H-2243.1

SUBSTITUTE HOUSE BILL 1737

State of Washington 59th Legislature 2005 Regular Session

By House Committee on Health Care (originally sponsored by Representatives Schual-Berke, Cody, Clibborn, Fromhold, Bailey, Woods, Moeller, Darneille and Haler)

READ FIRST TIME 03/04/05.

- 1 AN ACT Relating to public health improvement; and creating new
- 2 sections.

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- 3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 4 NEW SECTION. **Sec. 1.** The legislature finds that:
 - (1) The public health system as defined in RCW 43.70.575 is essential to fulfilling the state's constitutional responsibility to protect the health and safety of its citizens.
 - (2) The population-based services provided by the public health system are cost-effective and are critical in improving the value of public investments in all types of health services and in controlling health care costs.
 - (3) Our state public health system lacks the capacity to fulfill its critical functions with respect to well understood health threats such as impure air and water, unsanitary living conditions, unsafe food, and inadequate rates of immunization.
- (4) The public health system lacks the capacity to address the emerging health threats of the 21st century including bioterrorism and other emergencies, health disparities, the spread of drug-resistant tuberculosis, HIV, SARS, West Nile virus, and other infectious

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diseases, and the predictable increases of heart disease, cancer, diabetes, and other diseases that will result from tobacco and other drug addiction, poor diet, and inadequate exercise.

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- (5) According to the provisions of chapter 43.70 RCW the department of health has developed a public health improvement plan, in consultation with local health jurisdictions, the state board of health, and other state agencies, health services providers, and citizens concerned about public health.
- (6) The public health improvement plan includes standards for all elements of the public health system and provides a detailed accounting of both performance and funding deficits in the current system, suggesting ways in which additional funds could be used to improve that system.
- NEW SECTION. Sec. 2. (1) There is hereby established the public health financing task force. Its members shall include one member from each caucus from the committee on health and the principal fiscal committee of the house of representatives and senate. In addition, one representative of the office of the governor and one representative of the department of health, one representative of the association of counties, one representative of the association of local public health officials, one representative of the state board of health, and other public health partners as requested by the chairs shall also serve as nonvoting members. The task force shall appoint an executive committee not to exceed four members from among its voting members and may appoint such subcommittees, advisory groups, or other bodies as it sees fit. Staffing assistance shall be provided by the house of representatives office of program research, senate committee services, and the joint legislative audit and review committee. The department of health and the office of the governor shall provide such staffing assistance as may be reasonably required within their existing resources.
- (2) The task force shall recommend a source and level of dedicated funding the legislature should provide for public health services. The recommendation shall include methods to ensure that such funding does not supplant existing federal, state, and local funds received by any element of the public health system.

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- 1 (3) The task force shall complete a report to the governor and the legislature by July 1, 2006.
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