




Public Health Professionals Gateway

Public Health Law News

June 2020



Public Health Law Program
Center for State, Tribal, Local, and Territorial Support
Centers for Disease Control and Prevention

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Letter from the Editor


The Public Health Law Program (PHLP) thanks Joya Banerjee for her assistance in writing the January–June 2020 editions of *Public Health Law News*. Ms. Banerjee worked with PHLP while pursuing a master of public health from George Washington University. In addition to her studies and internship, she has also been working on the front lines of the COVID-19 response as a full-time registered nurse.

PHLP is honored to have worked with such a dedicated public health professional. We hold her in highest regard and wish her every success in her future endeavors.

F. Abigail Ferrell, JD, MPA
Editor in Chief


COVID-19 Tools and Information

COVID-19: Vulnerable Populations and Palliative Care: Call for Social Justice Webinar will be held **July 9** at 3:00 pm (EDT). Speakers will discuss the pandemic's impact on **diverse, vulnerable populations**, including blacks/African Americans and Latinx, persons with disabilities, immigrants, persons who are incarcerated, older adults, nursing home residents, and persons experiencing homelessness. Presenters will address the central role of palliative care across all systems and provide a trauma-informed perspective in working with people affected by the pandemic, as well as the critical importance of workforce education and training. [Register to attend](#) .

Beazley Symposium on Health Care Law and Policy is scheduled to be held on **October 30** in Chicago. The symposium's purpose is to explore the impact that public health crises, such as COVID-19, have on vulnerable populations. Participants will discuss how public and private sector responses address these populations' needs and identify how **social determinants of health** made certain populations vulnerable before coronavirus. [Here's how to attend.](#) 


Announcements

Job Opening: Public Health Attorney – Health Law Partnership (Atlanta, Georgia)


The attorney will represent clients in a variety of civil law problems affecting children's health, including public benefits and health insurance, poor housing conditions, disability-related issues, family law matters, and access to appropriate educational services. [Learn more about the position and apply](#) .

Tribal Announcements



Deadline Extended: Tribal Advisory Nominations

The Health Resources & Services Administration (HRSA) is soliciting comments and recommendations regarding HRSA's intent to establish the HRSA Tribal Advisory Council (TAC) and is seeking nominations of qualified tribal officials as candidates for consideration for appointment as voluntary delegate members of the **HRSA TAC**. Due to delays caused by the global impact of COVID-19, HRSA is [extending the deadline](#)  for the submission of nominations until **July 6, 2020**.

National Council of Urban Indian Health's Coronavirus Resource Center



The National Council of Urban Indian Health has developed a [Coronavirus Resource Center](#)  containing official correspondence, press releases, related **legislation**, fact sheets, news, and events.

National Indian Health Board COVID-19 Tribal Survey Responses Now Online


Recently, the National Indian Health Board conducted a rapid survey to assess the needs of tribes regarding the evolving **COVID-2019 outbreak**. The [survey results](#)  [\[PDF – 257KB\]](#)  are in and provide a basic understanding of tribal preparedness for combating the disease, as well as foreseeable challenges in responding to COVID-19.

Legal Tools



Mental Health Parity Toolkit

This [toolkit](#)  [\[PDF – 394KB\]](#)  from Health Law Advocates provides an overview of the laws that require health insurers to cover mental health and substance abuse treatment—known as “**parity laws**.” The toolkit's purpose is to assist consumers, providers, advocates, family members and others who need insurance coverage for mental health or substance abuse services and/or want to learn about laws requiring health insurers to provide such coverage.


HIV Legal Toolkit

This [HIV Legal Toolkit](#)  was created primarily as a go-to resource for lawyers representing people living with HIV who are facing criminal prosecution based on their HIV status. It includes charts, articles, guidance, case law, legal analysis, scientific data and citations to empirical studies on the **impact of HIV criminalization** on individuals affected by HIV.



Homelessness & Housing Toolkit for Cities

The Association of Washington Cities and Municipal Research & Services Center published this [toolkit for cities](#)  [\[PDF – 1.2MB\]](#)  to address homelessness and affordable housing from **real cases** in cities across Washington.

Contraceptive Equity in Action: A Toolkit for State Implementation

The National Health Law Program developed this [toolkit for state implementation](#)  to explore how **contraceptive equity laws** fit within the broader federal and state health insurance landscape.

