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CALIFORNIA DEPARTMENT OF PUBLIC HEALTH
PREVENTIVE HEALTH AND HEALTH SERVICE BLOCK GRANT (PHHSBG)
PUBLIC HEARING

CALIFORNIA DEPARTMENT OF PUBLIC HEALTH
KINGS RIVER CONFERENCE ROOM
1616 CAPITOL AVENUE
SACRAMENTO, CALIFORNIA

FRIDAY, JUNE 1, 2018
10:00 A.M.

Reported by: PHYLLIS MANK, CSR No. 5093

APPEARANCES

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STAFF:

Anita Butler, Block Grant Coordinator

Hector Gardia, Block Grant Administrator

Matthew Herreid, Block Grant Fiscal Lead

1 SACRAMENTO, CALIFORNIA

2 FRIDAY, JUNE 1, 2018

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4 BLOCK GRANT COORDINATOR BUTLER: Good morning,
5 everyone. My name is Anita Butler of the California
6 Department of Public Health, hereby referred to as CDPH.
7 I will be acting as public hearing officer for the
8 Preventive Health and Health Services Block Grant, hereby
9 referred to as block grant. Welcome to the block grant
10 public hearing. Please remember to mute all phones. And
11 if you are joining us via phone or webinar, please mute
12 your line until you are ready to speak.

13 In 1981 congress authorized the block grant to
14 to 61 grantees, including all 50 states, the District of
15 Columbia, two American Indian tribes and eight U.S.
16 territories.

17 The Centers for Disease Control and Prevention
18 allocates funds to states to address their unique public
19 health needs in innovative and locally defined ways.
20 California will utilize its award to address Healthy
21 People 2020 objectives and emerging health issues,
22 support public health infrastructure, provide leadership
23 in developing and implementing Emergency Medical Systems
24 throughout California and optimize the health and
25 well-being of the people in California. CDPH and the

1 Emergency Medical Services Authority conduct programs and
2 activities in California.

3 CDC anticipates awarding federal fiscal year
4 2018 block grant funds to CDPH in the amount of
5 \$10,600,069. The grant and project term is October 1st,
6 2017 through September 30th, 2019. California plans to
7 expend these funds in state fiscal year 18/19, which is
8 July 1, 2018 through June 30, 2019.

9 Under the provision of Public Law 102-531, Title
10 XIX, Part A, block grant, this is the time and place set
11 for the presentation of the block grant's federal fiscal
12 year 2018 state plan, California's application for block
13 grant funding. After the presentation, CDPH will accept
14 public statements, arguments and contentions, orally or
15 in writing, for or against the federal fiscal year 2018
16 State plan.

17 The State plan program descriptions and
18 supporting documentation were posted on CDPH's website
19 and a hard copy was placed at the security desk located
20 at 1616 Capitol Avenue, Sacramento, California. Notice
21 of this public hearing was published in the California
22 Register on May 18, 2018.

23 CDPH considers these proceedings to be quasi
24 legislative hearings. As such, witnesses presenting
25 testimony at this hearing will not be sworn in, nor will

1 we engage in cross-examination of witnesses. We will
2 take under submission all written and oral statements
3 submitted or made during this hearing. Additionally, the
4 record for this hearing will be open until 5:00
5 p.m., Monday, June 4th, 2018 in order to receive
6 additional relevant information or comments in writing
7 from interested parties. Submit additional comments to
8 PHHSBG@cdph.ca.gov. Again, that e-mail address is
9 PHHSBG@cdph.ca.gov.

10 I'm sorry. I hear someone typing. Would you
11 please mute your phone. Thank you so much.

12 Anyone wishing to make a statement will be given
13 the opportunity to do so after each program description
14 is read. Individuals will be allowed five minutes for
15 their comments and/or questions. Additional time may be
16 requested subject to approval by the public hearing
17 officer. The public hearing officer or presenter will
18 request comments throughout the proceeding. If you wish
19 to speak, please unmute your phone, clearly state and
20 spell your name and feel free to identify your
21 organization. A Certified Shorthand Reporter will record
22 the entire proceedings. Please remember to speak slowly
23 to ensure the court reporter obtains accurate
24 information.

