

Financing Remains Big Hurdle

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For City-County Health Merger

Municipal League Urges Wider Scope, Points Up Variance In Tax Allotments

The quarter-century discussion of consolidation of city and county health departments here has taken a new direction — to include local government functions such as Maumee Valley Home, and to work with the Medical College of Ohio.

This is the "ultimate" plan advanced by the Greater Toledo Municipal League in a study of financing health services here.

The study points up the fact that health expenditures in Lucas County range from a low of 54 cents annually per person in Harbor View to more than six times that much in Ottawa Hills, where \$3.59 is spent per person. Toledo allots \$3.16 per capita.

This variance in public health tax funding is one of the biggest hurdles to be cleared as city and county officials begin discussing ways of combining, coordinating, or merging health services.

Talks Started In 1942

Merger talks started here in 1942. Now they have been precipitated anew by the resignation of its tax base. The loss of district lost a considerable portion of Dr. Hilbert Mark, Toledo health commissioner, effective in February.

"There have always been some procedural problems (and perhaps personality problems) that have helped to prevent the merger, but probably the biggest problem has been financing," Frank L. Britt, executive manager of the league, said.

The financing of county and city health services has differed traditionally.

Twenty years ago Toledo was spending \$1 per capita and the Lucas County general health district was spending 50 cents. Five years later Toledo had increased its share to \$1.90 per capita, while the county health district spent 80 cents.

Reasons For Differences

Reasons cited for the difference in health expenditures include:

► Toledo finances its health department from its general fund, which includes substantial funds from the city income tax. The majority of the health districts that make up the county health district are not permitted to have an income tax.

► Subdivisions in the Lucas County general health district do not have the property tax base enjoyed by Toledo.

When areas around the edge of Toledo were annexed, the Lucas County general health tax base was greater than the loss of population.

The remaining subdivisions had to pay more, to such an extent that two of the townships, Waterville and Springfield, do not receive as much in property taxes now as is their share of the cost of operating the district. The remainder of the cost is financed from other township funds.

Health Funds Deducted

Springfield Township, for example, deducts \$11,160 for the health district. This is 7 per cent more than the township's share of the property tax and 27.6 per cent of the township general fund.

Waterville township pays \$4,430 to the health district. This is 36.1 per cent more than its share of the property tax revenue and

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COSTS COMPARED TO POPULATION

Subdivision	1961 Per Capita	1969 Per Capita
Ottawa Hills	\$1.53	\$3.59
Toledo	1.98	3.16
Waterville Twp.	.94	2.38
Oregon	1.64	2.30
Monclova	1.01	2.26
Washington	1.01	2.24
Sylvania Twp.	.69	2.08
Providence	.68	1.84
Sylvania city	.61	1.82
Maumee	.95	1.74
Berkey	.77	1.68
Harding	.53	1.55
Holland	.45	1.53
Whitehouse	.61	1.42
Waterville village	.51	1.39
Richfield	.79	1.32
Jerusalem	.57	1.31
Springfield	.41	1.12
Swanton	.51	1.11
Spencer	.30	.82
Harbor View	.16½	.54

22 per cent of the total general fund for the township.

"The most obvious method of consolidating health services in Lucas County would be an outright merger," the league study of 1969 reports.

"Since a merger would result in Toledo becoming a part of a general health district, with ramifications such as the county budget commission approving the budget, officials of Toledo have been cool to this idea.

"Furthermore, there has never been a merger of a larger city health department with a general health district, and thus there isn't any experience on which to base a merger," the report said.

Four financing routes could be taken in case of a merger:

► Out-of-Toledo subdivisions would have to pay more.

► The merged department would provide two levels of service, one level in Toledo and a lower level outside Toledo.

► Toledo would have to subsidize services in out-of-city areas.

► A general health district may contract with a city health district. This is the route the city board of health prefers.

More State Aid Possible

There is also a possibility of an increased state subsidy for districts that merge.

The Lucas County general health district is made up of the townships and villages of Lucas County, plus the city of Sylvania. In addition, the cities of Oregon and Maumee contract with the general health district for services.

The amounts to be paid in 1970 by Oregon, Maumee, and the Maumee Board of Education are still to be negotiated. The budget for the Toledo health department for 1970 will be approved next March.

Approvals Required

A proposal to contract with Toledo for services must be made by the board of health of the general health district and approved by the district advisory council. The contract would include any or all services of the general health district. The contract must be approved by Toledo

and the state health department.

"The amount charged by Toledo will have to be an amount that the general health district can afford and hopefully would be less than the present cost," the league study notes.

"There is also the alternate proposal contained in the Graber Report (1955) that the two health departments in Lucas County jointly contract with a health commissioner and other key personnel and the two departments be housed in the same building.

"The ultimate would be to consolidate the two health departments with other local government health functions such as the Maumee Valley Hospital and the County Home. Such a combined agency could be housed in a building adjacent to the present county hospitals and could have a working arrangement with the nearby Medical College of Ohio.

"To be completely and absolutely realistic," the report said, "it must be admitted that perhaps more of the possibilities discussed in this report will save any dollars, but the goal should be to provide uniform health services that are the best that reasonable funds can provide for all of the residents of Lucas County."

Previous Efforts Recited

Previous efforts here to combine city-county health services include:

1942 — The Municipal League made a survey of community health problems and then recommended consolidation of city and county health staffs.

1945 — Plans for a proposed health center were drawn, and the league proposed that the plans provide space and facilities for a combined staff.

1949 — The proposal to combine the two departments won endorsements from the health section of the Council of Social Agencies and committees of the Academy of Medicine, Chamber

of Commerce, and League of Women Voters.

1955 — The Toledo Area Chamber of Commerce sponsored a study by the Ohio department of health in cooperation with the two local health departments. The report, prepared by E. A. Graber, strongly recommended merger of the two departments. An alternate proposed was a cooperative arrangement under which the two departments would have a joint health commissioner and the same key employees. Operating changes were also proposed.