

Evaluation of Montana's Public Health Laws and Alignments with Foundational Public Health Services

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Disclaimer

The Montana DPHHS Public Health System Improvement Office requested and sponsored an operational study to help inform public health decision-makers on ways to improve the public health system in Montana. The analysis and conclusions of the study represent the thoughts of the project group and do not necessarily represent the position or conclusions of the Montana DPHHS.

Acknowledgements

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- Professor Anthony Johnstone and Professor Anna Conley
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Learning Objectives

- Understand the National Public Health frameworks and how they can influence/support state public health laws
- Understand how Montana's public health laws align, support or restrict the Foundational Public Health Services
- Bring awareness to a comprehensive approach that can help support local and state public health infrastructure.

Operational Study - PH System Improvement Task Force

Background Concern among individuals across Montana governmental public health and public health support organizations that the definition of a modern Montana public health system may need to be reinvented. This study will help decision makers understand the extent of problem.

Research Questions

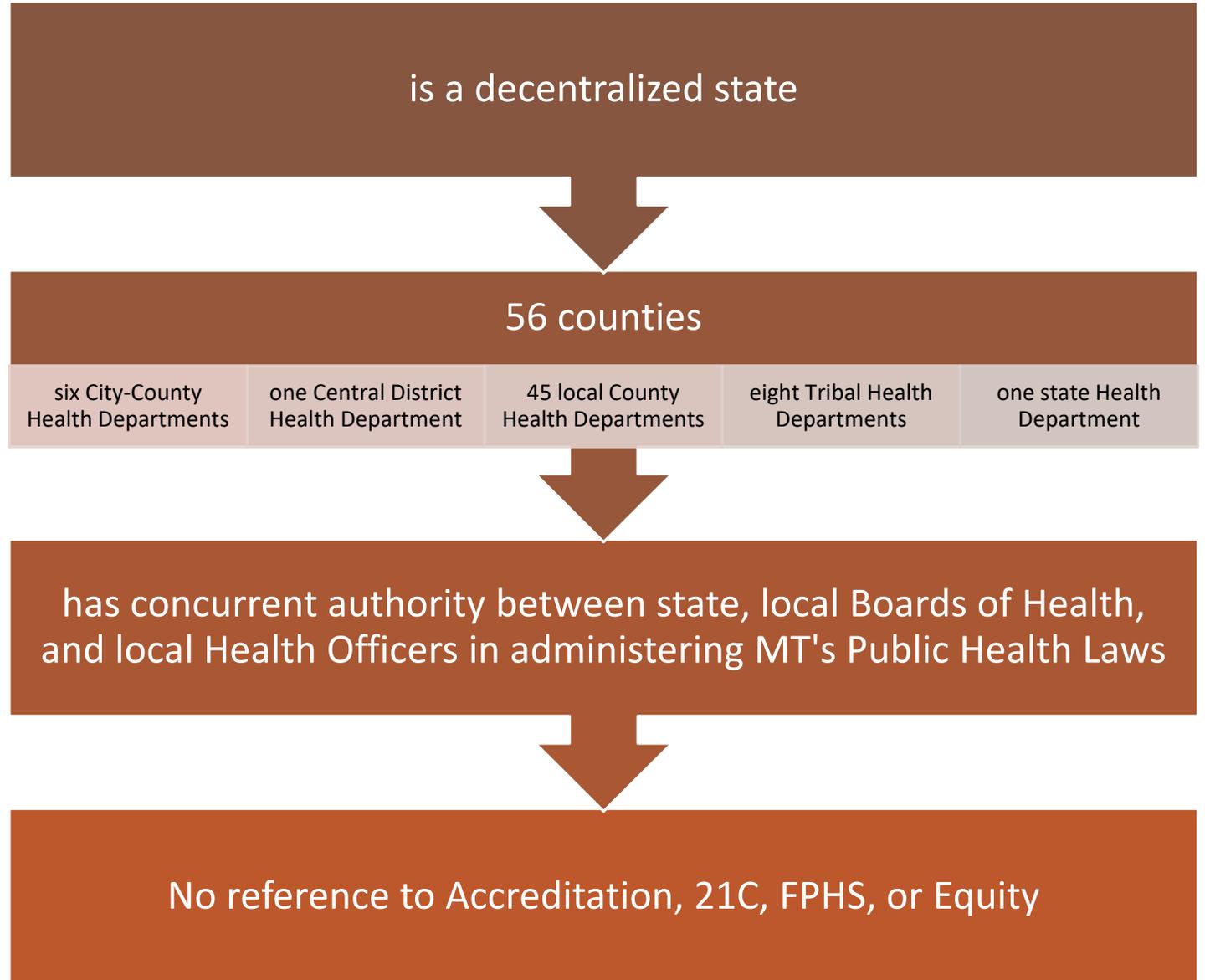
- a. How does our current Montana law align with requirements of the Foundational Public Health Services?
- b. Which state laws are barriers, constraints, or restrictions that could deter or prevent local and tribal health departments from realizing the Foundational PH Services?
- c. Which state laws support or reinforce principles of the Foundational PH Services?