Regulating Electronic Cigarettes and Similar Devices

This [policy guide](#)  [PDF – 1.3MB]  from the Public Health Law Center provides options and pointers for communities and policymakers to consider when drafting or implementing laws or policies that regulate e-cigarettes and similar devices.

Top Story

[Hospitals got bailouts and furloughed thousands while paying C.E.O.s millions](#)

The New York Times (06/08/2020) Jessica Silver-Greenberg, Jesse Drucker, and David Enrich

Story Highlights

A large number of healthcare companies have received billions of dollars in taxpayer bailout funds intended to keep them stabilized during the COVID-19 pandemic, but they are still laying off, furloughing, or cutting the pay of tens of thousands of doctors, nurses, and other workers. At the same time, many companies continue to pay millions to their top executives.

A Times analysis of tax and securities filings by 60 of the nation's largest hospital chains—including HCA Healthcare, Tenet Healthcare, the Mayo Clinic, and regional chains with thousands of beds—found that the companies have tens of billions of dollars in cash reserves for emergencies. Together, these hospitals awarded the five highest-paid officials in each chain \$874 million in the most recent year for which they have disclosed their finances.

Meanwhile, at least 36 of the hospital chains have laid off, furloughed, or reduced the pay of lower-paid employees to save money during the pandemic.

Industry officials say furloughs and pay reductions allow hospitals to keep providing essential services while the pandemic forces them to cancel lucrative nonessential procedures and services.

Briefly Noted

[Georgia: WellStar furloughs 1,070 workers; other systems too face tough losses](#)

Atlanta Journal Constitution (05/20/2020) Michael E. Kanell

[New York: 'A big test': Hard hit New York City begins reopening](#)

ABC News (06/08/2020) Jennifer Peltz

[Pennsylvania: 11 new PA coronavirus cases traced to Jersey Shore gatherings](#)

Daily Voice (06/08/2020) Cecilia Levine

[Tennessee: Metro Public Health updating policy for sharing COVID-19 data with first responders](#)

News 4 Nashville (06/08/2020)

[Texas: Inmates report dangerous practices inside the Texas prison with the most coronavirus deaths](#)

Texas Tribune (06/08/2020) Jolie McCullough

[National: A third of Americans surveyed engaged in risky cleaning behaviors during the COVID-19 pandemic. Some have even gargled with bleach.](#)

Jen Christensen (06/05/2020)

[National: Coronavirus cases rise in US south and west as crowded protests spark worries](#)

CNN (06/03/2020) Eric Levenson

National: [Here's where we stand on getting a coronavirus vaccine](#) 

CNN (06/08/2020) Holly Yan

National: [FDA updates policies to increase supply of ethanol available for use in hand sanitizers.](#) 

National Law Review (06/08/2020) Mark Duvall, Alan Sachs, Jack Zietman

[Editor's note: [Read the updated policy](#) .]

National: [OSHA announces new COVID-19 policies](#) 

Clean Link (05/22/2020)

[Editor's note: [Read the press release](#) .]

Global News

India: [India must follow Supreme Court orders to protect 100 million migrant workers: UN rights experts](#) 

UN News (06/04/2020)

Mexico: [Coronavirus: Health workers face violent attacks in Mexico](#) 

BBC News (05/18/2020) Marcos González Diaz

New Zealand: [With no active COVID-19 cases, New Zealand is lifting almost all its coronavirus restrictions](#) 

CNN (06/08/2020) Ben Westcott

[Editor's note: [Learn about "level 1" rules](#) .]

Global: [Robots, lampshades and mannequins: how restaurants around the world are adapting to coronavirus](#) 

Washington Post (06/03/2020) Miriam Berger

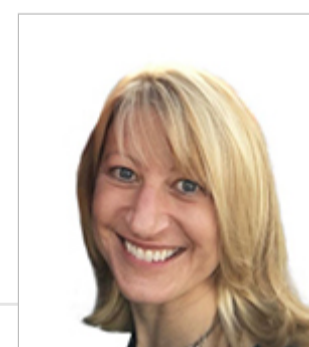
Global: [WHO finally endorses masks to prevent coronavirus transmission](#) 

New York Times (06/05/2020) Apoorva Mandavili

Profile in Public Health Law: Jennifer Matjasko, PhD, MPP

Title: Health Scientist/Associate Chief of Science, Research and Evaluation Branch, Division of Violence Prevention, Centers for Disease Control and Prevention (CDC)

Education: PhD and MPP in Public Policy, University of Chicago; BS in Human Development and Family Studies, Penn State University



Public Health Law News (PHLN): Please describe your path to your current position.


