laws regarding financial responsibility requirements for certified commercial pesticide applicators. The bill was set on the Senate Calendar but was never laid out for consideration.
<http://www.house.mo.gov/billtracking/bills151/sumpdf/HB0100P.pdf>

HB 882 establishes the Agri-Ready County Designation Program. The bill was set on the Senate Calendar but was never brought up for a debate. There was no CAFO language attached. HB 882 was added to SB 131 which failed to receive debate. Link to bill: <http://www.house.mo.gov/billtracking/bills151/sumpdf/HB0882P.pdf>.

Ethics

SB 11 modifies the law relating to the ethical behavior of public officials and lobbyists has had a Conference Committee has been appointed. The long promises bill died on the calendar. It would have prohibited the legislators to lobbyist revolving door.. http://www.senate.mo.gov/15info/BTS_Web/Bill.aspx?SessionType=R&BillID=20.

Federal Reimbursement Allowance (FRA)

The Healthcare Provider Tax is extended for one year only. This tax on hospitals, pharmacies, managed care and others is utilized to draw down a 2-1 match from the federal government. The Senate played with the legislation till 3pm on the last day. If it had not passed the state would have encountered a \$3 billion gap in funding.

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End of Legislative Session Report continued

Food Safety

SB 500, the honey bill, unfortunately passed in the last two hours. It had several amendments added in the House and Senate versions. On the last day the amendments were “stripped” and the legislation was passed in the House before the 6:00 p.m. adjournment. During the session, we contacted Representative Hinson. Representative Houghton emphasized what a “sweet deal” this was for Missouri. Basically, the House was laughing that this legislation ended up as a priority for the House. It was a difficult one to utilize our favors on this bill. Captive deer and ethanol production language was removed. http://www.senate.mo.gov/15info/BTS_Web/Summary.aspx?SessionType=R&SummaryID=6582907&BillID=4498105

HB 479 exempts data collected by state agencies under the federal Animal Disease Traceability Program from disclosure under Missouri's Sunshine Law. The bill was referred to Senate Committee but never had a hearing. <http://www.house.mo.gov/billtracking/bills151/sumpdf/HB0497C.pdf>

HB 1111 modifies state provisions regarding the federal Smart Snacks Nutrition Standards program. The Bill passed out of the House Select Social Services but was not set on a House Calendar. <http://www.house.mo.gov/billtracking/bills151/sumpdf/HB1111C.pdf>

Healthcare

SB 63 establishes a Prescription Drug Monitoring Program. The bill was set on the house Calendar but was not laid out for discussion. <http://www.senate.mo.gov/15info/>

[BTS_Web/Summary.aspx?SessionType=R&SummaryID=7082347&BillID=156](http://www.senate.mo.gov/15info/BTS_Web/Summary.aspx?SessionType=R&SummaryID=7082347&BillID=156)

SB 230 specifies eligible health care providers and originating sites for the provision of telehealth services. The bill was set on the Senate Calendar, but did not get laid out for discussion.

http://www.senate.mo.gov/15info/BTS_Web/Summary.aspx?SessionType=R&SummaryID=6676434&BillID=1123104

SB 107 Modifies provisions relating to various regulated professions, proprietary schools, the creation of the Missouri Health Information Exchange Commission and the Perinatal Advisory Council, gender pay equality, and the Crime Victims' Compensation Fund.

http://www.senate.mo.gov/15info/BTS_Web/Summary.aspx?SessionType=R&SummaryID=7303456&BillID=231

Maternal and Child Health

SB 427 mandates the establishment of safe sleeping protocols in childcare facilities providing care for children less than one year of age. The bill was set on the Senate Calendar but was never laid out for consideration.

http://www.senate.mo.gov/15info/BTS_Web/Summary.aspx?SessionType=R&SummaryID=1142926&BillID=3203591

HB 1284 creates the crime of abuse of an unborn child for a person who illegally uses narcotic drugs while pregnant and such use results in harm to the child. The bill was referred to the House Select State and Local Government Committee but never had a public hearing.

<http://www.house.mo.gov/billtracking/bills151/sumpdf/HB1284C.pdf>

HB 1268 establishes the Early Childhood Health and Education Act. The bill passed out of the Select Social Services Committee, but was never set on the House Calendar. <http://www.house.mo.gov/billtracking/bills151/sumpdf/HB1268C.pdf>

Medical Education

HB 867 creates various initiatives to assess the incidence of depression in medical students and promote awareness of suicide among medical students.

