

STATE BUDGET COMMITTEE BIENNIUM BUDGET PRESENTATION

LINDSAY WEAVER, M.D., FACEP STATE HEALTH COMMISSIONER

December 16, 2024

OUR MISSION

To promote, protect, and improve the health and safety of all Hoosiers.

OUR VISION

Every Hoosier reaches optimal health regardless of where they live, learn, work, or play.



Dr. Guy Crowder Chief Medical Officer

Dr. Lindsay Weaver State Health Commissioner Greta Sanderson Chief Communications Officer

Amy Kent Chief Strategy Officer & Acting Chief of Staff	Jon Ferguson Acting Deputy Chief of Staff	Pam Pontones Deputy Comm., Local Health Services	Eden Bezy Assist. Comm., Women, Children, & Families	Eldon Whetstone Assist. Comm., Health & Human Services	Jordan Stover Assist. Comm., Consumer & Health Care Regulation	Dr. Lixia Liu Assist. Comm. & State Lab Director	Megan Lytle Assist. Comm., Public Health Protection	Eric Hawkins State Epidemiologist
 Technology & Cybersecurity Legal Affairs Human Resources Workforce Development Legislative and External Affairs Quality Improvement 	 Finance Healthy Hoosiers Foundation Minority Health 	 Northern/Centr al/Southern Regional Support Teams Local Health Dept. Outreach Division 	 Women, Infants, & Children Maternal & Child Health Children's Special Healthcare Women's Health Data & Fatality Prevention Center for Deaf & Hard of Hearing 	 Chronic Disease & Rural Health Nutrition & Physical Activity Trauma & Injury Prevention Oral Health Tobacco Prevention and Cessation 	 Long-term Care Survey Support and Guidance Acute & Continuing Care Complaints & Incidents Program Performance & Development Radiology, Weights, & Measures 	 Chemistry Clinical Microbiology Environmental Microbiology Virology & Serology Biological Preparedness & Outreach Quality Assurance 	 Environmental Health Food Protection Emergency Preparedness Lead & Healthy Homes Immunizations HIV/STD/Viral Hepatitis 	 Data Analytics Infectious Disease Epidemiology & Prevention





State Health Assessment

- We are excited to launch a comprehensive refresh of Indiana's State Health Assessment (SHA).
- The previous SHA was completed in 2022, so it does not reflect new focus on prevention, data capabilities, and priorities within Health First Indiana.
- The focus of this year's SHA is to garner a comprehensive understanding of our Indiana's current needs and priorities and making health a priority in our communities.
- Gathered stakeholders in September and collecting larger input on recommended priorities – infant mortality, obesity, access to care, mental health and substance use disorder



Agency Key Performance Indicators (KPIs)

- Enhance Maternal and Infant Health: Achieve a reduction in infant and maternal mortality rates across Indiana.
- **Promote Trauma and Injury Prevention**: Decrease the incidence of preventable injuries resulting in death among individuals aged 1-44 years.
- **Expand Lead Exposure Screening**: Increase the number of unique children in Indiana tested for elevated blood lead levels.
- Advance Tobacco Prevention and Cessation: Lower the rates of e-cigarette and nicotine product use among youth in Indiana.
- **Combat Obesity**: Reduce the prevalence of obesity among Hoosiers in Indiana.
- **Boost Utilization of Infectious Disease Testing and Treatment**: Increase the utilization of HIV, HCV, and syphilis testing and treatment services.