Outcome A paper providing state, local and tribal governmental public health agencies and statewide public support organizations the information to make decisions on ways to improve the public health system. Draft due October 2022, final due December 2022.

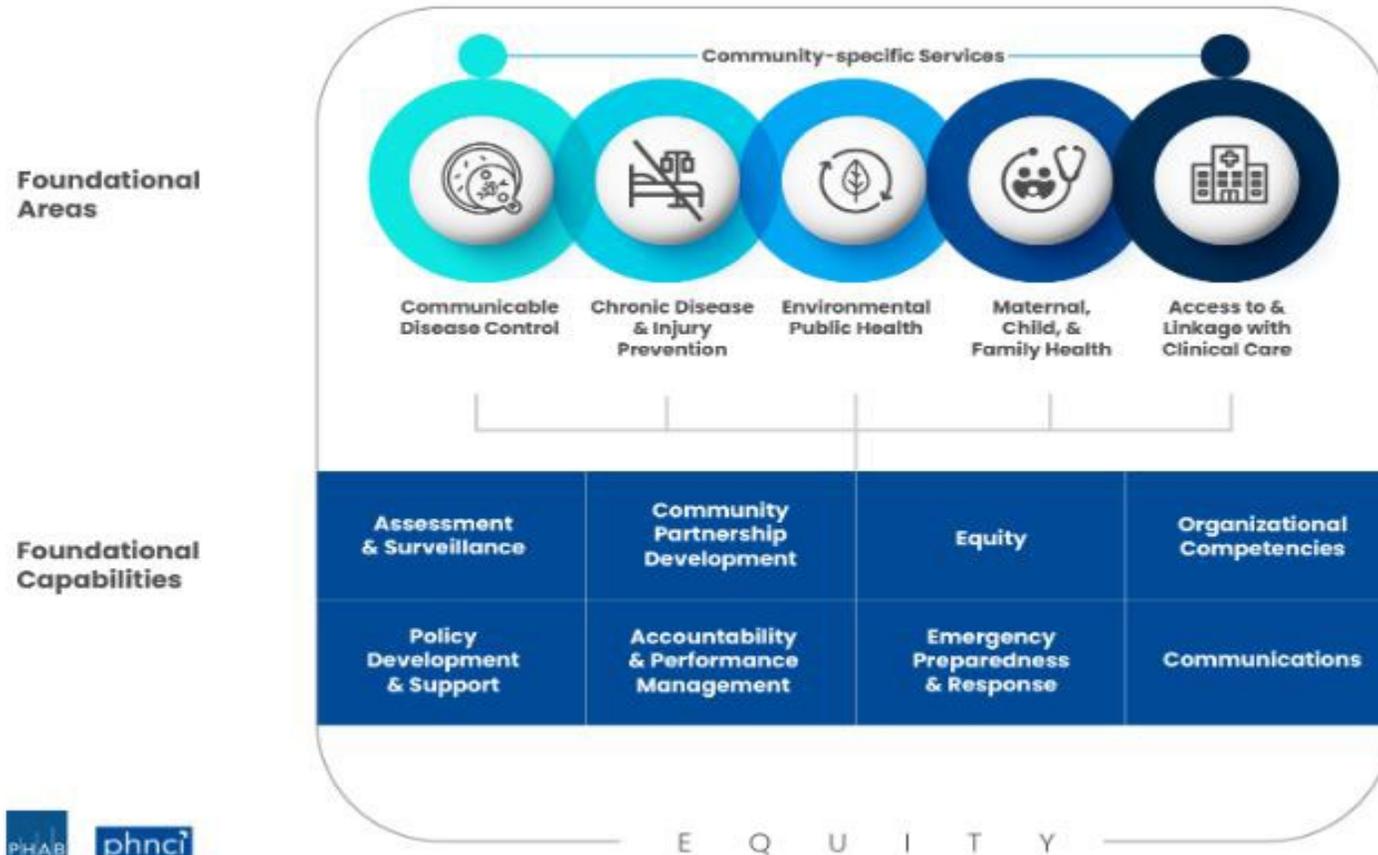
Timeline

1988	1994	2003	2007	2013	2014	2015	2020	2021	2022
<ul style="list-style-type: none">• IOM	<ul style="list-style-type: none">• 10 ESPH	<ul style="list-style-type: none">• TPA	<ul style="list-style-type: none">• PHAB• MT 60th Leg	<ul style="list-style-type: none">• FPHS	<ul style="list-style-type: none">• MT HD x 2 Accred	<ul style="list-style-type: none">• PHAB (10 ESPH + FPHS)• 21CLC	<ul style="list-style-type: none">• 10 ESPH	<ul style="list-style-type: none">• MT 67th Leg	<ul style="list-style-type: none">• FPHS

Montana Landscape



Foundational Public Health Services



General Analysis

50-1-105, MCA Policy – Purpose – applies to all five Foundational Areas

50-1-105(1), MCA – broadly implies FPHS Capability Equity by protecting and promoting the health of the public by respecting individual rights to dignity, privacy, and non-discrimination. However, this is an area to consider revising language to support equity throughout the laws.

50-1-106, MCA Collaboration and Relationships within the public health system, generally supports Foundational Capability Community Partnership Development

50-1-202, MCA, 50-2-116, MCA, and 50-2-118, MCA – General Powers and Duties – generally support the Policy and Purpose

APPENDIX B
Laws and Rules Related to Communicable Disease Control

Foundational Capabilities of Public Health Services	Align (A) Support (S) Barrier (B)	Communicable Disease Control
Assessment & Surveillance	A	50-1-101, MCA , 50-1-105, MCA , 50-1-202, MCA , 50-2-116, MCA , 50-2-118, MCA , 50-17-105, MCA , 50-17-201, MCA , 50-17-202, MCA ARM 37.114.101 , 37.114.201 , 37.114.203 , 37.114.307 , 37.114.308 , 37.114.313 , 37.114.314 , 37.114.315 , 37.114.316 .