Medical School

\$10 million was obtained for the Springfield Medical School Teaching Facility in coordination with MU. In addition, \$1.35 million was added for the Occupational Therapy School in Springfield.

Nursing Practice & Clinical Issues

HB 633 changes the laws regarding collaborative practice arrangements between advanced practice registered nurses and physicians. The bill was referred to House Select Committee on General Laws but never had a hearing. <http://www.house.mo.gov/billtracking/bills151/sumpdf/HB0633C.pdf>. It was amended onto HB 709 and SB 107 which were truly agreed to and finally passed.

Pediatric and Obstetrical Care

HB 735 and SB 342, which created a Perinatal Advisory Council to develop recommendations to define neonatal and maternal care regions in the state and standards for the delivery of perinatal care, did not pass.

HB 217, which changes standards defining medical neglect of children to exclude instances in which a parent is following a prescribed

(Continued on page 11)

End of Legislative Session Report continued

course of treatment for the child, did not pass.

HB 1315, which adds severe combined immunodeficiency to the list of diseases for which a screening test will be done using a newborn blood sample, did not pass.

Practitioner Licensure

HB 521 creates a licensure process for midwives. HB 671 and SB 400 prevent state medical licensure standards from compelling specialty board certification. None of this legislation passed.

Prevailing wage

HB 195, which changes the laws regarding the prevailing hourly rate of wages, is set on the House Calendar. Link to bill: <http://www.house.mo.gov/billtracking/bills151/sumpdf/HB0195C.pdf>. This bill never moved this year.

Public Safety and Protection

HB 523 exempts motorcyclists 21 years of age or older from wearing a helmet when operating a motorcycle or motor-tricycle if they have the appropriate health insurance coverage. The bill was set on the Senate Calendar and was never brought up for consideration. The Governor would have vetoed the bill had it been passed. <http://www.house.mo.gov/billtracking/bills151/sumpdf/HB0523P.pdf>

HB 450 prohibits anyone from sending, reading, or writing a text message while operating a motor vehicle. The bill was referred to the House Select Committee but never received a hearing. <http://www.house.mo.gov/billtracking/bills151/sumpdf/HB0540C.pdf>

HB 501, which requires course

materials relating to sexual education to contain information regarding sexual predators, online predators, and the consequences of inappropriate text messaging, was truly agreed to and finally passed. <http://www.house.mo.gov/billtracking/bills151/sumpdf/HB0501T.pdf>

HB 531 requires liquid nicotine products to be sold in child-safe packaging. The bill was truly agreed to and finally passed. <http://www.house.mo.gov/billtracking/bills151/sumpdf/HB0531T.pdf>

Private Physicians

HB 769 allows for direct primary health care services to be provided through a medical retainer agreement between the physician and patient. The bill was truly agreed to and finally passed. <http://www.house.mo.gov/billtracking/bills151/sumpdf/HB0769T.pdf>

Regulations

HB 1305 establishes the regulatory improvement commission to evaluate and provide recommendations for modification, consolidation, or repeal of regulations. The bill was set on the Senate Calendar but was never laid out for consideration. <http://www.house.mo.gov/billtracking/bills151/sumpdf/HB1305P.pdf>

Right to Work

HB 116, which prohibits an employer from requiring a person to become a member of a labor organization as a condition or continuation of employment, has passed in both houses and will likely be vetoed by Governor Nixon. Link to bill: <http://www.house.mo.gov/billtracking/bills151/sumpdf/>

HB0116T.pdf.

Truly Agreed to and Finally Passed Legislation

Medical Liability/ Tort Reform

SB 239 limits noneconomic damages in medical liability lawsuits to \$700,000 for all defendants when the injury involves death or catastrophic personal injury or \$400,000 for other types of injury. A 2012 court ruling invalidated a limit of \$350,000. The bill also adjusts the caps on noneconomic damages in medical liability lawsuits annually by 1.7 percent, and replaces English common law with a separate statutory authority as the basis for medical malpractice liability lawsuits, enabling statutory limits on noneconomic damages. Link to bill: SB 239

Statewide Managed Care for Medicaid

HB 11 authorizes the creation of a task force of legislative appointees representing providers, payers and consumers to develop a strategy for implementing Medicaid managed care. In addition, HB 11 removes the use of \$67 million in Federal Reimbursement Allowance funds to expand the scope of Medicaid managed care, eliminating their significant diversion away from hospitals

Insurance Networks

HB 11 also requires that practitioners who meet the National Committee for Quality Assurance credentialing criteria and are willing to treat Medicaid patients at Medicaid fee-for-service payment rates be allowed to participate in networks of Medicaid managed care plans

FRA

SB 210 reauthorizes the hospital

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End of Legislative Session Report continued

Federal Reimbursement Allowance and other state provider taxes for one year, to September 30, 2016.

