

HOUSE BILL REPORT

HB 1274

As Passed House:
February 14, 2011

Title: An act relating to the population restrictions for a geographic area to qualify as a rural public hospital district.

Brief Description: Concerning the population restrictions for a geographic area to qualify as a rural public hospital district.

Sponsors: Representatives Smith, Lytton, Morris, Bailey, Kristiansen and Pearson.

Brief History:

Committee Activity:

Local Government: 1/26/11, 1/28/11 [DP].

Floor Activity:

Passed House: 2/14/11, 93-0.

<p>Brief Summary of Bill</p> <ul style="list-style-type: none">Increases the city population limit within the definition of a rural public hospital district from 30,000 to 50,000 persons.
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HOUSE COMMITTEE ON LOCAL GOVERNMENT

Majority Report: Do pass. Signed by 9 members: Representatives Takko, Chair; Tharinger, Vice Chair; Angel, Ranking Minority Member; Asay, Assistant Ranking Minority Member; Fitzgibbon, Rodne, Smith, Springer and Upthegrove.

Staff: Miranda Leskinen (786-7291) and Ethan Moreno (786-7386).

Background:

Public hospital districts, also known as public health care service districts, are community-created, publicly-owned governmental entities authorized by the state to deliver health services appropriate to the public, provided services include acute, outpatient, rehabilitative, and nursing home care, as well as ambulance services.

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

There are 56 public hospital districts in Washington. Nearly half of the hospitals in the state are public hospital districts, most of which are in rural areas. A rural public hospital district is defined as a public hospital district that does not include cities with more than 30,000 residents.

Rural public hospital districts have the authority to make cooperative agreements and contracts with other rural public hospital districts to meet district needs. These agreements and contracts may specify the following:

- health services allocations among district-owned and operated facilities;
- medical equipment and technologies allocations and combined purchases;
- health care service delivery and payment with public and private entities; and
- other cooperative arrangements.

Summary of Bill:

The city population limit used to qualify a public hospital district as a rural public hospital district is increased from 30,000 to 50,000 persons.

Appropriation: None.

Fiscal Note: Not requested.

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

Staff Summary of Public Testimony:

(In support) Rural public hospital districts may currently enter into cooperative agreements with one another to help meet district needs. This provision is essential to providing necessary medical services to small communities with limited resources. Raising the city population limit within the current definition of a rural public hospital district will help to preserve these essential relationships.

(Opposed) None.

Persons Testifying: Representative Smith, prime sponsor; and Ben Linderngel, Association of Washington Public Hospital Districts.

Persons Signed In To Testify But Not Testifying: None.