Matjasko: I became interested in conducting research with children and families early in my undergraduate career. My first work-study job was in a lab where I assisted in conducting the Strange Situation, an experiment designed to uncover attachment styles in infants and toddlers. I also assessed infant emotionality in a variety of experimental conditions and coded co-parenting styles during home visits. I also taught preschool during this time. Across my research and practice experiences, I noticed that families under economic distress faced a number of parenting and child development challenges that affected how children learned and behaved. Because of these experiences, I wanted to understand how poverty was related to family functioning and child well-being and pursued that topic for my honors thesis. While I was working on my thesis, I became very interested in the policy implications of the research and wanted to hone my skills in policy analysis and evaluation. This ultimately led me to pursue my doctorate in public policy. During my graduate career, my training focused on child and family policy, with a concentration in family and community violence. While I didn't know it at the time, my undergraduate and graduate research and training experiences set a strong foundation for the

work that I do at CDC. I work in the Division of Violence Prevention (DVP), where I conduct and support research on the prevention of multiple forms of violence. My past experiences are in line with DVP's focus on healthy parenting, positive early education experiences, and approaches that affect the economic conditions of families.

PHLN: How did you become interested in public health?

Matjasko: I always had an interest in doing research that can be put into action to help improve the lives of children and youth. During one of my graduate school fellowship experiences, I worked with New York City's Department of Probation, where I pulled together the best available evidence on how to best prevent recidivism among the juvenile population. Reading through the department's case files, I was struck by how young people's involvement in the justice system had influenced their lives and how preventing their involvement in delinquency and violence would have set them on a potentially better path. This reinforced my interest in the broader systems and supports for communities and families that might help create healthier contexts for youth. As a result, I spent several months doing an applied evaluation of Chicago's Community Economic Development Law Program, which is a program of the Chicago Lawyers' Committee for Civil Rights. The program provides transactional pro bono legal representation to nonprofit organizations involved in community development, affordable housing, and social services. It also provides pro bono representation to low-income entrepreneurs and first-time home buyers. Through that experience, I was able to elevate the importance of community and family supports and their salience to child and adolescent well-being. This is one of the cornerstones of a public health approach to preventing violence.

PHLN: What do you do in your day-to-day role in DVP?

Matjasko: I am the associate chief of science in DVP's Research and Evaluation Branch. In this role, I support the scientific functions of the branch. This includes reviewing products for dissemination to ensure they are supported by solid data, providing scientific consultation and mentorship to branch scientists, leading scientific strategic planning efforts, and contributing to the violence prevention field through scholarly publications and presentations. I am also the lead science officer on a DVP-funded contract designed to better understand the opioid crisis's impact on children and families, including community supports and services that might be effective in preventing adverse childhood experiences (ACEs) and children's exposure to violence. I also serve as the principal investigator for a CDC Foundation project that will bring the best science and practice to an update of CDC's 2007 publication, [Preventing Child Sexual Abuse Within Youth-serving Organizations: Getting Started on Policies and Procedures](#)  [PDF - 4.6MB]. The updated publication will provide youth-serving organizations with recommendations on how to create safe and protective environments for all children and youth. I also serve as a division subject matter expert in the areas of child abuse and neglect, child sexual abuse, and sex trafficking.

PHLN: What are ACEs and how do they relate to your work?



Matjasko: Safe, stable, nurturing relationships and environments are critical to children's health and well-being. Unfortunately, many children don't have these types of relationships and environments and instead experience ACEs. ACEs are preventable, potentially traumatic events that occur in childhood (0-17 years), such as neglect, experiencing or witnessing violence, and having a family member attempt or die by suicide. ACEs also include aspects of children's environment that can undermine their sense of safety, stability, and bonding, such as growing up in a household with substance misuse, mental health problems, or instability due to separation from a parent or incarceration of a parent, sibling or other member of the household. In terms of the specific work that I do in the Research and Evaluation Branch, I help support and advance the research on ACEs, with a focus on how to stop child abuse and neglect from happening in the first place. For example, the research study I lead is designed to better understand the opioid crisis's impact on children and families. This study will elevate community-level opportunities for preventing ACEs among families who are experiencing substance use issues. Preliminary evidence from the field is already pointing to the importance of community and economic supports for families. We are also learning about how substance use and child welfare policies may work together (or not) so that children experience safe, stable, and nurturing relationships and environments.

