SENATE BILL REPORT EHB 2360

As of March 16, 2010

Title: An act relating to consolidation of administrative services for AIDS grants in the department of health.

Brief Description: Concerning consolidation of administrative services for AIDS grants in the department of health.

Sponsors: Representative Darneille.

Brief History: Passed House: 2/05/10, 97-0.

Committee Activity: Ways & Means: 4/21/09.

SENATE COMMITTEE ON WAYS & MEANS

Staff: Jenny Greenlee (786-7711)

Background: In 1988 regional AIDS service networks (AIDSNETs) were established to serve as local entities that conduct planning activities for coordinating the availability of community services for individuals who are HIV-positive or have AIDS. The boundaries of the AIDSNETs reflect the Department of Social and Health Services' six-region service system. The most populous county in each region is designated as the lead county to coordinate with the local health departments within the region to develop a regional plan. The regional plans include components related to administration; available services; a service delivery model; and budget, staffing, and caseload projections.

The Department of Health (Department) contracts with the AIDSNETs to implement the plans within each region. The plans emphasize contracting with community service providers, such as hospitals, major volunteer organizations, and health care organizations, to implement the plans. The Department of Health provides funding to the community providers through the AIDSNETs to conduct plan-related activities.

Summary of Bill: As of January 1, 2011, AIDSNETs are eliminated and the requirement to conduct regional planning for community services for individuals with AIDS is discontinued. The Department, rather than the AIDSNETs, is responsible for distributing grants to support community services for people who are HIV positive or have AIDS. The Department must establish criteria for awarding the grants for testing, counseling, education, case

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management, notification of sexual partners regarding infected individuals, planning, coordination, and intervention strategies for high risk individuals.

Appropriation: None.

Fiscal Note: Available.

Committee/Commission/Task Force Created: No.

Effective Date: The bill takes effect on January 1, 2011.

Staff Summary of Public Testimony: PRO: Any cut to administrative costs, rather than direct service, is always appreciated. This bill gives DOH some flexibility in developing a statewide system, which will benefit the diverse areas of the state, both rural and urban. This will give community programs incentive to collaborate across the state. The bill has oversight through the Governor's Advisory Council on HIV/AIDS, which will review and have input on the proposals by DOH.

Persons Testifying: PRO: Carey Morris, Lifelong AIDS Alliance.

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