25 Are there any members of the public in

1 attendance on the phone, in person or on the webinar?

2 MS. HILDEBRAND: Yes. Do you want us to give
3 our name and information?

4 BLOCK GRANT COORDINATOR BUTLER: Yes, please.

5 MS. HILDEBRAND: This is Christina Hildebrand
6 from A Voice for Choice Advocacy.

7 BLOCK GRANT COORDINATOR BUTLER: The documents
8 presented in the hearing and the court reporter
9 transcript will be included in the record of these
10 proceedings.

11 With me here is Hector Garcia, Block Grant
12 Administrator; Matthew Herreid, Block Grant Fiscal Lead;
13 I am Anita Butler, Block Grant Coordinator; and Phyllis
14 Mank, court reporter.

15 Mr. Garcia will present the federal fiscal year
16 2018 block grant programs using document number six and
17 we'll post that up shortly. He will request public
18 comments after he reads each program description.

19 Hector, I'll turn it over to you.

20 BLOCK GRANT ADMINISTRATOR GARCIA: Okay, Anita.
21 The first program is the Rape Prevention Program. It
22 will be involved in building the capacity of California's
23 65 local rape crisis centers. It will be funded at the
24 rate of \$832,969.

25 Do we have any questions from members of the

1 public?

2 MS. HILDEBRAND: Is all of that block grant
3 money federal funding or is it state funding as well?
4 What are the percentages?

5 BLOCK GRANT ADMINISTRATOR GARCIA: It's 100
6 percent federal funding.

7 MS. HILDEBRAND: Thank you.

8 BLOCK GRANT ADMINISTRATOR GARCIA: Any other
9 questions?

10 The next program is California Behavioral Risk
11 Factor Surveillance System Program, also known as BRFSS.
12 The BRFSS is a California specific surveillance system
13 that surveys adults 18 years and older on self-reported
14 health behaviors. It will be funded at \$400,000.

15 Any questions?

16 Then let's move on to the California Wellness
17 Plan Implementation. This is California's chronic
18 disease prevention and health promotion plan. It will be
19 funded at \$440,000.

20 Do we have any questions?

21 Next we have the Cardiovascular Disease
22 Prevention Program. Efforts here will support a
23 statewide cardiovascular disease alliance, Healthy Hearts
24 California. It will be funded at \$424,654.

25 Do we have any questions?

1 Next we have the Commodity-Specific Surveillance
2 Food and Drug Program. It will use funding to collect
3 surveillance samples of high-risk food products that are
4 known to be susceptible to microbial contamination which
5 will reduce the incidence of food-borne illness. It will
6 be funded at \$200,000.

7 Do we have any questions?

8 Then let me get down to the next one, and that
9 is Ecosystem of Data Sharing, CDPH Interoperability
10 Initiative. It will be providing infrastructure for data
11 sharing within CDPH's registeries, and it will be funded
12 at \$214,299.

13 Any questions?

14 MS. HILDEBRAND: Do you know which registeries
15 that goes to?

16 BLOCK GRANT ADMINISTRATOR GARCIA: What do you
17 mean?

18 MS. HILDEBRAND: The last sentence you said it
19 was to support a form of registeries.

20 BLOCK GRANT ADMINISTRATOR GARCIA: Right.

21 BLOCK GRANT COORDINATOR BUTLER: Christina, this
22 is Anita. The Ecosystem of Data Sharing, CDPH
23 Interoperability Initiative, the registeries -- we would
24 have to contact the programs and we'll get back to you.
25 My understanding is it basically supports several of the

1 registeries that are housed within our department, but
2 the specific registeries we would have to get back to you
3 on that.

4 MS. HILDEBRAND: It would be great if you can do
5 that.

6 BLOCK GRANT COORDINATOR BUTLER: We will
7 definitely do that, and we will also post our response on
8 the website.

9 MS. HILDEBRAND: Fabulous. Thank you.

10 BLOCK GRANT COORDINATOR BUTLER: Back to you,
11 Hector.

12 BLOCK GRANT ADMINISTRATOR GARCIA: The next
13 program is Emergency Medical Dispatch Program/EMS
14 Communications. It will improve statewide training
15 standards, improve interoperability communications
16 amongst EMS agencies and public safety responders. It
17 will be funded at \$130,935.

