

HOUSE BILL REPORT

HB 2627

As Reported by House Committee On: Finance

Title: An act relating to authorizations of proposals for emergency medical care and service levies.

Brief Description: Concerning authorizations of proposals for emergency medical care and service levies.

Sponsors: Representatives Springer and Stokesbary.

Brief History:

Committee Activity:

Finance: 1/23/18, 2/2/18 [DPS].

Brief Summary of Substitute Bill

- Permits taxing districts to continue an existing levy with simple majority ballot approval, regardless of whether the tax rate changes.
- Requires approval from at least three-fifths of specified taxing districts in order to place a countywide levy on a ballot.

HOUSE COMMITTEE ON FINANCE

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 9 members: Representatives Lytton, Chair; Frame, Vice Chair; Nealey, Ranking Minority Member; Dolan, Pollet, Springer, Stokesbary, Wilcox and Wylie.

Minority Report: Do not pass. Signed by 2 members: Representatives Orcutt, Assistant Ranking Minority Member; Condotta.

Staff: Richelle Geiger (786-7139).

Background:

Emergency Medical Service Levy.

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.

An emergency medical service (EMS) levy is a regular voter-approved property tax levy used to provide emergency medical care or services. An EMS levy may be authorized for six years, 10 years, or permanently. An EMS levy must be approved by 60 percent of registered voters when the voter turnout exceeds 40 percent of the voter turnout at the last general election. When the turnout is less than 40 percent of voter turnout at the last general election, the "yes" votes must exceed 24 percent of the total number of votes in the last general election. If approved, a taxing district can impose a regular property tax levy at a rate not to exceed 50 cents per \$1,000 assessed value.

Taxing districts that are permitted to seek authorization for an EMS levy are counties, emergency medical service districts, cities or towns, public hospital districts, urban emergency medical service districts, regional fire protection authorities, and fire protection districts.

The uninterrupted continuation of a six-year or 10-year EMS levy that has a maximum levy rate the same as or lower than the prior voter-approved levy requires simple majority voter approval. If the maximum tax rate is higher than the prior voter-approved levy, the levy requires supermajority voter approval.

A countywide levy proposal may not be placed on a ballot without approval of the legislative authority of every city in the county that has a population in excess of 50,000.

Summary of Substitute Bill:

Taxing districts are permitted to continue an existing six-year or 10-year levy with simple majority ballot approval, regardless of whether the tax rate increases, decreases, or remains the same.

In order to include a countywide EMS levy on a ballot, three-fifths supermajority approval is required from the legislative authority of all taxing districts in a county with a population greater than 50,000 that provides emergency medical services reimbursable under the countywide levy.

Substitute Bill Compared to Original Bill:

The changes to the definition of "taxing authority" are removed. In effect, this restores the definition of "taxing authority" back to current law.

In order to include a countywide EMS levy on a ballot, 75 percent approval is required from the legislative authority of all cities with a population exceeding 50,000 within the county.

Appropriation: None.

Fiscal Note: Available.

Effective Date of Substitute Bill: The bill takes effect 90 days after adjournment of the session in which the bill is passed.

Staff Summary of Public Testimony:

(In support) Initially, it made sense to require all cities with a population over 50,000 in a county to approve an EMS levy before it is placed on the ballot. This was because the city would give up its right to levy the EMS. The requirement for unanimity is outdated.

Currently, a small group of people could destroy the best EMS services in the world. The process should be more democratic. Some cities don't provide fire services but are still required to authorize an EMS levy being placed on the ballot.

(Opposed) The changes to the ballot requirements are happening too fast. All concerned parties should have an opportunity to be heard. If a city has a population over 50,000 but no fire district, it would lose its voice in the ballot placement process.

Each city should be assured its EMS services will not be compromised.

Requiring 100 percent consensus among cities is one of the reasons why EMS levies have been successful.

The bill as drafted goes too far.

(Other) Cities are sympathetic to the situation. One jurisdiction choosing not to participate could stand in the way of an EMS levy getting on the ballot.

The question is what the appropriate threshold is and who should be included in the decisionmaking process. Multiple cities agree that requiring 75 percent approval of cities with a population greater than 50,000 is a good compromise and progress towards making the process more democratic.

Persons Testifying: (In support) Representative Springer, prime sponsor; and Geoff Simpson, Washington State Council of Fire Fighters.

(Opposed) Kurt Triplett, City of Kirkland; and Chris Roberts and Kathleen Collins, City of Shoreline.

(Other) Doug Levy, Cities of Redmond, Kent, and Everett; and Thomas Hornish, City of Sammamish.

Persons Signed In To Testify But Not Testifying: None.