PHLN: Why is what happens to people during childhood important later in life?

Matjasko: About 61% of adults surveyed across 25 states reported that they had experienced at least one type of ACE, and nearly one in six reported they had experienced four or more types of ACEs. ACEs are linked to chronic health problems, mental illness, and substance misuse in adulthood. ACEs can also negatively impact education and job opportunities. Preventing ACEs could potentially reduce a large number of health conditions. For example, up to 1.9






million cases of heart disease and 21 million cases of depression could have been avoided by preventing ACEs. A [November 2019 ACEs Vital Signs](#) published by CDC provides more details on the ways in which ACEs can have lifelong impacts on health and well-being.



PHLN: How do law, policy, and social systems affect children's ability to thrive?

Matjasko: Law, policy, and social systems have the potential to reach more children and families than individual-level programs like therapy. They also play a role in creating safe, stable, and nurturing relationships and environments. CDC has developed [technical packages](#) to help states and communities prevent violence based on the best available evidence. Technical packages compile a core set of strategies to achieve and sustain substantial reductions in a specific risk factor or outcome, and they help communities and states prioritize prevention activities based on the best available evidence. Recently, CDC published a [resource](#)  [[PDF - 3.7MB](#)] specific to preventing ACEs. This resource and the other violence prevention technical packages contain policy- and systems-level approaches that have the potential to create healthy contexts for children to thrive. For example, the Earned Income Tax Credit (EITC) helps families increase their income while incentivizing work or offsetting the costs of child-rearing. The federal EITC is a refundable credit originally designed to encourage work by offsetting the impact of federal taxes on low-income families. The EITC has been [shown](#)  to reduce rates of child abuse and neglect. It is hypothesized that the EITC reduces child abuse and neglect by reducing parental stress and improving childcare arrangements, both of which are important factors in creating healthy environments where children can thrive.

In addition, pro bono legal services to support community development efforts (similar to Chicago's Community Economic Development Law Program described earlier) can also increase community resources and family supports by helping low-income individuals overcome key legal barriers to economic opportunities (e.g., entrepreneurship and home buying). Similarly, microfinance programs provide access to small amounts of capital in the form of credit (small business loans), savings, microinsurance, or financial incentives. Microfinance programs have been [shown](#)  to reduce intimate partner violence and child abuse in developing countries and may play a role in creating healthy environments where children can thrive.

PHLN: As we move into summer with many children already having been out of school for a long time, what kind of gaps might there be in the safety net for children? And what kinds of support and assistance do communities need to ensure their children flourish during this time?

Matjasko: [Research](#)  [[PDF - 1.5MB](#)]  shows that some forms of violence peak in the summer. As a result, children and youth may be more likely to experience and witness violence in the summer months. Out-of-school time is associated with an increased risk of youth violence perpetration and victimization, which is likely [due to unstructured and unsupervised time with peers](#) . This is also a time when reports of child abuse and neglect might decrease because teachers, as [mandatory reporters](#)  [[PDF - 5.5MB](#)] , are not in contact with their students. Mandatory reporters are people in professions that are in regular contact with children are required to report suspected cases of child abuse and neglect. As a result, these decreases in reports might not reflect actual decreases in child abuse or neglect. It just might reflect the fact that actual cases go undetected in the summer.

[Evidence](#) consistently shows that connecting children and youth to caring adults can prevent violence perpetration and victimization. Mentoring programs (e.g., Big Brothers/Big Sisters) are [effective](#)  in providing children and youth with safe, stable, and nurturing relationships that help protect them from being exposed to violence. In addition, bolstering supports to parents and families during this time might also prevent child abuse, neglect, and other ACEs. Economic supports, such as [subsidized childcare](#) , can alleviate parental stress while also providing children with positive and supportive relationships with caring adults in community settings.

PHLN: How might communities and policy makers use the two Division of Violence Prevention resources for preventing child abuse and neglect and preventing adverse childhood experiences?