18 Next is EMS for Children. It intends to
19 incorporate statewide compliance with national
20 performance measures and the collection of statewide
21 data. It will be funded at \$172,689.

22 Any questions?

23 Let me go down to EMS Health Information
24 Exchange. This program will improve access to rapid
25 specialized prehospital emergency medical services

1 statewide and will be funded at \$451,602.

2 Any questions?

3 That takes us down to EMS Partnership for Injury
4 Prevention and Public Education. It will maintain
5 continuous Emergency Medical Services participation in
6 statewide injury prevention and public education
7 initiatives. It will be funded at \$150,329.

8 Any questions?

9 We then have EMS Poison Control System. This
10 program supports California's Poison Control System and
11 will be funded at \$136,719.

12 Any questions?

13 We then have EMS Prehospital Data and
14 Information Services and Quality Improvement Program.
15 This program increases specialized prehospital EMS data
16 submissions into the State EMS database system providing
17 measurable quality improvement oversight. It will be
18 funded at \$436,361.

19 Do we have any questions?

20 Next we have EMS STEMI, S-T-E-M-I, and Stroke
21 Systems. It will work to improve cardiovascular health
22 detection and treatment during medical emergencies and
23 will be funded at \$258,478.

24 Any questions?

25 Our next program is EMS Systems Planning and

1 Development. This program increases quality patient care
2 outcomes through 33 local Emergency Medical Services
3 agencies and will be funded at \$727,274.

4 Any questions?

5 Well, then that takes us to EMS Trauma Care
6 Systems. This program will continue oversight of the
7 statewide trauma system and will be funded at \$262,743.

8 Any questions?

9 Well, this takes us to Health in All Policies,
10 and this program facilitates the California Health in All
11 Policies Task Force and it provides consultation to
12 nonhealth agencies to integrate health and equity into
13 their policies, programs and procedures, and it will be
14 funded in the amount of \$592,748.

15 Any questions?

16 This takes us to Healthy People 2020 Program.
17 This program supports the overall efforts of the block
18 grant program by enhancing the accountability and
19 transparency of the block grant through measuring
20 progress and impact of funded programs through quality
21 improvement and initiatives and will be funded at
22 \$667,000.

23 Do we have any questions?

24 MS. HILDEBRAND: I have a question on that. Is
25 that money going directly to CDPH to do that or to

1 individual organizations to do that?

2 BLOCK GRANT ADMINISTRATOR GARCIA: That goes
3 directly to CDPH.

4 MS. HILDEBRAND: So CDPH is doing the oversight
5 or also doing the implementation of Healthy People 2020
6 under that?

7 BLOCK GRANT ADMINISTRATOR GARCIA: It will be
8 doing oversight.

9 MS. HILDEBRAND: Thank you.

10 BLOCK GRANT ADMINISTRATOR GARCIA: The next
11 program is Intentional and Unintentional Injury
12 Prevention. This program seeks to maintain injury
13 prevention and control as a core public health function
14 and ensure flexibility and capacity to address emerging
15 cross-sector issues such as the opioid overdose epidemic,
16 gun-related homicides and suicides. It is funded at
17 \$884,629.

18 Any questions?

19 BLOCK GRANT ADMINISTRATOR GARCIA: That takes us
20 to Obesity Prevention for Californians Program, and it
21 will advance community changes to prevent obesity at both
22 the state and local levels and is funded as \$300,000.

23 Any questions?

24 That takes us to Partnering to Reduce
25 Preventable Nonfatal Work-Related Injuries, and it will

1 work to reduce medical, social and economic impacts of
2 preventable nonfatal work-related injuries and is funded
3 at \$170,000.

4 Do we have questions?

5 Preventive Medicine Residency Program, Cal-EIS.
6 PMR and Cal-EIS programs are the key work force pipeline
7 for hard to fill epidemiology and physician positions in
8 California state and local public health agencies. This
9 program will be funded at \$565,278.

