

Testimony By Paul David Roman Before The FY-2023
New Jersey Assembly and Senate Budget Hearings

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My name is Paul David Roman – a volunteer with over 53 years as an EMT Educator, 45 years in local, public health, and currently serving as President of the NJ Local Boards of Health Association, which is a member of PHACE, the Public Health Associations' Collaborative Effort representing the six State Department of Health recognized public health organizations in New Jersey.

With all the challenges facing New Jersey government, State and Local, we appreciate all that you have already done, and continue to do to limit the damage that Covid-19 has inflicted on New Jersey families, our public health infrastructure and public and private finances.

Historically, public health professionals, paid and volunteer, work behind the scenes to improve the health and safety of our communities. When we speak of public health we are not referring to individual treatment, but to education, prevention, protection and resolving day to day community problems such as rats, bats, and cats.

Our people have been the boots on the ground since the beginning of the pandemic. We in public health are dealing with a frustrated and vocal public, often with backlashes against public health officials. Our day to day activities are limited in order to support the largest vaccination program in our history. While the threat still exists and we are not yet transitioning into what many call an endemic, the virus is continuing to challenge research and vaccination efficacy. While some view New Jersey's home rule system of just over 100 health departments as fragmented, the recent study by Robert Wood Johnson in conjunction with Rutgers University has shown that the amount of departments are not the real issue. Staffing and programmatic achievement is hampered by the lack of substantial fiscal resources as compared with other states. National statistics show that New Jersey is one of the least State funded public health programs in the Country. Our study completed in December, along with several national studies and calls for action, point to the need for permanent Federal and State funding for core activities with supplemental targeted grants.

For over 40 years the New Jersey Legislature provided in the annual state budget, public health priority funds for local departments. In 2011, when it was stricken from the budget it amounted to 10 million dollars.

Two years ago, before the pandemic, we were requesting 11.2 million to reinstitute this fund. Today we ask that you consider re-establishing an annual fund of 12 million dollars with a built-in annual cost of living increase.

We have been fortunate to receive grants for our departments from federal dollars given to the State, which has certainly helped to begin the rebuilding process. However, these grants will end in the next year or two. Every dollar not made up from State or Federal sources has to be requested through local taxation, which is severely restricted by CAP laws.

We previously sent you a white paper outlining six proposals for new revenue streams, which would help support a continuous source of dedicated funds without any negative impact on the State budget. Remember, even with Federal money to provide staff in support of the pandemic, New Jersey is understaffed 3:1 compared to national preparedness requirements.

Dr. Eddy Bresnitz, former state epidemiologist and advisor for the State's Covid-19 response, has repeatedly stated that "the real question is not where we will be at the end of Covid-19, it's where we will be in a few years. Will our elected officials have the willpower to sustain the capabilities that have been built up? A lot of money has been given to rebuild the infrastructure, but experience shows that it's like a rollercoaster when it comes to support. And as we get further and further away from the current crisis, memories get short — especially when there are so many competing demands."

Ladies and Gentlemen, today, public health and its leaders are in the spotlight. Strengthening public health systems and organizations is an enterprise of unprecedented interest. You, our legislators, must capitalize on this interest by seeking opportunities to support the ways we deliver public health services in our State and in our communities.

Proposals For New Dedicated Revenue Streams

- Provide a sales or excise tax or surcharge on vaping products – this may also have the positive effect of decreasing sales on this demonstrated health scourge.
- Add an additional 10-15 cents to the tax on cigarette and tobacco products.
- Increase the proposed assessment on health insurance companies.
- Increase the opioid assessment fees.
- Place a surcharge on certain health related licensing fees.
- Include a small increase in the proposed state revenue from the sale of recreational marijuana.