KPI: Enhance Maternal and Infant Health

Infant Mortality Rate (IMR)

- In 2023 was 6.6 deaths /1000 births (524 infant deaths)
- **Decrease** from 2022 IMR of 7.2 (577 infant deaths)

Maternal Mortality Rate

- In 2022 was 90.4 deaths per 100,000 live births with 72 maternal deaths
- **Decrease** from MMR of 100.1 in 2021 (80 maternal deaths)

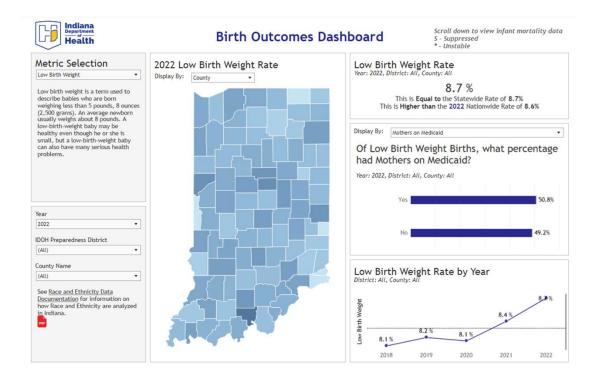




7

Maternal and Infant Health

- Birth Outcomes and Infant Mortality Dashboard was launched in July 2024
- Improving timely and actionable release of infant mortality data
- Maternal Children and Families is working to establish "one front door" to invite families to connect to services

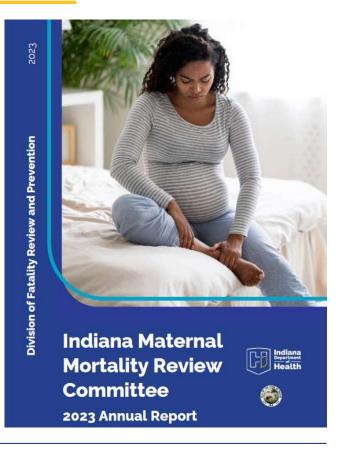




FIMR & MMRC

- Since 2023, the Fetal Infant Mortality Review (FIMR) program has expanded to 25 teams (up from 16) covering 71 counties (up from 36)
 - Empowers local communities to implement prevention initiatives that are informed by the fatality review process and implemented by Community Action Teams.
- The Statewide Maternal Mortality Review Committee (MMRC) reviews deaths of women who were pregnant at the time of death or within one year postpartum, regardless of cause
 - The MMRC identified 271 individual recommendations to improve maternal health and safety, including fully utilizing the Indiana Pregnancy Promise Program for mothers with a history of opioid use.

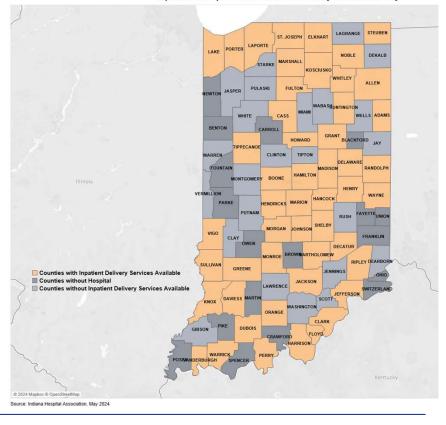




Access to OB Care

- 42 counties without a delivery facility (17 counties do not have a hospital)
- 6 facilities closing OB delivery services
 - St. Joesph Plymouth Medical Center (4/2023)
 - Perry County Memorial Hospital (8/2023)
 - Parkview LaGrange Hospital (9/2023)
 - Parkview Dekalb Hospital (9/2023)
 - Bluffton Hospital (6/2024)
 - Dukes Hospital (6/2024)
- Addressing gaps in perinatal services
 - Clinical training opportunities:
 - Coordinating with EMS to ensure timely perinatal transports





Inpatient Hospital Obstetric Services by Indiana County

Congenital Syphilis

- The number of congenital syphilis cases in Indiana has increased by 2,400% from 2018 to 2023.
 - Increased risk of infant mortality
 - Each case of congenital syphilis is estimated to cost the healthcare system approximately \$58,000
- Nationally, there has been a 755% increase in congenital syphilis cases between 2012 and 2021.
- Congenital syphilis is preventable with appropriate testing and treatment with penicillin during pregnancy
- Developed a new provider toolkit and data dashboard for clinicians and counties, published in May
- Working to expand testing and access to treatment for pregnant women, collaborating with other state agencies and local partners



KPI: Promote Trauma and Injury Prevention

Decrease the incidence of preventable injuries resulting in death among individuals aged 1-44 years.