SB 210 also allocates \$614 million to fund Medicaid coverage of children and low-income parents in regions currently with no Medicaid managed care. Coverage may be provided through fee for-service or managed care models, but managed care is to be implemented in those regions by June 2016, the last month of state fiscal year 2016. This is expected to involve a rebidding of all Medicaid managed care vendor contracts.

Lastly, SB 210 also requires the Missouri Medicaid Audit and Compliance Unit to give affected providers advance notice of changes in its interpretations or applications of Medicaid payment and auditing standards

APN's

HB 709 authorizes trained advanced practice registered nurses to prescribe the Schedule II controlled substance hydrocodone under the auspices of a collaborative practice arrangement

Private Physicians

HB 769 Defines and sets standards for medical retainer agreements, in which an individual contracts with a physician or physician group for access to, and delivery of, specified health services for a fee and duration set by the contract. Medical retainer agreements will not be regulated as insurance.

Welfare Cutbacks

SB 24 reduces the maximum duration of welfare payments under the Temporary Assistance for Needy Families program, ends the state's waiver of work requirements for those receiving benefits under the

Supplemental Nutrition Assistance Program, directs that savings from benefit restrictions for the TANF and SNAP programs will be used to provide child care assistance for single parents, education assistance, transportation assistance and job training, and authorizes short-term cash assistance payments for TANF recipients that are exempted from TANF lifetime benefit limits.

The Governor vetoed the bill, but the veto was successfully overridden.

Practitioner Licensure

SB 107 and HB 709 authorize most health-related occupational and professional licensure boards to issue advisory opinions regarding licensure issues. The opinions are not binding and cannot be used in disciplinary actions.

SB 107 revises licensure standards for speech-language pathologists

Water

HB 1058 modifies provisions of the Missouri clean water law. The bill was set on the Senate Calendar but was never laid out for consideration. <http://www.house.mo.gov/billtracking/bills151/sumpdf/HB1058P.pdf>

SB 358 modifies the policy statement of the Missouri Clean Water Law. The bill was set on the Senate Calendar and was never brought up for consideration. http://www.senate.mo.gov/15info/BTS_Web/Summary.aspx?SessionType=R&SummaryID=411&BillID=2113421

Conclusion

The Missouri General Assembly had one of the more "unique" sessions this year. The Auditor's office, resignations of a Speaker, Right to Work filibuster and election of a new Speaker were just a few developments. Ferguson dominated the session early and the legislature adjourned early. Interim committees on managed care and education will begin shortly in preparation for the next round.



Coverage from the Region VII Public Health Affiliates Annual Meeting (page 13) held in Columbia, MO on May 18-19, 2015.

Region VII Public Health Affiliates Annual Meeting

Denise Strehlow and Linda Cooperstock

The Region VII Public Health Affiliates (MINK) annual meeting was held in Columbia MO on May 18-19 of this year. Representatives from Missouri, Iowa, Nebraska, and Kansas public health associations joined other public health passionate in an invigorating time of "Doing Our Part to Create the Healthiest Nation."

One of the highlights was an insightful presentation by Joyce Gaufin, Past President of American Public Health Association (APHA.) She illustrated the modern challenges facing public health including engaging businesses in public health, changing the paradigm from "public" to "population" health, and learning how to tell stories to vividly make our points. She introduced a term, "imagineer" that while new to us, was the mainstay of Walt Disney's strategy of transforming his industry. Disney surrounded himself with people of imagination, vision, and skills to create a product that would awe his audience. We might consider using similar people to improve our public health product/services.

