

SENATE BILL REPORT

SHB 1635

AS REPORTED BY COMMITTEE ON GOVERNMENTAL OPERATIONS,
APRIL 3, 1991

Brief Description: Providing for taxes to fund emergency medical care services.

SPONSORS: House Committee on Local Government (originally sponsored by Representatives Haugen, Day, D. Sommers, Nealey, Orr and Wynne).

HOUSE COMMITTEE ON LOCAL GOVERNMENT

HOUSE COMMITTEE ON REVENUE

SENATE COMMITTEE ON GOVERNMENTAL OPERATIONS

Majority Report: Do pass.

Signed by Senators McCaslin, Chairman; Madsen, and Sutherland.

Staff: Martin Lovinger (786-7443)

Hearing Dates: April 3, 1991

BACKGROUND:

Any county, city or town, emergency medical service district, public hospital district, or fire protection district is authorized to impose a property tax levy up to 25 cents per \$1,000 of assessed value of property for the provision of emergency medical services.

It has been suggested that the current 25 cents is not sufficient to meet the need for emergency medical services, and that it shouldn't be necessary to run an excess levy each year to raise the required funds. Various local governments have recommended that an additional 25 cents should be authorized for emergency medical services if the tax capacity is available for the taxing district.

SUMMARY:

An additional property tax levy of 25 cents per \$1,000 of assessed value, or a total of 50 cents per \$1,000 of assessed value, may be imposed by a county, city or town, emergency medical service district, public hospital district, or fire protection district for emergency medical services.

No taxing district may levy this additional 25 cents if there is pro rata reduction or elimination of levy rates for junior taxing districts within the boundaries of the taxing district. The additional 25 cent levy does not affect pro rationing.

Appropriation: none

Revenue: none

Fiscal Note: none requested

TESTIMONY FOR:

The cost of providing medical services has increased at a much greater rate than the revenue raised under the currently authorized tax levy. People demand the best emergency medical services, but the demand is difficult, if not impossible, to meet due to the shortfall of revenue.

TESTIMONY AGAINST: None

TESTIFIED: David Byrnes, Medical Services Officer, Spokane Fire Dept.