

WHAT'S NEXT AMID BUDGET CUTS

State Commissioner Talks Strategy

By Matt Ottinger

With a challenging revenue forecast, legislators and Gov. Mike Braun felt forced this year to cut local public health funding from \$150 million to \$40 million annually, representing a 70% reduction.

In a state struggling to emerge from the lower tier of national rankings in many health-related criteria, it was hardly welcomed news to health officials, practitioners and others.

Indiana State Health Commissioner Dr. Lindsay Weaver already has heard from local operators that some intended programs will be cancelled for now or seriously reduced.

“We’re working with the local health departments to really narrow in on their areas of biggest need,” she relays, pointing to reported goals of improving trauma care and injury prevention as examples.

“In some cases, they’re helping with decreasing hospital utilization, maternal and infant health, food access and transportation assistance for people in their community,” she adds.

Business backing

On a positive note, Weaver is encouraged by the buy-in she’s seen from some employers striving to improve health among the workforce and in their communities.

“I really am challenging employers to get to know and understand those health needs in their community and to think through where they play a role,” she stresses. “I remain impressed with our businesses who have really great wellness programs. They’re starting with their own employees, whether it’s nutrition, education, support – I know some of our businesses have comprehensive clinics for their employees and for their families, and my ask is that they extend that into their community.”

She also points to employers assisting with access to healthy foods and hosting farmers’ markets as examples, especially in the state’s rural communities.

Vacancies

It’s those rural locales that are perhaps most impacted by budget cuts in public health.

“Unfortunately, our rural hospitals stopped providing some essential services, specifically thinking about delivery care,” Weaver explains. “But I always remind people that if you have

the (obstetrician) leave or retire and they’re not able to recruit a new one in, it’s not just the delivery of babies (that’s impacted).”

She explains, “Often you have other important health services that those physicians were providing in the community that are now diminished. And we are hearing from our rural hospitals that they’re struggling with budgets and specifically looking at the payer mix, having difficulty recruiting clinicians into these rural communities.”



Indiana State Health Commissioner Dr. Lindsay Weaver appreciates seeing many stakeholders in Indiana unite to combat health challenges and remains optimistic in finding solutions.

Weaver believes solutions can be found, but only “with a comprehensive approach.” The key, she asserts, is looking at specific areas of the state and determining precise needs. Beneficial conversations are being had with fellow health commissioners in similar situations.

“We are working with other states that have these large rural areas to hear from them and learn from them about how they’re approaching it.”

Health First

When asked about causes for optimism, Weaver quickly points to the Health First Indiana initiative. Launched and funded via Senate Enrolled Act 4 in the 2023 Indiana General Assembly, the initiative started in 2024 to enable counties to determine the health needs of their communities and implement evidence-based programs focused on prevention.

More specifically, counties decide whether to opt in to the funding and provide core

public health services. Despite aforementioned budget cuts, Weaver sees promise.

“I’m excited about it as it really has brought together the stakeholders and the partners in the community,” Weaver praises. “So, I think that’s something to focus on moving forward too, even though they have had a reduction unfortunately because of the budget shortfall. That is their opportunity – for those local chambers, businesses, foundations to help step in and fill some of

those gaps where they had worked together to make these plans utilizing the funding.”

Prognosis improving

In spite of challenges, Indiana’s health outlook is far from dire. For starters, Weaver points to Indiana’s infant mortality rate (6.3 deaths per 1,000 live births in 2024) as a vital metric.

“That is a record low since we started collecting data in 1900, and that’s years of work in this space and funding from the state legislators and collaboration of our hospitals with one another,” she offers, pointing to successes of a regional approach.

Key substance use numbers also are trending well, as Indiana’s overdoses have dropped significantly two years in a row, as well as vaping among young Hoosiers.

“Our vaping rate for high schoolers has dropped to a record low after a peak of almost close to 20% of high schoolers vaping,” she reports. “We’re down to 5%, and that’s incredible.”

RESOURCE: Dr. Lindsay Weaver, Indiana Department of Health, at www.in.gov/health