

SENATE BILL REPORT

2SSB 6197

As Passed Senate, February 13, 2006

Title: An act relating to the creation of the governor's interagency coordinating council on health disparities.

Brief Description: Creating the governor's interagency coordinating council on health disparities.

Sponsors: Senate Committee on Ways & Means (originally sponsored by Senators Franklin, Regala, Eide, Prentice, Fraser, Brown, Kline, Kohl-Welles and Shin).

Brief History:

Committee Activity: Health & Long-Term Care: 1/12/06, 1/26/06 [DPS-WM].

Ways & Means: 1/31/06, 2/6/06 [DP2S, w/oRec].

Passed Senate: 2/13/06, 43-4.

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: That Substitute Senate Bill No. 6197 be substituted therefor, and the substitute bill do pass and be referred to Committee on Ways & Means.

Signed by Senators Keiser, Chair; Thibaudeau, Vice Chair; Benson, Franklin, Kastama, Kline and Poulsen.

Staff: Sharon Swanson (786-7447)

SENATE COMMITTEE ON WAYS & MEANS

Majority Report: That Second Substitute Senate Bill No. 6197 be substituted therefor, and the second substitute bill do pass.

Signed by Senators Prentice, Chair; Fraser, Vice Chair, Capital Budget Chair; Doumit, Vice Chair, Operating Budget; Fairley, Kohl-Welles, Pridemore, Rasmussen, Regala, Roach, Rockefeller and Thibaudeau.

Minority Report: That it be referred without recommendation.

Signed by Senators Zarelli, Ranking Minority Member; Brandland, Parlette, Pflug and Schoesler.

Staff: Tim Yowell (786-7772)

Background: Persons of color experience significant disparities from the general population in education, employment, healthful living conditions, access to health care, and other social determinants of health. The inability to access culturally appropriate health care results in higher rates of morbidity and mortality for persons of color.

For quite some time, communities of color have been voicing concerns about health disparities. Out of these concerns and policy makers' sensitivity to the issue, Senate Concurrent Resolution 8419 was introduced and passed by the Legislature in 2004 creating the Joint Select Committee on Health Disparities (Committee).

The Committee issued a report on health disparities in Washington on November 1, 2005. The report included findings and recommendations to be considered by the Legislature. The Committee identified the need to facilitate communication between state agencies, communities of color, and the public and private sector regarding the issues surrounding health disparities.

Summary of Bill: The Governor's Interagency Coordinating Council (Council) is established.

The twenty member council consists of members from state commissions, boards and councils relevant to education, commerce, health care consumers, and workforce training.

The Council is required to hold public hearings, gather information, and conduct studies to understand how the actions of state government can contribute to or help reduce health disparities.

The Council is required to meet at least six times per calendar year.

The Council must design an action plan to eliminate health disparities in Washington State by 2012 and present progress reports to the Legislature every two years beginning on January 15, 2008, until completion of the plan in 2012.

The Joint Legislative Audit and Review Committee must conduct a review of the Council and present its findings to the Legislature no later than December 1, 2016.

Appropriation: None.

Fiscal Note: Available.

Committee/Commission/Task Force Created: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Testimony For (Health & Long-Term Care): Currently, Washington is ranked fourteenth in the nation in terms of healthiest state. There is no reason our state should not be number one. Many separate organizations are working to address the many causes of health disparities. Unfortunately, communication between the various organizations is uncoordinated at best. The creation of the Governor's Interagency Counsel on Healthcare Disparities is a step in the right direction.

Testimony Against (Health & Long-Term Care): None.

Who Testified (Health & Long-Term Care): PRO: Dr. Karen A. Johnson, Citizen; T. Wolf, State Board of Health; Frankie T. Manning, State Board of Health; Greg Vigdor, Washington Health Federation; Arlee Young, Citizen; Alton McDonald, National Action Network.

Testimony For (Ways & Means): Health disparities are a major issue, both locally and nationwide. This bill, along with all the others that have been proposed by the Joint Select Committee on Health Disparities, represents the input of a wide range of people, including health professionals, higher education institutions, and all of the minority affairs commissions. Addressing health disparities will improve health, and reduce health care costs. Establishing an interagency council will help break down the silos that can get in the way of addressing the multiple, inter-related causes of health disparities.

Testimony Against (Ways & Means): None.

Who Testified (Ways & Means): PRO: Senator Rosa Franklin, prime sponsor.

House Amendment(s): The House amendment requires the Board of Health to conduct health impact reviews in collaboration with the Governor's Interagency Coordinating Council on Health Disparities. The term health impact assessment is changed to health impact review. Any state legislator or the Governor can request a health impact review. The amendment references sanitary environmental conditions, clean water, clean air, and toxin-free environments from the definition of social determinants of health. Women's health issues and chronic kidney disease, and oral health are added to the list of diseases and conditions to consider in the action plan. Representatives from the Office of the Insurance Commissioner, the Office of the Superintendent of Public Instruction, and the Department of Early Learning are added to the Governor's Interagency Coordinating Council on Health Disparities.