Traci Kennedy, from Americans for Nonsmokers' Rights, and formerly the executive director of Tobacco Free Missouri enlightened us about the need for policies to control the malignant (pun-intended) metastasis of trendy nicotine delivery devises. E-cigarettes and all their cousins are insidiously reversing the progress to generate a social norm of breathing unadulterated, real air. She described the frustration with the Food and Drug Administration's (FDA) delay in issuing regulations for e-cigs as tobacco products so that they can be tested, evaluated, and

standardized for ADULT, not children's use. Most people, including users, assume they are safe because they are not burning tobacco leaves and creating smoke. However, what is not clear enough to proponents, or even neutralists, is that it cannot be said that they are safe. Most are from unknown production sources, mostly China, that do not control ingredients. Many have been found to produce toxic gases, not just water vapor. Most contain nicotine, even those that may be sold as "non-nicotine" flavored. And in all cases - those with nicotine bear the inherently addictive key ingredient that the tobacco industry uses to lure, trap, and ensnare unsuspecting children into a lifelong death camp of tobacco use. Children are starting to use e-cigs because they think e-cigs are safe. The smoking rate of high school students, which has been steadily declining or leveling is now increasing again. Many kids use e-cigs along with cigarettes and it's the nicotine that can exert a powerful, early influence on young brains.

The positive point is that most new, and many revised indoor smoke free policies are now including a restriction on use of e-cigarettes. New tobacco-21 sale policies are including e-cigs to prevent highschoolers from getting hooked.

Another highlight was a presentation by Jon Stemmler, assistant professor of strategic communication at the Missouri School of Journalism. Jon sailed us through the topic of messaging including the many facets of social media use. The audience learned about effective use of Vines (6-second video message), meme generators (humorous short text

with a message), and storytelling to get us out of the box of the staid, often ineffective old school of public health information delivery. He described the interesting technique of using 2 concepts that people understand - to produce a message. An example is using the movies themes in *Jaws* and *Star Wars* to produce the more modern movie, *Alien*. We in public health need to use concepts that people understand to produce a message they will "get."

Panel discussions were held around three topics: climate change and other challenges facing the region, e-cigarettes and policy challenges and public health messages. The panelists from each state presented their examples, successes, and lessons learned. The audience reacted with very good questions, leading to an excellent exchange of ideas.

Generous support from Missouri Foundation for Health contributed to the success of this conference. Missouri Public Health Association was recognized for its contribution of time and talent in hosting this meeting as was University of Missouri for the great facility. Forty-two participants attended on the first day and thirty-two attended on second day.

MINK will be held in Omaha, Nebraska in 2016.

Affiliate Representative to the Governing Council (ARGC)

Denise Strehlow, RD, LD, MPH, MSW

BJC School Outreach and Youth Development

Missouri Affiliate Representative to the Governing Council (MO ARGC)



APHA’s Region VII Affiliate Representatives (MINK-Missouri, Iowa, Nebraska, Kansas) meet monthly via conference call. Here is the update from the most recent conference calls:

- Members of the Midwest Public Health Training Center at the University of Iowa provided an overview of the training center and opportunities for partnering. HRSA did some restructuring and began funding one training center per region. Each state has a lead contact person for the regional public health training program. The MPHTC launched the MPHTC website in conjunction with NPHW 2015 and will be adding resources to the website from each state. Each state has a learning management system. Our region (Region VII) has some strengths over other regions as we have collaborated on funding proposals and the MINK annual meeting. The affiliate annual conferences are opportunities to connect MPHTC and affiliates.

- APHA continues to develop the student liaison program which has been in progress for a number of years. Each University would have a campus representative and then each region would have a representative. Eldonna (Kansas) is working on a plan to establish the student liaison program for affiliates and seeking to pilot the student liaison program. Nebraska and Kansas both have student sections. Missouri and Iowa have student members but not a student section.
- Shirley (Iowa ARGC) discussed the APHA delegation to Cuba. Region VII had four representatives on the delegation. Cuba has an integrated public health and health care system. Challenges exist for professionals in Cuba with limited resources and cancelling of procedures due to lack of supplies i.e. no gloves available.
- Missouri, Iowa, Nebraska and Kansas are all experiencing challenges with legislative issues, advocacy and education efforts.
- MINK annual meeting scheduled for May 18 and 19 with Joyce Gaufin starting the meeting with an overview of public health challenges and opportunities. Traci Kennedy discusses “Tobacco and e-cigarette Policy Challenges” challenges and Jon Stemmler discusses “Messaging for the Public”. Hope to see you in Columbia.

Northwest Chapter Report

Kathleen Welton

The North West Chapter of Missouri Public Health Association has been very active since it reorganized two years ago. New officers for 2016-2018 are:

- President – Dan Luebbert, Platte County HD
- Vice-President (Programs) – Bridgette Casey, Jackson County HD
- Secretary – Marty Galutia, Kansas City HD
- Treasurer – Amanda Grodie, Jackson County HD.

