

MINUTES OF THE
JOINT HEALTH AND HUMAN SERVICES APPROPRIATION SUBCOMMITTEE
Monday, January 30, 2006, 2:00 p.m.
Room W125, West Office Building, State Capitol Complex

Members Present: Sen. Sheldon L. Killpack, Committee Co-Chair
Rep. Merlynn T. Newbold, Committee Co-Chair
Sen. Allen M. Christensen
Sen. Gene Davis
Rep. Bradley G. Last
Rep. David Litvack
Rep. Steven R. Mascaro
Rep. Roz McGee
Rep. Paul Ray
Rep. Aaron Tilton

Members Excused: Sen. Chris Buttars

Staff Present: William Greer, Fiscal Analyst
Debbie Headden, Fiscal Analyst
Norda Shepard, Secretary

Public Speakers Present: Dr. David N. Sundwall, Executive Director, Department of Health
Dr. Todd Grey, State Medical Examiner
Dr. George Delavan, Director, Division of Community and Family Health Services
Dr. Marc Babitz, Director, Division of Health Care Systems
Rep. Stephen Clark
Kathy Froerer, Executive Director, Utah Association of Local Health Departments
Gary Edwards, Director, Salt Lake Valley Health Department

A list of visitors and a copy of handouts are filed with the committee minutes.

The meeting was called to order by Co-Chair Killpack at 2:13 p.m.

1. Approval of Minutes

MOTION: Sen. Christensen moved to approve the minutes of January 25, 2006. The motion passed unanimously with Sen. Davis and Reps. Ray and Tilton absent for the vote.

Co-Chair Killpack announced that if committee members did not get a copy of the letter to the Executive Appropriations Committee copies are available.

2. Department of Health - Executive Director's Office

David N. Sundwall, Executive Director, Department of Health, introduced Dr. Todd Grey, State Medical Examiner. He said that Dr. Grey is the public health officer who deals with the mistakes and tragedies in our society. Dr. Sundwall indicated that the state of Utah's health is good. He distributed a handout from the United Health Foundation showing America's Health Rankings. According to this report, Utah ranks as the fourth healthiest state in the nation. Some reasons given for this are the low prevalence of smoking, low rate of cancer deaths, high rate of high school graduation and low infant mortality rate. He said this does not mean we have no challenges.

Dr. Sundwall stated that the Department tries to base all of their policies on the best information possible to be

scientifically sound. He said they have the benefit of having great information and data supplied by the Indicator Based Information System, which is available to all on the web at *ibis.health.utah.gov*. He distributed a brochure entitled "Utah Department of Health," and presented a power point presentation indicating some of the concerns in the Department of Health. He said these concerns are based on research information and not just because they have popularity or someone feels it is a good idea.

The presentation focused on the following: (1) The percentage of persons who lacked health insurance, comparing Utah and the United States. Utah is below average. This is a health problem and it is estimated that 18,000 premature deaths occur in the United States per year because people do not have access to appropriate health care because they don't have health insurance; (2) The significant drop of vaccine rates of toddlers. Utah is slipping and there is concern we are not keeping up with the recommended vaccines. He indicated that First Lady, Mary Kaye Huntsman, will be helping in a statewide campaign to improve this rate; (3) The increase of childhood obesity. This can lead to serious health problems, as well as social and psychological issues; (4) Adult obesity. The adult population is getting heavier and the health consequences are very costly; (5) Adolescent birth by age of mother. Utah rates are dropping in those mothers under age 18; (6) The increasing rate of chlamydia. The consequences of this can lead to an infertility problem for both men and women if not diagnosed and treated; (7) Reported gonorrhea cases are also going in the wrong direction; (8) The number of non-illicit drug poisoning deaths. The number of unintentional deaths from drug overdose is a public health problem that the Department is attempting to address in cooperation with doctors, hospitals, education, and the public.

Dr. Sundwall stated that this information was compiled by the Center for Health Data who also do the *ibis* health website. He indicated they do an outstanding job. The funding for the Center for Health Data is included in the Executive Director's Office budget.

a. Issue Brief - Medical Examiner

Dr. Grey said the Medical Examiner's Office (OME) is responsible for certification of sudden or unexpected deaths in the State. He indicated the case volume has steadily increased over the years, almost doubling in the last eight years. Operating costs have increased concurrently. All the pathologists are located in Salt Lake City which often requires the transporting of deceased individuals. He said this transportation cost is going up rapidly, as well as the cost of supplies. He said with limited staff a lot of overtime is required to comply with the provisions of the law regarding timely results. He said the consequences of not obtaining the building block request is they would have to curtail services.