10 Any questions?

11 Public Health Accreditation. It will work to
12 maintain the department's accreditation status and is
13 funded at the rate of \$30,000.

14 Do we have any questions?

15 Next program, Public Health 2035
16 Capacity-Building Activities. This program builds
17 cross-sectoral relations, strategic development and
18 community engagement that move forward CDPH's State
19 Health Improvement Plan and will be funded at \$776,370.

20 Do we have any questions?

21 MS. HILDEBRAND: How much of that -- I don't
22 know that you can answer this either -- but how much of
23 that plan has to do with vaccination and sort of
24 prophylactic care versus the back end?

25 BLOCK GRANT COORDINATOR BUTLER: Hi, again,

1 Christina. This is Anita. So your question is how much
2 of the \$776,370 goes to vaccines and prophylactics?

3 MS. HILDEBRAND: Is it preventing disease versus
4 dealing with it post --

5 BLOCK GRANT COORDINATOR BUTLER: So that is
6 another question that we will have to check in with the
7 program on and we will get back to you on that one
8 as well.

9 MS. HILDEBRAND: The other question I have -- I
10 can't tell from the description and what's on-line -- is
11 there any opioid money going to opioid abuse or
12 prevention or --

13 BLOCK GRANT COORDINATOR BUTLER: So I'll have to
14 find out if the Public Health 2035 Program handles that.
15 What I know for sure is there is an opioid component in
16 the Intentional and Unintentional Injury Prevention, and
17 if you can see the screen, that program gets about
18 \$885,000 and opioid is one of the issues it addresses.

19 MS. HILDEBRAND: On the screen it's frozen on
20 the materials. It's not actually showing me what you're
21 going through, so I can't see that. Thank you.

22 BLOCK GRANT COORDINATOR BUTLER: Can you see it
23 now?

24 MS. HILDEBRAND: Yes.

25 BLOCK GRANT COORDINATOR BUTLER: We will check

1 in with the program -- the Public Health 2035 Program to
2 see if they're doing opioid prevention, but surely the
3 Intentional and Unintentional Injury Prevention Program
4 is.

5 MS. HILDEBRAND: Okay. Great.

6 BLOCK GRANT COORDINATOR BUTLER: Back to you,
7 Hector.

8 BLOCK GRANT ADMINISTRATOR GARCIA: That takes us
9 to the Receptor Binding Assay for Paralytic Shellfish
10 Poisoning Control. This program will reduce the
11 incidence of paralytic shellfish poisoning illness in
12 consumers and is funded at \$275,000.

13 Next program is TB Free California. This
14 program promotes prevention strategies to reduce
15 tuberculosis disease among high-risk populations in
16 California and is funded at \$600,000.

17 Any questions?

18 Then that takes us to our last funded program
19 which is using HIV surveillance Data to Prevent HIV
20 Transmission. This program matches people living with
21 HIV with their reported labs to determine if they are
22 receiving timely HIV care and treatment and it is funded
23 at \$500,000.

24 That's our last funded program. Do we have any
25 questions on anything I've stated?

1 MS. HILDEBRAND: I just wanted to clarify my
2 first question. I realize -- I think you addressed it to
3 the first program, but is all of this money -- is federal
4 money, correct?

5 BLOCK GRANT ADMINISTRATOR GARCIA: That's right.

6 MS. HILDEBRAND: Is it coming from HHS?

7 BLOCK GRANT ADMINISTRATOR GARCIA: Yes, it is.

8 BLOCK GRANT COORDINATOR BUTLER: We get the
9 dollars from the Centers for Disease Control and
10 Prevention and they are part of Health and Human Services
11 agency.