Meetings were set up quarterly on the second Tuesday of January, April, July & October starting at 11 AM at the Ennovation Center (former Independence Regional Health Center), 201 North Forest Avenue #130, Independence, MO 6405.

Program topics have been “PechaKucha” presentation style with Alicia Nelson, Independence Health Department with Nathan Matney’s demonstration on “Building a Healthier Independence” including “The Mile Starts Here” walking program. Joanie Stover presented on “Community Gardens”. Bert Malone provided an update on the status of “Medicaid Expansion in MO”. Russ Tuttle from Stop Trafficking Project spoke on sex trafficking myths, questions to ask in clinical settings as well as KC Street Hope and it’s work with domestic minor sex trafficking.

The next quarterly meeting will be July 14, 2015 11:30 PM at Ennovation Center.

Creating Pathways to a Healthier Missouri

September 22-24, 2015
Stoney Creek Inn ~ Columbia, MO

Preliminary Agenda

Presented by MPHA, MoALPHA, MALBOH, MICH and MoDHSS



General Session Speakers

Include

*LaMar Hasbrouck, MD, MPH, Executive Director,
National Association of County and City Health Officials*
“NATIONAL ISSUES IMPACTING LOCAL PUBLIC HEALTH”

The new NACCHO Executive Director will share the latest information about the challenges facing the US public health system, and the role of local public health officials in creating a healthier nation.

*Thomas McAuliffe, MA, Director of Health Policy,
Missouri Foundation for Health*
“POLICY DEVELOPMENTS IN HEALTH CARE ACCESS”

Access to health care has a big impact on the health of Missourians. Learn about the latest policy developments at the state and national levels and how they affect our communities.

*Kathleen Holmes, MPH, RN, Program Director, Infant Mortality Reduction Initiative,
Missouri Foundation for Health*
“CATALYZING SYSTEM CHANGE THROUGH COMMUNITY-WIDE COLLABORATION”

Using current examples of community collaborative efforts aimed at decreasing infant mortality rates, Ms. Holmes will increase participants’ understanding of a structured approach to addressing complex community health issues.

*Amy Dunaway, Co-Director, Health Communication Research Center,
University of Missouri School of Journalism*
“MARKETING PUBLIC HEALTH”

Foundation Scholarships

The MPHA Education Foundation awards four scholarships annually to Missouri public health professionals, students and local public health agencies. Scholarship applications are due no later than September 1st, and will be awarded at the annual public health conference in September. The following information provides a brief overview of each scholarship. Please go to <http://www.mopha.org/scholarships-awards.php> for details, applications and eligibility requirements.



Established in 1995, the Education Foundation receives funds that promote a higher awareness and knowledge of public health, to educate public health professionals, community leaders, and communities about public health issues, and to honor Missouri public health leaders by awarding scholarships in their name. In addition to giving scholarships, the Foundation supports awards to public health professionals and students, as well as educational programs to promote quality public health for Missouri.

Edna Dell Weinel Scholarship

Edna Dell Weinel Scholarship provides the opportunity for practicing public health professionals to participate in this lifelong learning process. This scholarship, the value of which is dependent upon the request and need of the applicant(s), not to exceed \$750, is available for public health workers to develop in their profession through educational meetings, professional credentialing, seminars or through traditional academic course work.

Leuthen – Brunner Local Public Health Agency Scholarship

Leuthen–Brunner Local Public Health Agency Scholarship grant honors Ron Leuthen and Phil Brunner, former MPHA members who worked tirelessly to advance local public health in Missouri. This award is designed to assist local public health agencies towards voluntary accreditation through Missouri Institute for Community Health or National Public Health Accreditation Board. This is a one-time grant for local public health agencies. The \$750 scholarship will be awarded at the annual MPHA Meeting.

Jackie Liesemeyer Nursing Scholarship

Jackie Liesemeyer was a Community Health Nurse who worked for more than 20 years in various positions in the Central District Office of the Missouri Department of Health. Jackie’s spirit of independence and self-reliance was reflected in her approach to her clients, individuals, program representatives and local health units. She provided the information, support and encouragement that fostered growth and the ability to do for oneself all that was possible in the spirit of community health nursing. Jackie is honored with a \$750 nursing scholarship in her name that will enable others to enhance public health in Missouri. One scholarship is awarded at the MPHA Annual Meeting, usually held in the Fall.