Mr. Greer indicated that lapsing balances reflect the shifting of funds from other line items within the Executive Director's Office to address the annual funding needs within the OME to make sure they do not experience a shortfall. The OME has requirements that have to be met. The Analyst is recommending subcommittee consideration of one-time supplemental of \$70,000 for FY 2006 to make up the current shortfall and on-going General Fund of \$110,000 for FY 2007.

In response to questions, Dr. Grey reported that Rep. Donaldson was pursuing a bill to establish authority to have satellite Medical Examiner Offices throughout the state, especially St. George, Moab, and Logan. He said they don't need offices in all these locations at this time but with the growth in St. George a satellite office will be needed there soon.

3. Department of Health - Division of Community and Family Health Services

a. Issue Brief - Baby Watch/Early Intervention Program

Mr. Greer stated this program targets children age birth to three who have developmental delays or disabilities. Services are provided by 15 contractors throughout the state. The Analyst is recommending the Subcommittee approve \$675,300 of on-going funding to be put on a priority list. This funding would address the estimated caseload growth. It would not give an increase to providers.

Dr. George Delavan, Director, Division of Community and Family Health Services, said it is estimated that 200 additional children will be coming into the program next year. He said they had just received information that for this federal fiscal year the Division will receive a cut of approximately \$58,000 of federal funding.

b. Issue Brief - Utah Birth Defect Network

Mr. Greer said this is a side-wide surveillance system monitoring the occurrence of major structural birth defects in Utah. He said information is the key to understanding what treatments should be. Utah has lost the federal funding of \$352,900. Utah also has a related research development center program funded with federal funding. The loss of this surveillance system funding would need to be restored to be able to keep the additional \$900,000 Federal Funds for the research center. The Analyst recommends that the Subcommittee consider this for the priority list.

Dr. Delavan said that a number of the indicators included in the *ibis* report come from the Utah Birth Defect Network. He explained that the network collects information on all birth defects in the state so they can be monitored over time to see if there are areas of increases. This allows the Department of Health to evaluate what may be causing the increase and to increase prevention efforts. He said this is a vital, basic function of the Health Department and would appreciate consideration of the requested building block.

c. Issue Brief - Obesity Prevention Initiative

The Analyst stated that this is not in the Governor's budget request. He said the Department of Health has been preparing an obesity prevention program. He said he wanted to bring this to the attention of the subcommittee because 95 percent of the initiatives that are being discussed are responding to health situations. He said with the high costs of remedial health problems some attention should be paid to the prevention area. Obesity is a contributing factor for diabetes, cardiac arrest, stroke, orthopedic back and joint problems, high blood pressure and other health problems. The Analyst recommends that the subcommittee give some consideration to a building block of up to \$800,000 to recognize that prevention is an area that needs attention.

4. Department of Health - Health Systems Improvement

a. Issue Brief - Primary Care Grant

Mr. Greer said the Primary Care Grants make grants to public and nonprofit entities to help provide primary health care services to medically under served populations throughout the State. Included on the issue brief is a list of the most recent awards. He said this Division has non-lapsing funding. The Analyst recommends that this non-lapsing status be continued and an increase in funding of \$200,00 General Fund be considered. He said this will not solve all of the problems of the medically under served but is a step towards resolving some of those challenges.

Dr. Sundwall indicated that Utah has about 10 percent of its population on Medicaid and about the same number who are uninsured. He said Primary Care Clinics serve those who either cannot afford health care or who do not have access to it otherwise.

Dr. Marc Babitz, Director, Division of Health Systems Improvement, stated that Medicaid covers people up to about 100 percent of the federal poverty level. For a family of four that is about \$20,000 and if a family makes \$21,000 they would not be eligible for Medicaid. He said if you think of housing costs, transportation, clothing, food, etc. and then think of adding the cost of health insurance, it may be impossible for them. He said these are not people who don't work. Often they work more than one job just to get by and still cannot afford health insurance. He said Primary Care Clinics are a safety net around the state.