- The statewide all injury death rate decreased 6.5% from 2022 to 2023.
- The statewide overdose death rate decreased 17.1% from 2022 to 2023; furthermore, the overdose death rate in 2023 was lower than in the preceding three years.
- The statewide suicide rate increased 3.7% between 2022 and 2023 (16.3 to 16.9 per 100,000, respectively) and has been increasing slightly over the past five years.
- The statewide unintentional falls death rate increased 7.9% from 2022 to 2023.



Unintentional Falls

Leading cause of injury death for Hoosier adults ages 65+

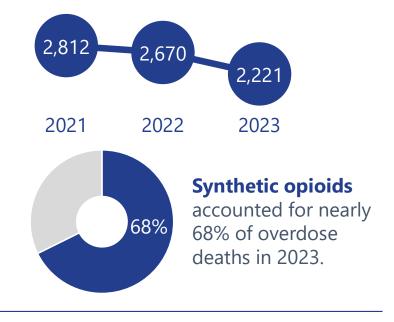
42%



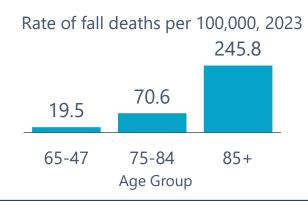
Drug Overdose

Leading cause of injury death for Hoosier adults under age 65

Overdose deaths **decreased by 21%** between 2021 and 2023

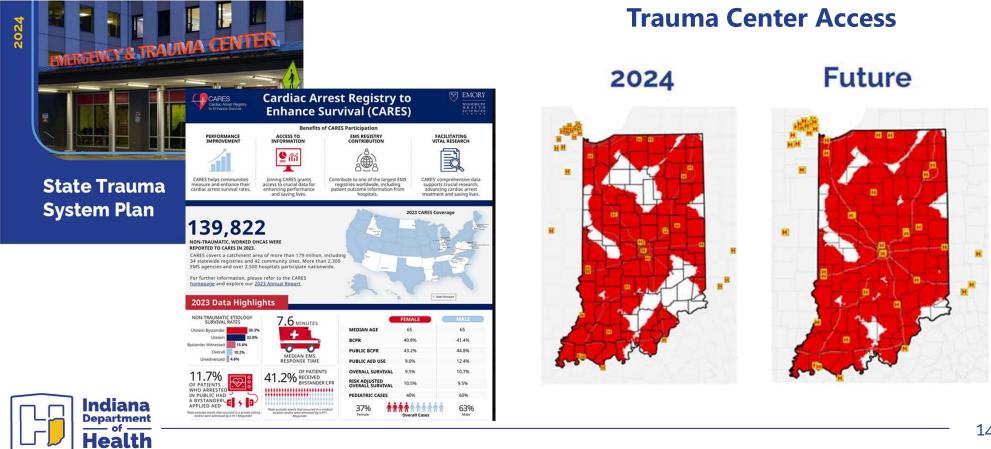


Rates of death due to falls increase dramatically with age.





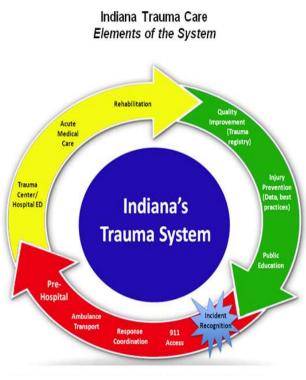
Promote Trauma and Injury Prevention



Indiana Trauma Care Commission

The Indiana Trauma Care Commission (TCC) officially adopted Indiana's first ever trauma system plan in August and will now move to implementing priorities and objectives associated with the following core strategies:

- Comprehensive engagement, accountability; trauma care access, emergency medical services, data and performance improvement, prevention, education and outreach
- TCC awarded more than \$4 million in system development grants



15



Trauma System Development Funding

\$2.5 million in FY24 & \$5 million in FY25

Trauma System Development - \$3,300,735.70
 Increase access and coordination to appropriate trauma care facilities by improving and maintaining the infrastructure of the trauma system

