

SENATE BILL REPORT

SCR 8419

As Passed Senate, February 25, 2004

Brief Description: Creating a joint select committee on health disparities.

Sponsors: Senators Franklin, Deccio, Thibaudeau, Keiser, T. Sheldon, McAuliffe and Kohl-Welles.

Brief History:

Committee Activity: Health & Long-Term Care: 2/3/04, 2/4/04 [DP].

Passed Senate: 2/25/04, 49-0.

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: Do pass.

Signed by Senators Deccio, Chair; Winsley, Vice Chair; Brandland, Franklin, Keiser, Parlette and Thibaudeau.

Staff: Rhoda Donkin (786-7198)

Background: In its final report on health disparities in 2001, the State Board of Health identified a disproportionate amount of disease and premature death in communities of color in the state. For several years, the board has made health disparities in communities of color one of its top public health priorities. Research has shown that increasing the number of people of color in the healthcare workforce, improving childhood intervention programs, and expanding the cultural competence of everyone who works in health care are three areas that could reduce health disparities in this state. There is interest in consolidating what is known about health disparities and providing the legislature with recommendations.

Summary of Bill: A joint select committee on health disparities is created to identify opportunities for improving health care status and to address health disparities in communities of color. The committee includes four members of each chamber of the Legislature from committees with jurisdiction over health care and education issues. The committee must consider at least the following areas before it makes recommendations to the Legislature by November 2005: the impact of early childhood development programs, barriers to culturally and linguistically appropriate health care; ways to increase people of color in the health care workforce; ways to enumerate the racial and ethnic composition of the health work force; and the impact of reductions in health care expenditures on communities of color.

Appropriation: None.

Fiscal Note: Not requested.

Testimony For: There is a critical shortage of people in the health care workforce who understand and represent people of color. We need to pull together what we know about the

growing incidence of diseases like HIV/AIDS in communities of color, and improve access to quality care.

Testimony Against: None.

Testified: PRO: Dr. Maxine Hayes, Department of Health; Sakara Remmu, NAACP; Janice Martin, Safe Homes; Rodslyn Kenney, People of Color Against AIDS/HIV; Kim Moore, Health Workforce Diversity Network; Zelma Jackson, Committee on African-American and BF Health Alliance.

Signed In/Did Not Testify: PRO: Judith Puzon, See Mar; Antonio Grata, Commission on African-American Affairs; Alton McDonald, National Action Network; Kevin Glackin Coley, Children's Alliance.

House Amendment(s): Language directs the committee to consider ways of giving consumers more choice in health care providers. The committee must encourage the review of racial and ethnic composition of the health care workforce.

The committee's tasks must include how health care disparities affect women, including the impact of early childhood development programs on women's health, gender appropriate health care and health education materials; and ways to enumerate the composition of the health care workforce by gender.