SENATE BILL REPORT 2ESSB 5100

As Amended by House, March 6, 2008

Title: An act relating to information for students regarding health insurance.

Brief Description: Regarding health insurance information for students.

Sponsors: Senate Committee on Early Learning & K-12 Education (originally sponsored by Senators Hobbs, McAuliffe, Regala, Fairley, Shin, Weinstein, Murray, Keiser, Prentice, Kline, Spanel, Fraser, Tom, Kohl-Welles and Rasmussen).

Brief History:

Committee Activity: Health & Long-Term Care: 1/22/07 [w/oRec-EDU].

Early Learning & K-12 Education: 2/14/07, 2/26/07 [DPS, DNP].

Passed Senate: 3/13/07, 30-16; 2/18/08, 33-15.

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: That it be referred to Committee on Early Learning & K-12 Education without recommendation.

Signed by Senators Keiser, Chair; Franklin, Vice Chair; Pflug, Ranking Minority Member; Carrell, Fairley, Kastama, Kohl-Welles, Marr and Parlette.

Staff: Mich'l Needham (786-7442)

SENATE COMMITTEE ON EARLY LEARNING & K-12 EDUCATION

Majority Report: That Substitute Senate Bill No. 5100 be substituted therefor, and the substitute bill do pass.

Signed by Senators McAuliffe, Chair; Tom, Vice Chair; Brandland, Eide, Hobbs, Kauffman, Oemig, Rasmussen and Weinstein.

Minority Report: Do not pass.

Signed by Senators Holmquist, Ranking Minority Member; Clements, Hewitt and Zarelli.

Staff: Kimberly Cushing (786-7421)

Background: School districts are currently required to provide a number of health-related activities, including screenings for vision, hearing, and scoliosis; review of immunization records; and attainment of a medication or treatment plan for a child with a life threatening health condition.

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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.

Many school districts provide an informational packet which includes information on public insurance programs like Medicaid and the Children's Health Insurance Program, as well as other programs like free and reduced-price meals. The Office of Superintendent of Public Instruction (OSPI), in conjunction with Department of Social and Health Services (DSHS) and other departments, distributes a packet of informational materials to all 296 school districts. The 285 school districts participating in the food programs are required by the United States Department of Agriculture to distribute the packet to ensure the application for free and reduced price meals is made available.

Summary of Second Engrossed Substitute Bill: By July 1, 2008, the Superintendent of Public Instruction (SPI) must select up to six school districts to implement pilots regarding health insurance. The selected districts should include those from urban and rural areas, and eastern and western Washington. Beginning with the 2008-09 school year, the pilot districts are required to ask whether students have health insurance and allow parents or guardians to authorize the sharing of information for this purpose.

By December 1, 2008, each district must develop a list of students without insurance. The list must include identifiers and parent or guardian contact information. By September 1, 2008, DSHS and the SPI must develop a model agreement for schools to share student information, and by January 1, 2009, each pilot school and a local outreach organization must put in place an agreement to share the list of students without insurance. The outreach organization must use the information to assist families in enrolling students on a medical program. Beginning July 1, 2009, the pilot schools must annually report to the SPI. Beginning December 1, 2009, DSHS and the SPI must annually report to the Legislature.

"Outreach organization" is defined as a nonprofit organization or a local government entity either contracting with DSHS or otherwise qualified to provide outreach, education, and enrollment services to uninsured children.

A null and void clause is included.

Appropriation: None.

Fiscal Note: Available.

Committee/Commission/Task Force Created: No.

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

Staff Summary of Public Testimony on Original Bill (Health & Long-Term Care): PRO: Schools are the natural place to connect with students and coordinate health information.

OTHER: School nurses are the logical people to connect with students and families, but there is a very high student to nurse ratio now. More active outreach efforts will be needed to really reach these families and assist them with enrollment.

Persons Testifying (Health & Long-Term Care): PRO: Senator Hobbs, prime sponsor.

OTHER: Lonnie Johns-Brown, School Nurses Organization of Washington; Liz Arjun, Children's Alliance.

Staff Summary of Public Testimony on Original Bill (Early Learning, K-12 & Higher Education): PRO: Healthy children learn better. The intent to require schools to collect information about insurance is a positive step forward. Health insurance information can be made available in many ways. Getting the information to students is great, but it is also important to provide community outreach to help families fill out the paperwork. The bill should allow for community partnerships to collect data and encourage health coverage for the whole family.

CON: This bill creates an unfunded mandate.

Persons Testifying (Early Learning, K-12 & Higher Education): PRO: Senator Hobbs, prime sponsor; Lonnie Johns-Brown, School Nurses Organization of Washington; Jerry Bender, Association of Washington School Principals; Lucinda Young, Washington Education Association; Holly Detzler, Communities Connect.

CON: Mitch Denning, Alliance of Education Associations.

House Amendment(s): Delays the selection of the pilot schools to August 2008 rather than July 2008. Requires the pilot schools and OSPI to each submit one report rather than annual reports. Requires OSPI to include in its report information about the cost of collecting and reporting data.

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