Quality Improvement - \$626,880

Promote effective coordination of care (right person, right place, right time), including appropriate hospital triage (with EMS) and timely transfer of critical patients. Improve the Indiana trauma registry and optimize data collection and quality including accuracy to advance the effective and timely use of data

Trauma and Non-Trauma Center Engagement - \$79,000 Improve hospital reporting across the state to ensure all hospitals are submitting high-quality data. Enhance hospital infrastructure including personnel needs to support ongoing hospital engagement

• Injury Prevention Programming - \$1,253,063.64 Implement evidence-based programming to address leading causes of trauma and injury within the community and regional environments



KPI: Expand Lead Exposure Screening

HEA 1313 (2022), effective January 1, 2023, requires providers to offer lead testing at age 1 and 2, or as soon as possible before the age of 7, if they haven't been previously tested.

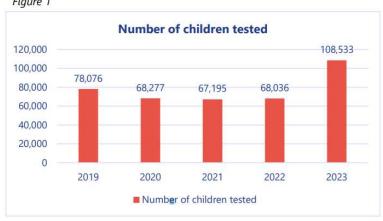
Milestone: Indiana aligned with most state programs by reducing the elevated blood lead level from 10 μ g/dL to 3.5 μ g/dL.

Why it Matters: Lead exposure, especially in children, causes irreversible cognitive and behavioral disabilities; there's no safe level.

Legislative Impacts Contributing to Ongoing Success:

- 440% increase in LHD-supported lead cases by the end of 2022
- 62% increase in screenings
- 12% increase in screenings for children under 3





17

Lead Exposure Screening

- 2023 Cinnamon Applesauce Recall: FDA identified lead in a specific brand; IDOH and LHDs ensured product removal and followed up on potential exposures.
- All health departments have committed to developing capacity through their own staff or through a contracted partner to assess led in their communities utilizing HFI dollars.
- IDOH is relaunching the Lead-Free Indiana campaign to help educate parents and community

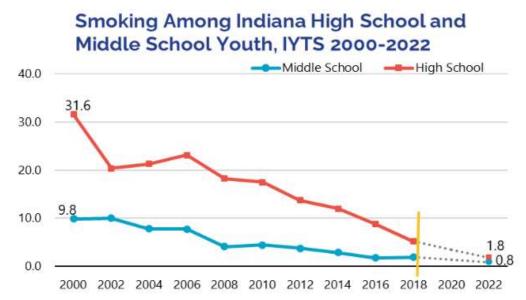






KPI: Advance Tobacco Prevention and Cessation

- Smoking rates among Indiana youth in 2022 were the lowest they have ever been
- Fewer than 2% of Indiana high school students reported currently smoking (past 30 days)
- Even fewer Indiana middle school youth reported smoking (0.8%)

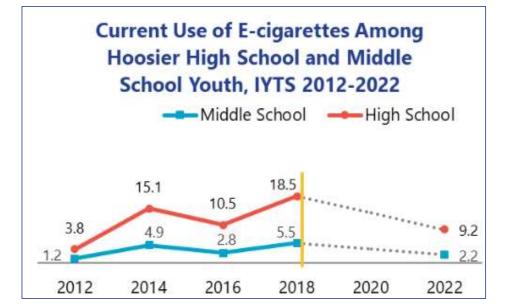




Youth Tobacco Prevention and Cessation

- In 2022, nearly 1 in 10 or 9.2% of Hoosier high school students and 1 in 50 or 2.2% of Hoosier middle school students reported current use (past-30 days) of an e-cigarette. Even with this decline e-cigarettes continue to be the preferred tobacco product among youth
- In 2022, e-cigarettes remained the most commonly-used tobacco product among Hoosier youth as well as youth across the US. Nationally, more than 14% of high school students and 3% of middle school students reported current use of e-cigarettes.