Matjasko: DVP has released [implementation guidance](#) for the violence prevention technical packages. This guidance is designed to support state and local health agencies and other stakeholders who have a role in planning, implementing, and evaluating violence prevention efforts. It has information on planning, partnerships, policy efforts, choosing strategies and approaches, adaptation, implementation, and evaluation. The guidance also has corresponding tools, stories, tip sheets, and resources related to each phase of implementation.

PHLN: What do you like best about your job?

Matjasko: I love the fact that my job is to apply our best science to better prevent ACEs and all forms of violence in the United States. CDC's approach to violence prevention really resonates with my educational and professional experiences. I also appreciate that we connect with partners across multiple sectors to better prevent violence and increase the reach of our work. Promoting safe, stable, and nurturing relationships and environments for all children and youth is vital to their current and future success, the health and resilience of their communities, and the health of our nation. I value the opportunity to work on this important issue.

PHLN: Do you have any hobbies?

Matjasko: Yes, it is important for me to have a sense of balance in my life. I am an avid cyclist. I love exploring the Atlanta food scene—especially up-and-coming chefs who get their starts in hole-in-the-wall places. You can also regularly find me at live theater venues and on Atlanta-area lakes in the summer. I'm also committed to community service. I am a former Big Sister, and I currently volunteer at the Atlanta Humane Society.

PHLN: Is there anything else you would like to add?

Matjasko: We know from CDC data that violence affects every community. CDC has also shown that violence can be prevented. We know that by stopping violence before it starts, we can improve mental health, physical health, and the prosperity of individuals, communities, and our nation. DVP has violence prevention tools online at [VetoViolence](#). It's important to help people and communities recover from experiences with violence. Finally, it's also important to continue to advance our understanding of the unique role that law and policy play in creating the contexts where all children can grow up in safe, stable, and nurturing relationships and environments. This includes conducting additional research on the effects that laws and policies have on multiple forms of violence. It also includes providing legal and practical supports to individuals and communities so that they prosper. For more information on all of CDC's violence prevention topics, research, and programs, please visit www.cdc.gov/violenceprevention.

Court Filings and Opinions

Colorado: A Colorado appellate court held that the juvenile court is the decision maker for determining if tribal enrollment is in a foster child's best interest. Two infants were placed in the state's custody pursuant to a dependency and neglect proceeding. Because the children's grandfather was an enrolled Chickasaw member, the children were eligible for tribal enrollment. However, because the children's father was not an enrolled member, the children were not automatically enrolled, so the Indian Child Welfare Act was inapplicable to the children at the time of the proceeding. The Logan County Department of Human Services notified the Chickasaw Nation, which determined the children were eligible for enrollment and sent application forms to the department. The human services department did not fill out the forms or send in the application. It was not until the department moved to terminate the mother's parental rights that the court learned the department had not made any attempt to enroll the children. The appellate court held that the juvenile court should decide when a child is eligible for enrollment and, therefore, the protections of the Indian Child Welfare Act when the tribe has an interest in enrolling that child. The court remanded the cases to the trial court for a hearing to determine whether tribal enrollment is in the children's best interest.

[Colorado v. K.C.](#)  [PDF – 1.4MB] 

Colorado Court of Appeals

Case No. 19CA1682

Filed May 28, 2020

Opinion by Judge Davidson

Mississippi: A Mississippi chancery court held that the state department of health must release the names of nursing homes with confirmed cases of COVID-19. In a public records request, the Pine Belt News requested information about long-term care facilities with confirmed cases, including the owners' information, the number of cases, when the cases were discovered and reported, and the number of tests done at those facilities. The health department responded that it would likely be unable to respond to the request for several months due to resource constraints. The court, though sympathetic to the "untenable position" of the health department, found that the health department had not acted in accordance with the legislative mandate for responding to requests for public notice. The court found that the Pine Belt News had acted in accordance with the statutory requirements and directed the health department to provide the requested information.

