



Health Impact Review Request Form

Date of request: 03 / 18 / 2009

Requester: Representative Dawn Morrell

Note: Health impact reviews may only be requested by the Governor or a legislator.

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What is the subject of the Health Impact Review?

- Bill Number: _____ Title: _____
- Bill Draft Draft Number: _____ *Please attach a copy of the draft.*
- Decision Package *Please attach a copy of a decision package.*
- Budget Proposal *The Governor's Budget Proposal*
- Other: *If other, please describe below and attach a copy if available.*

Should the Health Impact Review analyze the entire proposal or only a portion?

- Entire Portion

If the review should focus on a portion of the policy or budgetary change, please describe what portion(s) the review should analyze.

The review should focus on the Governor's proposed cuts to the health care and human services safety net. Specifically:
Reduction of funding for the Basic Health Plan by 42 percent. The Health Care Authority will reduce enrollment in the Basic Health Plan. It will also restructure the program to allow coverage for as many people as possible. (\$252.0 million GF-S)
Apple Health for Kids. Funding to provide subsidized health care coverage to children whose family incomes are between 250 percent and 300 percent of the federal poverty level will be suspended. (\$6.1 million GF-S, \$7.9 million GF-F)
Elimination of medical coverage for the General Assistance-Unemployable program. Medical coverage continues for the aged, blind and disabled, and those clients who meet the criteria for Social Security disability. (\$251.3 million GF-S)
Elimination of the universal vaccine program. The state will no longer purchase vaccines for children not covered by Medicaid. (\$49.6 million GF-S)
Elimination of grants to individuals in the General Assistance-Unemployable program. Monthly grants are no longer provided to approximately 21,000 individuals in the GA-U program and 6,500 clients in the Alcoholism and Drug Addiction Treatment and Support Act program. Effects of this action will be partially offset by \$20 million provided for additional emergency housing and \$40 million to community clinics. (\$160.6 million GF-S)

Requested completion date: 03 / 31 / 2009

Please consider completing the optional section on the back of this form, which will give the Board a sense of why this review has been requested.

Washington State Board of Health

PO Box 47990 • Olympia, WA 98504-7990 • Phone: 360-236-4110 • Fax: 360-236-4088

Email: HIR@doh.wa.gov • Web site: healthequity.wa.gov

If requesting less than a ten-day turnaround during session or less than a 60-day turnaround during the interim, please explain the reasons for the request (for example, needing a review completed in time for a committee hearing).

We need this for budget planning.

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~ Optional ~

Please consider completing this optional section, which will give the Board a sense of why this review has been requested.

NOTE: When conducting a health impact review, the Washington State Board of Health will consider various ways that a proposal might exacerbate or ameliorate health disparities. Completing this section will give the Board a head start by helping it understand the reasons why a review is being requested.

Briefly describe how you think the proposal might impact health disparities and whether you believe the impact will be in a positive or negative direction.

Individuals accessing the Basic Health program and GAU are oftentimes individuals in transition, working families, and poor communities of color. Cuts to the Basic Health program and GAU benefits will exacerbate existing racial health disparities in Washington State. During economically difficult times when communities of color are disproportionately impacted by the economic crisis, cuts to safety net programs will leave many families, children, disabled individuals and communities of color without access to medical attention and much needed financial support.

Check any diseases or conditions for which the proposal might exacerbate or ameliorate health disparities.

- | | |
|--|---|
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Mental health |
| <input type="checkbox"/> Cancer, Type _____ | <input type="checkbox"/> Obesity |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Oral disease |
| <input type="checkbox"/> HIV/AIDS | <input type="checkbox"/> SIDS |
| <input checked="" type="checkbox"/> Infant mortality | <input type="checkbox"/> Smoking cessation |
| <input checked="" type="checkbox"/> Immunization rates | <input type="checkbox"/> Strokes |
| <input type="checkbox"/> Heart disease | <input checked="" type="checkbox"/> Women's health issues |
| <input type="checkbox"/> Kidney disease | <input type="checkbox"/> Other (please specify) |
-

Check any social determinants of health the proposal might impact in a way that would exacerbate or ameliorate health disparities.

- | | |
|--|--|
| <input checked="" type="checkbox"/> Access to health care | <input checked="" type="checkbox"/> Geography |
| <input checked="" type="checkbox"/> Access to nutritious foods | <input checked="" type="checkbox"/> Health care capacity |
| <input type="checkbox"/> Access to physical activity | <input type="checkbox"/> Incidence of violence |
| <input checked="" type="checkbox"/> Access to safe housing | <input checked="" type="checkbox"/> Overall health |
| <input checked="" type="checkbox"/> Culturally appropriate health care | <input type="checkbox"/> Socioeconomic standing |
| <input type="checkbox"/> Early learning | <input type="checkbox"/> Workforce diversity |
| <input type="checkbox"/> Education | <input type="checkbox"/> Other (please specify) |
| <input type="checkbox"/> Environmental health conditions | |
-

Are there any specific populations that you think might be particularly impacted by this proposal?

Low-income communities of color, immigrant communities, disabled communities, etc.

Are there specific organizations or community groups you would like the Board to contact as part of this review?