

SENATE BILL REPORT

SB 5493

As Reported By Senate Committee On:
Health & Long-Term Care, February 28, 2005

Title: An act relating to removing state funding restrictions from the hepatitis C state plan.

Brief Description: Removing state funding restrictions from the hepatitis C state plan.

Sponsors: Senators Kastama, Deccio and Benson; by request of Department of Health.

Brief History:

Committee Activity: Health & Long-Term Care: 2/10/05, 2/28/05 [DPS, w/oRec].

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: That Substitute Senate Bill No. 5493 be substituted therefor, and the substitute bill do pass.

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

Minority Report: That it be referred without recommendation.

Signed by Senators Benson, Brandland, Johnson and Parlette.

Staff: Sharon Swanson (786-7447)

Background: Hepatitis C is a liver disease caused by the hepatitis C virus (HCV). It is a bloodborne infection that can lead to liver failure, liver cancer, or cirrhosis. Often the virus does not cause symptoms or signs when first transmitted and because of this, many people do not know they are infected. The hepatitis C virus is transmitted primarily through exposure to infected blood. The virus can be spread through sharing needles, needle sticks, or from an infected mother to her baby during birth.

An estimated 100,000 Washington residents may be infected with hepatitis C. Since December 2000, providers have been required to report cases of hepatitis C to the Department of Health.

In April 2003, the legislature passed SB 5039 requiring the Department of Health to design and implement a state plan for the prevention and management of hepatitis C with the use of federal and private funds. State funds were not allocated for the creation or implementation of the plan.

Summary of Substitute Bill: The language prohibiting the use of state funds is removed.

The Secretary of Health must develop a state plan for the prevention and management of hepatitis C only to the extent that funding is available.

The state plan recommendations must be implemented by the Secretary of Health only to the extent that funding is available, including grants.

State funds that are used to implement the hepatitis C plan be limited to hepatitis C prevention, education and testing and must not supplant any current state funding directed to HIV prevention, education and testing.

Approaches to hepatitis C testing should be in venues appropriate to the target populations.

Substitute Bill Compared to Original Bill: Adds language clarifying that state funds used for the hepatitis C strategic plan must not supplant any current state funding directed to HIV prevention, education, and testing.

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: Many people from many different walks of life are affected by this disease. There is a great deal of misunderstanding about the causes of this disease. We need a broad based effort to combat the ignorance surrounding the disease as well as increased efforts to combat the spread of the disease itself. This is a statewide health problem, but no state money is being used to fight it. That fact sends a mixed message.

Testimony Against: None.

Who Testified: PRO: Senator Jim Kasatam, prime sponsor; Vic Coleman, Department of Health; Michael Ninburg, Hepatitis Education Project.