12 MS. HILDEBRAND: Then my comment on that is, I'm
13 sure you're aware at the Health and Human Services
14 department the Office of Civil Rights created a division
15 of religious and conscious freedom to any money that is
16 coming from HHS federally. There has to be a religious
17 and conscious belief exemption to anyone who is being
18 sort of forced to take some kind of medical treatment or
19 medical -- forced to do some sort of medical practice or,
20 given the option, that they have a religious or conscious
21 freedom belief exemption to that. I didn't say that very
22 eloquently. I can write it down better than I can say
23 it. I don't know whether you from the perspective of
24 funding do this, but -- and I don't know who is the
25 person to make aware if it is not you -- but that there

1 is some sort of oversight that the federal funding is not
2 lost because there is no exemption option available in
3 those places where there could be.

4 BLOCK GRANT COORDINATOR BUTLER: Thank you so
5 much for bringing that to our attention. We'll be happy
6 to share this information up our chain of command. I
7 would hope that, Christina, if you wouldn't mind, if you
8 could put that in an e-mail to us so that we can restate
9 it as eloquently as you did. I took some notes, but I'm
10 not sure if I captured all of your comments.

11 MS. HILDEBRAND: Sure, I can do that. It comes
12 from there were four states last year that got letters
13 from HHS specific to the vaccine issue that were not
14 offering a religious exemption -- didn't have an obvious
15 religious exemption that were basically threatened from
16 HHS of losing their funding. I know Pennsylvania and
17 Minnesota, Ohio, and I can't remember the fourth one.
18 They put that specific office in place in January, so I
19 just wanted to make sure that you're aware of it.

20 BLOCK GRANT COORDINATOR BUTLER: Thank you so
21 much. I really appreciate that. If you can send that
22 particular e-mail that you're going to send, you
23 basically have two options. You can send it directly to
24 me at Anita.butler@cdph.ca.gov or you can send it to
25 PHHSBG@cdph.ca.gov.

1 MS. HILDEBRAND: How about I send it to both of
2 you?

3 BLOCK GRANT COORDINATOR BUTLER: That sounds
4 great. We will some research on the issue and we will
5 respond via e-mail to you and then we will likely also
6 post the response on our website.

7 MS. HILDEBRAND: Great. Thank you.

8 BLOCK GRANT ADMINISTRATOR GARCIA: That finishes
9 my presentation and I'll turn this back to Anita
10 Butler.

11 BLOCK GRANT COORDINATOR BUTLER: Thank you,
12 Hector. Were there any additional questions or issues
13 that you would like to discuss, Christina?

14 MS. HILDEBRAND: No, that was it.

15 BLOCK GRANT COORDINATOR BUTLER: I just would
16 like to do a recap of our follow-up items. The first is
17 we are going to identify the CDPH registeries that are
18 funded by the program Ecosystem of Data Sharing. We will
19 also find out if the Public Health 2035 Program funds any
20 efforts to prevent the disease like vaccinations, opioid
21 abuse. We will also get back to you on the issue of the
22 religious and conscious freedom belief exemption. Those
23 were the three issues that I have. Were there any that
24 we missed or any that you would like to add?

25 MS. HILDEBRAND: No, that's it.

1 BLOCK GRANT COORDINATOR BUTLER: Is there anyone
2 else on the phone or on the webinar that would like to
3 make a comment or ask a question at this time? Hearing
4 none, I'd also like the record to reflect that no members
5 of the public attended in person, and this concludes the
6 block grant public hearing. Before we adjourn, I'd like
7 to give everyone another opportunity to ask questions;
8 and if there are no questions, we will adjourn. Okay.
9 Please be reminded to submit written comments to
10 PHHSBG@cdph.ca.gov by 5:00 p.m. next Monday, June the
11 4th. Thank you so much for attending and thank you for
12 your time and the meeting is adjourned.

13 (Proceedings concluded at 10:30 a.m.)
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REPORTER'S CERTIFICATE

STATE OF CALIFORNIA)
) ss.
COUNTY OF SACRAMENTO)

I, PHYLLIS MANK, CSR, hereby certify that I was
duly appointed and qualified to take the foregoing
matter;

That acting as such reporter, I took down in
stenotype notes the testimony given and proceedings had;

That I thereafter transcribed said shorthand
notes into typewritten longhand, the above and foregoing
pages 1 through 19 being a full, true and correct
transcription of the testimony given and proceedings had.

PHYLLIS MANK, CSR No. 5093