Health Professional Scholarship

The \$750 Health Professional Scholarship is available for a MPHA member who is working on an undergraduate or graduate degree in a public health related field which will further their career. Examples of fields of study include: administration, epidemiology, health education, nursing, health promotion, etc.



Applicants may apply an unlimited number of times for each of our scholarships providing they qualify under the established requirements and have not been a previous recipient. More detailed information can be found on the MPHA website at <http://www.mopha.org/>

MPHA Members

Now in existence since 1925, the Missouri Public Health Association (MPHA) continues to strive to expand our services to meet the needs of public health across Missouri. We hope that you are taking part in one or more of the many events that we are offering in 2015.

It is our mission to be the voice of public health in Missouri through advocacy, membership services and our Education Foundation. In order to meet our mission and provide services in our state, MPHA relies on the generosity of individuals and organizations for support. Without the investment of members like you, MPHA wouldn't be able to continue to be the voice for public health across Missouri.

We are asking you to help us continue the public health message by a donation to MPHA Education Foundation. Every dollar counts in the advancement of public health. If each member would make a donation, imagine the progress and impact we could make in Missouri. Your generosity will make a difference in the future of MPHA by allowing us to continue in our work advancing public health in Missouri. ***The MPHA Education Foundation is a 167 (c) (9) corporation which means that donations to the Foundation are tax deductible.***

Thank you in advance for your generosity.

Sincerely,



Linda Cooperstock
MPHA President

Donating is easier now more than ever. Visit www.mopha.org and click on the Scholarship/Awards tab. Your generous donations will help support educational opportunities for public health professionals and students and promote quality public health for Missouri.



Annual Conference


September 22-24, 2015

Stoney Creek Inn
Columbia, MO



MICH
Missouri Institute for Community Health
Partners for Better Health



 Missouri Association of
Local Boards of Health

MoALPHA
MISSOURI ASSOCIATION OF LOCAL PUBLIC HEALTH AGENCIES

Missouri Public Health Association: Call for Articles

Missouri public health professionals are invited to submit articles for the quarterly newsletter. We welcome submissions on any public health related topic.

Please include the following information with your article submission:

- Name
- Professional affiliation or academic institution (if a student)
- Title of article
- Reference list
- A headshot or photo of you doing public health work

Please keep your article to 300-500 words. All submissions will be reviewed by the Missouri Public Health Association Board. Please email your articles and any questions to Corrie Courtney ccourtney@clayhealth.com and Sandy Boeckman sboeckman@mopha.org.

Three newsletters are released per year. The final newsletter of 2015 will be released in October. The deadline for articles for the next newsletter is October 2, 2015.

2015 Newsletter Schedule

February Newsletter

Article submissions are due by February 13

June Newsletter

Article submissions are due by June 5

October Newsletter

Article submissions are due by October 2

New MPHA Members

Caitlin Sandwell, Missouri State University Student, February 2015

Leigh Tenkku Lepper, University of Missouri, May 2015

Join MPHA

Are you a member of APHA but not currently a member of MPHA? We need your membership to further the message of public health in Missouri. The benefits of being a member of MPHA include:

- Three newsletters a year filled with up-to-date information
- Legislative updates on Missouri issues as well as national topics impacting Missourians
- Annual meeting with other public health professionals
- Statewide network of public health professionals

If you are interested in membership in MPHA, please contact Denise Strehlow at dsl9171@bjc.org, 314-286-0504 or complete the membership form and return to the MPHA office.

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MPHA MEMBERSHIP

YES



I want to help fulfill MPHA's mission to promote health in the State of Missouri

- Regular Membership \$50.00
- Full-Time Student/Retiree \$25.00

I'd Like to make a donation to the MPHA Educational Foundation \$ _____

Name: _____
Agency: _____
Position: _____
Address: _____
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Areas of Professional Interest

- Citizen Health Involvement
- Health Promotion
- Infectious Disease
- Health Official
- Environmental Health
- Other: _____
- Public Health Nursing
- Health Care
- Support Services
- Food and Nutrition
- Chronic Diseases

I'd like to serve on the following committees:

- Education
- Membership
- Annual Meeting
- Resolutions & Bylaws
- Advocacy & Public Policy
- Public Health Week

PAYMENT OPTIONS

- Check enclosed
- Invoice my organization
- Master Card/VISA/Discover

Card # _____ Exp: _____
Mail completed form to MPHA, PO Box 126, Jefferson City, MO 65102. If you have questions call 573-634-7977.