

FINAL BILL REPORT

ESHCR 4404

Synopsis as Enacted

Brief Description: Continuing the work of the joint select committee on health reform implementation.

Sponsors: House Committee on Health Care & Wellness (originally sponsored by Representatives Schmick, Cody, Hinkle and Frockt).

House Committee on Health Care & Wellness
Senate Committee on Health & Long-Term Care

Background:

Enacted in 2010, the federal Patient Protection and Affordable Care Act (PPAC Act), along with the Health Care and Education Reconciliation Act, provides for a wide variety of changes in health care and health insurance over a number of years.

Soon after enactment of the PPAC Act, the Governor's Health Care Cabinet (Cabinet) began coordinating health reform efforts among the state agencies and convening work groups to assist the Cabinet in understanding the administrative and policy impacts. In addition, the Realization Committee, established in December 2009 by the Office of the Insurance Commissioner, has been functioning as a forum for the consideration of health insurance exchanges and insurance market reforms.

In 2010 the State Omnibus Operating Appropriations Act (Engrossed Substitute Senate Bill 6444) established a Joint Select Committee on Health Reform Implementation (Joint Select Committee) to review policies related to health reform. The Joint Select Committee met four times during the 2010 legislative interim and formed three advisory groups on workforce, exchange and insurance reforms, and low-income coverage. In addition to receiving reports and recommendations from these advisory groups, the Joint Select Committee received updates and recommendations from other state agencies working on aspects of health reform, including the Governor's Office, the Office of the Insurance Commissioner, the Health Care Authority, and the Department of Social and Health Services.

The authorization for the Joint Select Committee expires June 30, 2011.

Summary:

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.

The Joint Select Committee on Health Reform Implementation (Joint Select Committee) is continued. The Joint Select Committee membership will consist of the chairs of the health committees of the Senate and the House and eight additional legislative members, four from the Senate and four from the House, appointed by the leadership of the two largest caucuses of the Senate and the House. The Governor will be invited to appoint a non-voting liaison member.

The chairs of the Senate and House health care committees will serve as co-chairs. The co-chairs may direct the formation of advisory committees to focus on specific topic areas, including insurance regulation, access to and expansion of public and private programs, cost containment, and workforce issues. Interested stakeholders and experts may be invited to advise the Joint Select Committee.

The co-chairs must establish an advisory committee to provide advice and recommendations to the Department of Social and Health Services and the Health Care Authority in the development of an implementation plan to coordinate the purchase and delivery of acute care, long-term care, and behavioral health services.

The Joint Select Committee expires on or before June 30, 2014.

Votes on Final Passage:

House	92	5	
Senate	47	1	(Senate amended)
House	90	5	(House concurred)