Vaping Prevention and Cessation

Vape Free Indiana, a multi-component approach to reduce youth vaping support by \$1.5 M appropriation from JUUL settlement

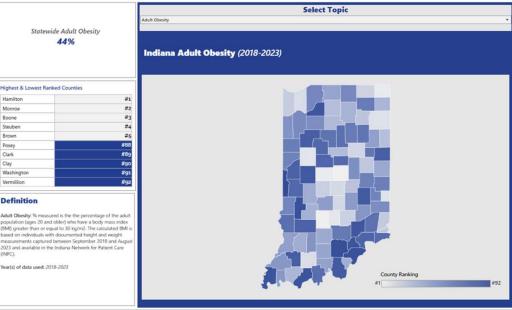
- Prevention & Intervention CATCH My Breath; Schools Toolkit; INDepth; VOICE Indiana
- Media Education Behind the Haze; IHSAA's Don't Puff This Stuff
- Treatment Resources Live Vape Free; Quit the Hit; INAAP training of health care professionals



KPI: Combating Obesity

Indiana statistics continue to worsen for obesity, overweight, lack of nutrition and physical inactivity. In 2023, obesity rate for adults stood at 43.6%.

- Indiana is ranked the 7th most obese of all states and D.C.
- Over two thirds (71%) of adults are overweight or obese
- Trends indicate a steady increase in Indiana over the last 20 years





Combating Obesity

- Improve data quality
- Obesity Innovation Team
- IDOH has prioritized grants in schools and after school, early care and education, workplace wellness, breastfeeding, diabetes prevention programs
- Secured Builders Vision Food Grant for Food is Medicine program, \$998K allocated over 2 years.



Other Chronic Disease Activities

Oral Health

 Through Hoosiers Give Kids a Smile and a partnership with America's Tooth Fairy, Indiana ranked first in the nation for the second consecutive year for dental kit distribution, as 44,000 educational dental kits were distributed.
 IDOH delivered 10,000 oral health kits to libraries, ensuring families have easy access to essential dental resources.





KPI: Infectious Disease Testing & Treatment

- Following decreases in testing during the pandemic there has been a postpandemic testing increase, leading to higher rates of human immunodeficiency virus (HIV) and sexually transmitted infections (STIs) compared to before 2020.
- Rates of hepatitis C virus (HCV) reached a high in 2017 and have dramatically fallen as IDOH engages people living with HCV with treatment.
- HIV positivity rate has been stable since 2017.
- Statewide Retention to HIV Care has increased from 72% in 2017 to 83% in 2023.
- Statewide HIV Viral Suppression has increased from 62% in 2017 to 69% in 2023.



Infectious Disease Prevention

- Vaccine for Children (VFC) program expanded to every Indiana Kroger store with a pharmacy
- The IDOH Laboratory (IDOHL) plays a vital role in providing specialized testing services that no other lab in the state can perform.
 - These include tests related to rabies, food microbiology, emergency response services, environmental response, and infectious disease prevention.
- During FY 2024, IDOHL performed 166,820 tests
- Launched IDOH Lab Courier Service System – improved transit time and sample integrity





Health Care Regulation

- Indiana was one of only 11 states nationwide to meet all CMS Medicare and Medicaid performance metrics for state survey agencies.
- Provided 371 LTC facilities with equipment to improve environmental cleaning and infection prevention practices
- Provided approx. \$2.5 million in federal funding to train more than 900 student as CNAs and QMAs to bolster LTC workforce
- Heath Care Engineering plan review for major hospital construction (new and renovations)



Health First Indiana



- IDOH has changed its approach to public health service delivery focusing on prevention and wellness rather than being responsive but reactionary
- Strengthened partnerships with local health departments, hospitals, primary healthcare, community-based organizations, elected officials, and the business community
- Convener at the state level with partners and stakeholders to achieve alignment in priorities, efficient use of fundings, and reduce duplication

