

HOUSE BILL REPORT

HB 1482

As Passed House

March 14, 1991

Title: An act relating to AIDS service networks.

Brief Description: Modifying funding requirements of the AIDS service networks.

Sponsor(s): Representatives Prentice, Moyer, Braddock, Morris, Heavey, Winsley, Orr, Wineberry and Anderson; by request of Department of Health.

Brief History:

Reported by House Committee on:
Health Care, February 14, 1991, DP;
Appropriations, March 5, 1991, DP;
Passed House, March 14, 1991, 96-0.

**HOUSE COMMITTEE ON
HEALTH CARE**

Majority Report: *Do pass.* Signed by 10 members:
Representatives Braddock, Chair; Day, Vice Chair; Moyer,
Ranking Minority Member; Casada, Assistant Ranking Minority
Member; Edmondson; Franklin; Morris; Paris; Prentice; and
Sprenkle.

Staff: Bill Hagens (786-7131).

**HOUSE COMMITTEE ON
APPROPRIATIONS**

Majority Report: *Do pass.* Signed by 28 members:
Representatives Locke, Chair; Inslee, Vice Chair; Spanel,
Vice Chair; Morton, Assistant Ranking Minority Member;
Appelwick; Belcher; Bowman; Braddock; Brekke; Dorn;
Ebersole; Ferguson; Fuhrman; Hine; Holland; Lisk; May;
McLean; Mielke; Nealey; Peery; Pruitt; Rust; Sprenkle;
Valle; Vance; Wang; and Wineberry.

Staff: Maureen Morris (786-7152).

Background: The 1988 Legislature enacted the Omnibus AIDS legislation in response to the threat to public health posed by the HIV/AIDS epidemic. The Legislature's response was

prompted by three major concerns: (1) a desire to prevent the spread of HIV; (2) recognition of the need to provide appropriate and humane care for those already infected with HIV or diagnosed with AIDS; and (3) a desire to ensure that all programs were designed to afford patients privacy, confidentiality, and dignity.

The Omnibus legislation required that all funds appropriated from 1988 until June, 1991 be allocated as follows: 75% on per capita, based on the number of persons residing within each region, with no less than \$150,000 per year in any region; and 25% targeted to high risk intervention strategies, with specific allocation to regions based on documented need. (The Department of Health in coordination with the regions, ultimately developed a formula based on the high risk indicators of Hepatitis B and Class IV HIV.)

In compliance with legislative mandate, the Department of Social and Health Services established a State Office on HIV/AIDS (now part of HIV/AIDS and Infectious Diseases in the newly formed Department of Health). The Office on HIV/AIDS was charged with developing a statewide system of regional AIDS service networks. This regional system was established in May, 1988 and is referred to collectively as AIDSnets.

Subsequent to the passage of the legislation, two issues emerged. First, the AIDSnets fund allocation formula was deemed not sensitive to changes in the AIDS population distribution in the State. Second, the role of the Department of Health is unclear in regards to the planning and funding process for AIDSnet appropriations. This is true because when the AIDS legislation was passed the DOH was not yet created, and the framers of the legislation were reluctant to place broad authority for the program with the Department of Social and Health Services where there was not a strong emphasis on AIDS related prevention services.

Summary of Bill: The funding formula is deleted from statute. Funds for the 1991-93 biennium will be set forth in the budget legislation. Subsequent funding will be developed by rule.

Each region is given the responsibility to determine distribution of funds within the region in consultation with the Department of Health. Lead counties within each region shall monitor plans for all other counties in the region to ensure that funds are used for the purposes intended.

The Department of Health (DOH) is authorized to review the allocation of funds and modify the formula through a process

created by administrative rule; input from the regional AIDS service networks is required.

Regional plans are required to be prepared annually and submitted by September 1 to the DOH for approval.

The DOH is authorized to coordinate the state's HIV/AIDS response and has authority to adopt rules, conduct audits, and establish and require compliance with standards to fulfill this responsibility.

Fiscal Note: Available.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Testimony For: (Health Care): The bill is needed to address the changes in the AIDS population and to establish accountability for AIDSnet programs.

(Appropriations): This bill is the result of a year of work by the AIDS service networks and the Health Department. The bill would permit a more flexible response to the changing nature of the AIDS epidemic. The Legislature should have an opportunity to address the changing situation in the appropriations act.

Testimony Against: (Health Care): None.

(Appropriations): None.

Witnesses: (Health Care): Dr. Mimi Fields, Department of Health (Pro); Robb Menaul, AIDS Services & Prevention Coalition (Pro); and Patricia McInturff, Seattle King County Department of Health and AIDSNet Council (Pro).

(Appropriations): Dr. Mimi Fields, State Health Officer, Department of Health; and Al Allen, Tacoma Pierce County Health Department.