	S	50-1-106, MCA , 50-1-203, MCA , 50-1-204, MCA , 50-1-206, MCA , 50-1-210, MCA , 50-2-121, MCA , 50-2-122, MCA , 50-2-123, MCA , 50-2-124, MCA . ARM 37.1.101 .
	B	50-2-116(5), MCA , 50-2-118(2)(b), MCA , 50-2-130, MCA , ARM 37.114.501 .
Community Partnership Development	A	50-1-106, MCA , 50-1-105, MCA , 50-1-202, MCA , 50-2-116, MCA , 50-2-118, MCA .
	S	50-1-117, MCA , 50-2-104, MCA , 50-2-105, MCA , 50-2-106, MCA , 50-2-107, MCA , 50-2-108, MCA , 50-2-109, MCA , 50-2-110, MCA , 50-2-111, MCA , 50-2-112, MCA , 50-2-113, MCA , 50-2-120, MCA . ARM 37.1.101 , ARM 37.2.202 .
	B	50-2-116(4)(5), MCA , 50-2-118(2)(a)(b), MCA .
Equity	A	
	S	50-1-105, MCA , 50-1-202, MCA , 50-2-116, MCA .
	B	
Organizational Competencies <ul style="list-style-type: none"> Leadership & Governance Information Technology Services, including privacy & security Workforce Development & Human Resources Financial Management, Contract, & Procurement Services, including Facilities and Operations Legal Services & Analysis 	A	50-1-101, MCA , 50-1-105, MCA , 50-1-202, MCA , 50-2-116, MCA , 50-2-117, MCA , 50-2-118, MCA , ARM 37.1.101 , ARM 37.2.201 , 37.114.102 , 37.114.201 .
	S	50-1-115, MCA , 50-1-116, MCA , 50-1-117, MCA , 50-1-203, MCA , 50-2-103, MCA , 50-2-104, MCA , 50-2-105, MCA , 50-2-106, MCA , 50-2-107, MCA , 50-2-108, MCA , 50-2-109, MCA , 50-2-110, MCA , 50-2-111, MCA , 50-2-112, MCA , 50-2-113, MCA , 50-2-115, MCA , 50-2-120, MCA , 50-2-121, MCA , 50-2-122, MCA , 50-2-123, MCA , 50-2-124, MCA , 50-2-130, MCA .
	B	50-2-116, MCA , 50-2-118, MCA , 50-2-130, MCA .
Policy Development and Support	A	50-1-101, MCA , 50-1-102, MCA , 50-1-103, MCA , 50-1-104, MCA , 50-1-105, MCA , 50-1-202, MCA , 50-1-204, MCA , 50-1-206, MCA , 50-2-116, MCA , 50-2-118, MCA , 50-2-120, MCA , 50-2-122, MCA .