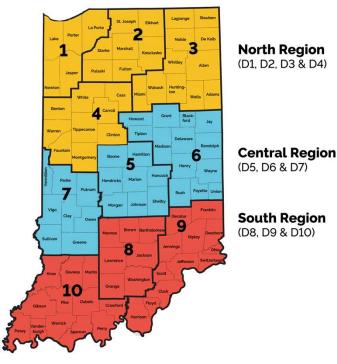


Supporting Counties

- Regional teams (north, central, south) provide technical assistance and support to counties in data analysis, partnerships, evidence-based programs and services, finance/budget, etc.
- Monthly calls, district workshops, regional \bullet and statewide trainings
- Working with counties to develop and publicly report on key performance indicators for core services

Indiana Department

lealth



Health Workforce Council

- *New* Health Workforce Council established earlier this year to develop strategies to identify, address, and monitor gaps and critical health workforce needs.
- 15 members, bringing together state officials, policy makers, higher-ed, clinicians, and healthcare leaders

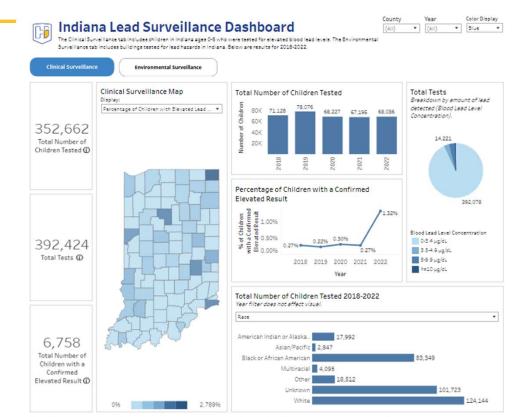


- Identified priorities: rural health, behavioral & mental health, obstetrics and pediatrics, adult & geriatric primary care
- Charge of the council is to:
 - Coordinate initiatives and leverage existing programs
 - Continue to build upon and enhance workforce data and reporting
 - Expand recruitment, training, placement, and retention into areas of need
 - Identify and collaborate on incentive programs and strategies to target needs
 - Develop State Health Workforce Plan, Summer of 2025



Data Analytics

- Public Health Analytics and Data Storytelling
- Transparency and informed decision making
 - Public facing dashboards Health First Indiana, Indiana Drug Overdose Prevention, Lead and Healthy Homes, Infant and Maternal Mortality, Cancer, Vector Borne & Zoonotic Disease
- Public Health Data Advisory
 Committee

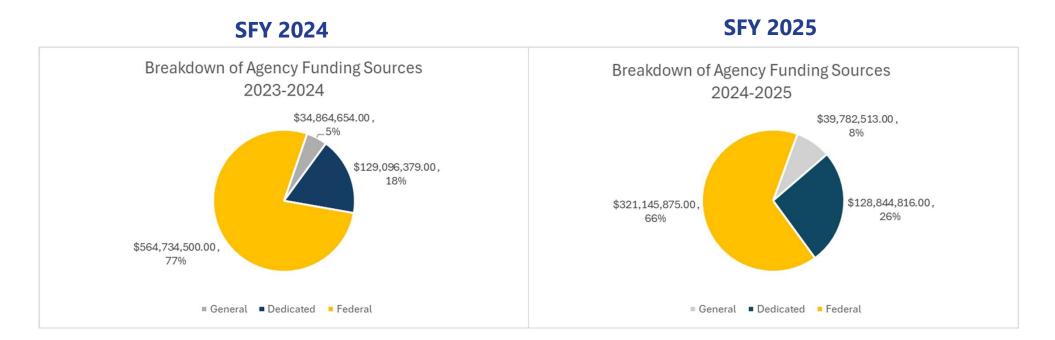


Note: If fewer than five results were identified, the values were suppressed to maintain confidentiality. Suppressed values are identified with an "5".





IDOH Budget by Funding Sources





Health Issues & Challenges Grants

- \$50M ARPA funding
- 186 awards, across 165 organizations
- Grant awards end in 2026

Indiana

Department

Health

- of



"Unique individuals is defined as someone who has utilized program services at least once in a calendar month. Averages are defined as the sum of "Unique Individuals" across X months divided by X months.

Questions?

Lindsay Weaver, MD, FACEP State Health Commissioner

