
**ENGROSSED SUBSTITUTE HOUSE CONCURRENT RESOLUTION
4404**

AS AMENDED BY THE SENATE

Passed Legislature - 2011 Regular Session

State of Washington 62nd Legislature 2011 Regular Session

By House Health Care & Wellness (originally sponsored by
Representatives Schmick, Cody, Hinkle, and Frockt)

READ FIRST TIME 02/16/11.

1 WHEREAS, The patient protection and affordable care act became law
2 on March 23, 2010, enacting broad changes to every element of the
3 nation's health care system over the course of a four-year period; and
4 WHEREAS, Through 2014, the federal government will be adopting
5 numerous regulations to implement the patient protection and affordable
6 care act that state policymakers will need to actively follow so that
7 the state can develop the most appropriate response to the changes in
8 the health care system for the people of the state of Washington; and
9 WHEREAS, The patient protection and affordable care act raises many
10 policy considerations that states will have to review prior to
11 implementing the act, including the creation of a health benefit
12 exchange, the expansion of medicaid, health insurance design, the
13 development of a dynamic health care workforce, and the role of public
14 health and prevention efforts; and
15 WHEREAS, The joint select committee on health reform implementation
16 was established in 2010 to provide a forum for public comment and
17 expert advice on the development of Washington's response to the
18 patient protection and affordable care act; and
19 WHEREAS, The joint select committee on health reform implementation

1 expires on July 1, 2011, despite the need to continue to monitor
2 changes to the health care system and the implementation activities of
3 the executive branch;

4 NOW, THEREFORE, BE IT RESOLVED, By the House of Representatives of
5 the state of Washington, the Senate concurring, That the joint select
6 committee on health reform implementation continue its work; and

7 BE IT FURTHER RESOLVED, That the membership of the joint select
8 committee on health reform implementation shall consist of the
9 following: (1) The chairs of the health committees of the senate and
10 the house of representatives, who shall serve as cochairs; (2) four
11 additional members of the senate, two each appointed by the leadership
12 of the two largest caucuses in the senate; and (3) four additional
13 members of the house of representatives, two each appointed by the
14 leadership of the two largest caucuses in the house of representatives.
15 The governor shall be invited to appoint, as a liaison to the joint
16 select committee, a person who shall be a nonvoting member; and

17 BE IT FURTHER RESOLVED, That the cochairs may direct the formation
18 of advisory committees, if desired, to focus on specific topic areas,
19 such as insurance regulation, access to and expansion of public and
20 private programs, cost containment, and workforce issues, and may
21 invite interested stakeholders and additional experts to advise the
22 joint select committee on health reform implementation. The joint
23 select committee shall establish an advisory committee to provide
24 advice and recommendations to the department of social and health
25 services and the health care authority in the development of its
26 implementation plan required by chapter ... (House Bill No. 1738), Laws
27 of 2011 to coordinate the purchase and delivery of acute care, long-
28 term care, and behavioral health services; and

29 BE IT FURTHER RESOLVED, That the joint select committee on health
30 reform implementation expires on or before June 30, 2014.

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