Foundational Area: Communicable Disease

STRENGTHS:

ARM 37.114 Communicable Disease Control

- Reportable conditions, minimum control measures, current guidelines, Q&I, CI/CT
- Vaccination requirements schools/daycares

CD Epi and PHEP programs

Foundational Area – Communicable Disease

CHALLENGES

HB 702 - Clarification of public health agencies' ability to consider vaccine status when mitigating the spread of communicable diseases through isolation and quarantine measures would be useful

HB257 – prohibits governments from requiring businesses to require mitigating measures (masking, social distancing) and limits authority to issue orders that would interfere with or limit, modify, or abridge a person's attendance at or operation of a religious facility, church, synagogue, or other place of worship

HB 121 – fosters elected accountability to make PH decisions, though without public health expertise. Whereas local BOHs traditionally had the final say after hearing recommendations from expert PH staff

Foundational Area - Communicable Disease

COVID – 19 highlighted several cross-cutting infrastructure issues:

Chronic under-funding/short staffing

Antiquated data collection

Differing data dashboards

Inconsistency between jurisdictions

Foundational
Area –
Chronic Disease
& Injury
Prevention

50-1-101(12), MCA generally supports public health services and functions...

ARM 37.59 WIC

ARM 27.75 Child and Adult Food Care Program

ARM 37.117.101 Tobacco Settlement Account

Traumatic Brain Injury and Controlled Substances

Several programs and initiatives supported by DPHHS

Foundational Area – Environmental Health

Most of Montana's environmental laws align with or support the Foundational Area

General Powers and Duties

Sewage Treatment/removal of filth

Public water supply/systems

School – water and sewage/waste disposal

Prevent/alleviate threats (biological, chemical, radiological)

Ability to make inspections and require action to correct deficiencies

Foundational Area – Environmental Health

CHALLENGES

SB 199 – sale and consumption of homemade food/products without license, permit, certification, or packaging, labeling, or inspection regulations.

Foundational Area – Maternal, Child and Family Health

STRENGTHS

- IZs, perinatal screening/testing, nutrition, tobacco cessation, substance use
- 50-1-202(1)(j-m), MCA – Administration of Public Health Laws, General Powers and Duties...administering rules and setting standards...to protect the health of mothers and children
- 50-19-2, MCA support newborn genetics screening and related services
- 50-19-3, MCA – Montana Initiative for the Abatement of Mortality in Infants (MIAMI project)
- 50-19-3, MCA general guidelines for services/support during/after pregnancy
- 50-19-4, ,MCA Fetal, Infant, Child, and Maternal Mortality Prevention Act (FICMMR)
- ARM 37.57.1001 – MCH Block grant
- 50-19-501, MCA Nursing Mother and Infant Protection
- 50-1-116, MCA – Family Planning Services

Foundational Area – Maternal, Child and Family Health

CHALLENGE

- 50-20, MCA Abortion
 - Regulate medical practice
 - Barrier to reproductive health services
 - PH implications – greater need for public assistance
 - Increased mortality rates

Foundational
Area –
Access to &
Linkage with
Clinical Care

Areas that Support or Align:

- Title 50, Chapters 4, 5, 6, 8, 12, 16 – licensure, monitoring, discipline of healthcare providers, rules and minimum standards for healthcare facilities
- Title 33 covers the role of insurance companies
- Title 52 – Family Services
- Title 53 – Social Services and Institutions

Foundational
Area –
Access to &
Linkage with
Clinical Care

In general, laws are missing language that supports equity standards, training, or accountability for employees and programs, or the quality of services received.

Limitations

- May be missing state public health laws
- While trying to categorize objectively, there is subjectivity
- Does not include Tribal-specific or local government specific rules or laws
- Unable to say whether the Foundational Areas are available in every community in Montana

Findings



Evidence that portions of the five FPHS Foundational Areas and the eight FPHS Capabilities are noted throughout



Strengths



Challenges

Discussion



MODERNIZE PUBLIC
HEALTH LAWS



COMMUNITY
ENGAGEMENT &
PARTNERSHIPS



WORKFORCE



DATA AND
INFORMATION
TECHNOLOGY



FINANCING



HEALTH EQUITY

