Roll Call

Board Members Present

Carolyn C. Lopez, M.D., President
Adele Joy Cobbs, M.D.
Caswell A. Evans, Jr., D.D.S., M.P.H.
Horace E. Smith, M.D.
Steven K. Rothschild, M.D.
Joseph B. Starshak
Juan M. Calderon

Board Members Absent
Melanie Dreher, RN, PhD.
Victor M. Gonzalez

For the Department

Julie Morita, M.D., Commissioner
Meeting Summary: December 20, 2017
DePaul Center, 333 South State Street

Call to Order: The meeting was called to order at 9:07 a.m. by Dr. Lopez, Board President.

Approval of Minutes: The November 2017 minutes were unanimously approved.

Commissioner’s Update:

CHAT Symposium.
Commissioner Morita reported the MICAH Bureau hosted its first Chicago Healthy Adolescents and Teens Symposium in mid-November at Malcolm X College, with over 120 attendees. This group of adolescent-serving clinicians and other youth advocates heard from local leaders, youth experts and nationally recognized researchers to learn how we can achieve health equity for Chicago youth. Health care providers also received free clinical training on the birth control methods recommended first for teens by the American Academy of Pediatrics.

World AIDS Day.
On December 1st, Commissioner Morita was proud to announce at our World AIDS Day press conference that new HIV diagnoses in Chicago hit a record low after 15 years of declines. Chicago is making real progress in our fight against HIV and AIDS. As the 2016 HIV/STI Report shows, in 2016, Chicago recorded 839 new HIV cases, the fewest number of new HIV diagnoses in more than fifteen years and a 55 percent decline from 2001. Though this progress is historic, it is not enough. That's why CDPH also signed on to the international Fast-Track Cities initiative which engages mayors and other key stakeholders to accelerate their city's local AIDS responses. Fast Track Cities builds on CDPH's comprehensive efforts to improve health disparities and reduce the burden of HIV as outlined in the citywide public health plan, Healthy Chicago 2.0. Unfortunately, this historic progress comes with some new challenges. The CDC recently updated how they allocate dollars to better fight HIV in cities and states where the burden is highest. As a result, CPH recently learned that our HIV grant funds will be reduced by $2.5 million for 2018.

Englewood STI Clinic.
As a result, CDPH will not offer STI testing and treatment services at our Englewood clinic after mid-January; instead, residents will be able to receive the same services from either Howard Brown Health or UIC Mile Square - both of which are already located in the same building. CDPH will continue to provide STI services at our STI clinics in Austin, Lakeview and Roseland. In addition, CDPH has put together a plan to ensure residents will see no change in services and continue to support our community partner agencies that are so fundamental to meeting our goals. This reduced funding also means CDPH will lose a handful of positions. CDPH has contacted team members who are directly impacted by these changes and are working with them, the unions and our labor team to identify other opportunities within the department where available. Though this is unfortunate, Commissioner Morita is thankful there will be no negative impact on the residents CDPH serve or on our 10 year vision to eliminate new HIV infections.

Reducing Breast Cancer Disparity.
Commissioner Morita also reported Chicago has made tremendous progress reducing the disparity in breast cancer deaths among black women. In the past 10 years, Chicago has narrowed the disparity gap in deaths among black and white women. Many black women dying from breast cancer lacked health insurance, which had long been a major obstacle to quality ongoing treatment. As we know, Ninety percent of the federal budget for promoting and raising awareness for open enrollment has been cut, and this year’s health insurance sign-up closed last week on
Dec. 15, weeks ahead of prior years. Though it is not immediately clear how much of an effect changes to the open enrollment period might have on the progress made against breast cancer in Chicago, there is reason to be hopeful as less than 10 percent of Chicago residents are uninsured — a record low. Chicago is addressing the disparity with increased funding for quality mammograms, enhanced education and outreach programs, and other supportive services. This year, CDPH invested $700,000 to increase breast health services for populations that have faced difficulties accessing quality care. As a result, CDPH has filled the void, hosting more targeted events to reach the communities most in need of care.

Flu Shots.
Lastly, CDPH once again teamed up with health departments and health care organizations across Illinois to encourage residents to get a flu shot during Vaccinate Illinois Week (VIW), which was December 3rd through the 9th. VIW is a statewide health campaign focused on educating the public about the importance of getting a flu vaccine during the fall and winter months and is aligned with Centers for Disease Control (CDC) recommendations for flu prevention. VIW grew out of Vaccinate Chicago week, which was first launched by CDPH in 2012. Though the flu shot does not cover every possible strain of influenza seen every season, it still remains the single best protection against the flu in general. The vaccines available this year protect against the three or four strains of influenza that are most likely to cause people to get sick. A list of citywide vaccine locations is available at www.ChicagoFluShots.org.

Comments by the Board President: Dr. Lopez welcomed students and everyone in attendance and hoped everyone is ready for the holidays. She mentioned it’s a time to reflect on the past year’s challenges and successes. Most importantly, for us to keep focus on the North Star when working through difficulties.

Policy Update:
Jesse Lava provided the following policy updates:

CITY

- **Food Code.** CDPH is following state requirements, which in turn are based on FDA recommendations, to change the food code that restaurants and other establishments must follow. The changes include requiring grocery stores to list allergens to ensuring hand sinks near food prep areas to allowing restaurants to keep the hot food a little less hot and the cold food a little less cold. CDPH plans to implement the new food code on July 1.
- **MSM blood donations.** Ald. Tunney introduced a resolution with our support calling on the FDA to allow men who have sex with men to donate blood. There used to be a lifetime ban. Now the ban is on those whose sexual activity happened within the last year. But from a health perspective, this approach is discriminatory and needless.

FEDERAL

- **Banned health words.** The Trump administration has instructed the CDC not to use seven words in materials pertaining to its upcoming budget: diversity, vulnerable, evidence-based, science-based, fetus, transgender and entitlement. This directive only makes explicit what CDPH has already seen in this administration’s approach to evidence, vulnerable populations, family planning and the unique needs of different kinds of people. CDPH has seen it in the cuts to the HIV program, cuts to teen pregnancy prevention, efforts to end the ACA and the reversal of action on climate change.
**Tax Reform and ACA partial repeal.** The tax bill appears headed for passage. Here are some highlights, which I’m not restricting to the ACA-related components, since economic opportunity is a social determinant of health.

- The ACA’s individual mandate will be gone, meaning healthier people will leave the marketplace, which in turn will cause premiums to rise. As premiums rise, more relatively healthy people will leave the marketplace. Users of the marketplace are likely to become sicker and sicker, leading premiums to spiral out of control. Some 13 million people are estimated to lose their insurance by 2027.
- The corporate tax rate goes from 35% to 21%.
- The estate tax will apply only after the first $11 million.
- “Pass-through” income from owning companies such as the Trump Organization will be taxed less than income obtained through an employer.
- The top income tax rates will drop and the threshold to reach the top rates will rise.
- The deduction for state and local taxes will shrink, hurting states such as CA and NY.
- The standard deduction goes from $12K to $24K.

One estimate says that within 10 years, even before the ACA mandate repeal is taken into account, take-home income will fall for the bottom 40%, the middle 20% would see no rise at all, 62% of the benefits would go to the top 1%, and 42% to the top 0.1%. Public support is under 30%.

**Presentation:** Presentation: “Chicago Health Atlas,” Nikhil Prachand, Director of Epidemiology

**Old Business:** None

**New Business:** None

**Public Comment:** BOH members requested a copy of the presentation.

**Adjourn:** The meeting adjourned at 10:35 a.m.

**Next Board Meeting:** Wednesday, January 17, 2018, 9:00 a.m.