[Hattiesburg Publishing, Inc. v. Miss. State Dept. of Health](#)  [PDF – 210KB] 

Chancery Court of Hinds County, First Judicial District, Mississippi

Case No. 2020AP765-OA

Filed May 26, 2020

Opinion by Chancellor Tiffany Grove

Wisconsin: The Wisconsin Supreme Court overturned a state department of health order, finding that the secretary of health exceeded her authority in instituting the order. In a lengthy opinion, the court reasoned that the contents of the order were subject to the emergency rulemaking procedures set forth by the legislature, rendering it a rule created in violation of statutory requirements, instead of an order. In particular, the court held that rules creating criminal penalties must be subject to the rulemaking process to protect the public.

[Wisconsin Legislature v. Secretary-Designee Andrea Palm](#)  [PDF – 780KB] 

Supreme Court of Wisconsin

Case No. G2020-502 G/2

May 13, 2020

Opinion by Chief Justice Patience Drake Roggensack

Federal: The US Supreme Court upheld a California executive order aiming to prevent the spread of COVID-19 by limiting the number of people who could congregate in places of religious worship. The court addressed whether an order with more stringent restrictions on places of worship than on secular businesses violated the First Amendment. In a 5–4 decision, the court upheld the constitutionality of the order. In a concurring opinion, Chief Justice Roberts reasoned that the restrictions on churches was equally, if not more, lenient than those placed on comparable secular entities that typically involve larger gatherings. Roberts distinguished these businesses from essential businesses where individuals are not usually in close proximity for long periods of time. The concurrence found the order’s restrictions reasonable and consistent with the First Amendment.

[South Bay United Pentecostal Church v. Gavin Newsom](#)  [PDF – 107KB] 

United States Supreme Court

590 U.S. ____ (2020)

Filed May 29, 2020

Denial for injunctive relief by Justice Elena Kagan

Quiz Question: June 2020

What extra step is Tennessee taking to protect its first responders from COVID-19?

The first reader to correctly answer the quiz question will be featured in a mini public health law profile in the next edition of the *News*. Email your entry to PHLawProgram@cdc.gov with “PHL Quiz” as the subject heading (entries without the heading will not be considered). Good luck!

May 2020 Quiz Winner

Emma Scielzo, Rising 12th grader at Holton-Arms School, a high school in Bethesda, Maryland

April question:

What is a reverse quarantine?

Winning answer: A measure taken where senior citizens and vulnerable people, such as those with serious illnesses or comorbidities, are quarantined.

Employment organization:

Student at Holton-Arms School, Class of 2021, and upcoming summer intern for PHLP.



A brief explanation of your job:

I am very interested in pursuing a career in public health. I have been focusing my energies throughout high school on developing skills in the healthcare and global health fields, with an emphasis on the health and wellness of children and teens. I am the founder of [Kids4healthylife](#), a nonprofit organization with the mission of developing fun and interactive health and wellness resources for kids and teens. In addition to managing the website and educational resources found there, I design, organize, and lead annual leadership/wellness workshops for 8th grade girls to ease the transition to high school.

Education:

Rising 12th grader at Holton-Arms School, a high school in Bethesda, Maryland

Favorite section of the *Public Health Law News*:

My favorite section is the Profile in Public Health Law! I like to learn about people's career paths and the work that they are doing. I love how the profile showcases the depth and breadth of different aspects of public health law.

Why are you interested in public health law?

There are many public health topics that I would like to explore during college and in my career, but one area of particular interest relates to maternal and child health around the world. More specifically, I would like to learn about maternal nutrition and the impact of artificial colors and flavors on prenatal health and the long-term effects on attention, hyperactivity, and sleep patterns in children. I am also interested in exploring the potential impact of climate change on the prevalence of mosquito-borne diseases and the exacerbation of respiratory illnesses related to the rise in pollution. I believe that these public health issues will be of vital importance to my generation. I recognize that in order to fully appreciate the complexity of these issues, I must understand the relevant legal framework and how laws and regulations can effectively serve as a tool for promoting public health and protecting the public.

What is your favorite hobby?

I love to dance, watch movies, swim, and bake!

Quote of the Month

"The leadership cadre of these [hospital] organizations are going to need to make sacrifices commensurate with the sacrifices of their work force, not token sacrifices." —Jeff Goldsmith, president of Healthy Futures Consulting Firm

[Editor's note: This quote is from the article [Hospitals got bailouts and furloughed thousands while paying C.E.O.s millions](#) [The New York Times](#) (06/08/2020) Jessica Silver-Greenberg, Jesse Drucker, and David Enrich.]

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