5. Department of Health - Workforce Financial Assistance

Mr. Greer indicated there is no budget brief or recommendations for this division. He said there is a piece of

legislation to increase the grants to health care providers who will serve in rural areas or medically under served areas.

6. H.B. 24 Medicaid Dental Reimbursement Amendments (Rep. S. Mascaro)

Rep. Mascaro explained the purpose of his bill and distributed two handouts, "Voices for Utah Children," and a pamphlet from the Utah Oral Health Coalition. He stated that this was an issue that was debated last year and he has brought it back because he felt it should be on-going funding rather than one time funding. He said he knew it was not necessary to parade a lot of people before the committee because he was sure this committee understands the problem better than anyone in the Legislature. He stated he wanted this bill to be thought of as a preventative policy. He said increasing the reimbursement rate for dentists who are providing dental service to Medicaid children helps to prevent many on-going oral and other medical diseases. Some of these diseases could be passed on to other members of the family. He stated the Medicaid reimbursement in Utah is one of the lowest in the nation as shown on the handout. The handout also lists many groups who support this legislation. He said he hoped subcommittee members would give support to H.B. 24 and the \$2.7 million appropriation. He indicated that Sen. Knudson would be carrying the bill in the Senate.

7. H.B. 114 Minimum Enforcement of Food Sanitation Rules (Rep. S. Clark)

Rep. Stephen Clark indicated that he and his wife had gone to dinner at a restaurant one evening and he became very ill for several days. He called the county health department and asked if they were doing restaurant inspections. He said he discovered that three or four years ago the program of testing restaurants for food handling had been axed. He found that counties were understaffed. It became clear to him that the state is not doing their job. He said the bill addresses a fiscal note of \$102,500 for 1.5 FTEs for minimal manpower.

Rep. Clark introduced Kathy Froerer, Executive Director, Utah Association of Local Health Departments. Ms. Froerer stated her association is very supportive of the bill which will help to standardize inspections requirements and inspector skills throughout the State. She distributed a fact sheet about the bill. She said there are twelve local health departments in the State. She said each department does things differently and evaluate different kinds of things. She said the bill would ensure that someone within the state trained by the FDA to go to each local health department and train inspectors.

Gary Edwards, Director, Salt Lake Valley Health Department, said there is a state rule that indicates what food service establishments have to meet. However, the numerous food safety inspectors across the state may each look at the rule a little differently. He said one may focus on one area and another on another area. He said it can create problems for food service owners who have facilities in different areas and each facility gets a different kind of inspection. He said they are attempting to have a state examiner to train the local departments so all area will be standardized.

Rep. Clark thanked the committee for their consideration and asked for support for H.B. 114.

8. Department of Health - Local Health Departments

Mr. Greer stated there is no issue brief related to the Local Health Departments. He said for committee information, the provider increase is addressed by Executive Appropriations. The Governor has requested \$36,500 as a 2.5 percent increase. He said all local health providers are struggling to address their inflationary cost increases. He indicated this is only targeted for compensation. He said a number of state responsibilities have been directed through these local health departments.

Mr. Edwards said this request is a proposed cost of living increase. He stated the local departments receive approximately \$2.05 million in state funds to provide basic public health required services. The State Department of Health sets minimum performance standards that the local departments implement. He indicated that this small COLA helps the local department do the required job.

9. Other Committee Business

Co-chair Killpack indicated that the Analyst had distributed a worksheet for subcommittee members to build their priority recommendations. He said the Chairs would like each member to think about their priorities as individual Legislators. He indicated a sheet from Human Services would also be distributed. He asked that priorities be rated and the forms returned to the Fiscal Analyst office by Friday morning. He also requested that the lists be signed so if there are questions they can be identified.

Dr. Sundwall said he wanted to recognize and thank Barry Nangle, Director of the Center for Health Data, for his work on the slide presentation.

Co-chair Killpack announced that the next meeting would be Thursday, February 2, in Room W135 and would be for public testimony on Department of Health issues.

MOTION: Sen. Christensen motioned to adjourn. The motion passed unanimously.

Co-Chair Killpack adjourned the meeting at 3:55 p.m.

Minutes reported by Norda Shepard, Secretary.

Sen. Sheldon L. Killpack
Committee Co-Chair

Rep. Merlynn T. Newbold
Committee Co-Chair