

HOUSE BILL REPORT

HB 1737

As Reported by House Committee On:
Health Care

Title: An act relating to public health improvement.

Brief Description: Establishing the joint public health financing committee.

Sponsors: Representatives Schual-Berke, Cody, Clibborn, Fromhold, Bailey, Woods, Moeller, Darneille and Haler.

Brief History:

Committee Activity:

Health Care: 2/24/05, 2/28/05 [DPS].

Brief Summary of Substitute Bill

- Creates the Public Health Financing Task Force to recommend sources and levels of dedicated funding for public health services.

HOUSE COMMITTEE ON HEALTH CARE

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 14 members: Representatives Cody, Chair; Campbell, Vice Chair; Morrell, Vice Chair; Bailey, Ranking Minority Member; Curtis, Assistant Ranking Minority Member; Appleton, Clibborn, Condotta, Green, Hinkle, Lantz, Moeller, Schual-Berke and Skinner.

Minority Report: Do not pass. Signed by 1 member: Representative Alexander.

Staff: Chris Blake (786-7392).

Background:

Since 1994 the Department of Health (Department) has published the Public Health (Services) Improvement Plan (Plan) every two years. By statute, the Department must develop the Plan in consultation with the Board of Health, local health jurisdictions, area Indian health services, and other organizations. The Plan must address standards for public health protection, strategies and schedules for improving public health programs, and recommended levels of dedicated funding for public health services. The 2004 version of the Plan recommended the formulation of a specially organized group to study alternative financing strategies for the public health system.

Summary of Substitute Bill:

The Public Health Financing Task Force (Task Force) is created. The voting members of the Task Force consist of a member of each caucus from the House and Senate committees with principal jurisdiction over health care and fiscal matters. The nonvoting members include a representative of the Governor's office and representatives of the Department of Health, Association of Counties, Association of Local Public Health Officials, the State Board of Health, and others as requested by the chair. The Task Force shall appoint a four-person executive committee and may appoint subcommittees and advisory groups as necessary.

The Task Force shall recommend sources and levels of dedicated funding for public health services. The final report is due by July 1, 2006.

Substitute Bill Compared to Original Bill:

The substitute bill removes the requirement that the health care and fiscal committee chairs, vice-chairs, and ranking minority members serve on the task force and allows for a member from each caucus from those committees to serve on the task force. It is specified that the non-legislative members be representatives of the Department of Health, Association of Counties, Association of Local Public Health Officials, the State Board of Health, and others as requested by the chair of the Task Force. All of the topics except for the one related to recommending sources and levels of funding for public health services are removed.

Appropriation: None.

Fiscal Note: Requested on February 19, 2005.

Effective Date of Substitute Bill: The bill takes effect 90 days after adjournment of session in which bill is passed.

Testimony For: Without stable, consistent, and adequate funding for public health, there will be a public health crisis in Washington and the citizens will be vulnerable. State and local funding for public health has been decreasing over the years.

Testimony Against: None.

Persons Testifying: Susie Tracy, Washington State Medical Association and the Public Health Roundtable; Larry Jecha, Washington State Association of Local Public Health Officials and the Washington State Medical Association; Mary Selecky, Department of Health; Greg Vigdor, Washington Health Foundation; and Jeff Mero, Association of Washington Public Health Districts, Washington State Hospital Association, and Washington State Public Health Association.

Persons Signed In To Testify But Not Testifying: None.