

1 HOUSE BILL NO. 473

2 INTRODUCED BY G. HENDRICK

3

4 A BILL FOR AN ACT ENTITLED: "AN ACT CREATING A PILOT PROJECT TO HELP LOCAL, STATE, AND
5 TRIBAL HEALTH DEPARTMENTS AND AGENCIES UNDERTAKE ACTIVITIES RELATED TO MEETING
6 NATIONAL PUBLIC HEALTH GUIDELINES; PROVIDING FOR AN ALLOCATION OF FUNDS; AND PROVIDING
7 AN EFFECTIVE DATE AND A TERMINATION DATE."

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9 WHEREAS, Montana law gives local, state, and tribal public health agencies the authority and
10 responsibility to undertake efforts to protect the public health and educate the public on health-related issues; and

11 WHEREAS, funding for local, state, and tribal public health agencies varies widely across the state
12 because of variations in local funding resources; and

13 WHEREAS, the Centers for Disease Control, National Association of County and City Health Officials,
14 American Public Health Association, National Association of Local Boards of Health, and Association of State
15 and Territorial Health Officials recognize that local, state, and tribal public health agencies across the country are
16 served by a system unique to each agency based on available financial, medical, and other resources; and

17 WHEREAS, it is imperative that public health services in Montana are built on a solid foundation that
18 includes a comprehensive community health assessment, community health improvement plans, and a strategic
19 plan that assesses and sets strategies for public health sustainability incorporating the 10 essential public health
20 services and core functions of public health set out by the Centers for Disease Control and other national public
21 health regulatory entities and that the entities work to develop common tools to help all health departments
22 achieve those standards.

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24 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

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26 **NEW SECTION. Section 1. Pilot project for implementing national public health standards.** (1)
27 Subject to available funding, the public health and safety division of the department of public health and human
28 services shall administer a pilot project to assist local public health agencies, as defined in 50-1-101, and tribal
29 public health agencies in creating a community health assessment, a community health improvement plan, and
30 a strategic plan to continue to prepare for national public health accreditation, develop a standards-based public

1 health system for Montana, and define sustainability through the strategic planning process by using nationally
2 recognized public health standards and guidelines that are based on the 10 essential public health services as
3 outlined by the national association of county and city health officials, the centers for disease control and
4 prevention, the public health accreditation board, and other national public health organizations. The public health
5 standards and guidelines include but are not limited to the operational definition of a functional local, state, or
6 tribal health department and the national public health performance standards for local, state, and tribal health
7 departments.

8 (2) The public health and safety division shall:

9 (a) develop grant application and review criteria in accordance with this section;

10 (b) establish protocol, policy, goals, strategies, and timelines for local, state, and tribal public health
11 agencies selected for the pilot project;

12 (c) establish evaluation criteria for the pilot project;

13 (d) provide materials and training to recipients of pilot project grants;

14 (e) conduct a state health assessment and create a state health improvement plan and a state strategic
15 plan in accordance with established standards, guidelines, and measures;

16 (f) coordinate with public health departments that are previous recipients of pilot project grants to
17 incorporate previous findings and data; and

18 (g) complete and submit a final report to the 2013 legislature as provided in 5-11-210.

19 (3) To the extent that it receives applications that meet grant review criteria established in accordance
20 with this section, the public health and safety division shall award grants to eight local public health agencies,
21 including at least two tribal health departments. The grant awards must be made in consultation with the public
22 health system improvement task force established by the public health and safety division of the department of
23 public health and human services.

24 (4) Local and tribal public health agencies selected for a grant shall demonstrate through the application
25 process how the funds will be used to:

26 (a) create a community health assessment, a community health improvement plan, and a strategic plan
27 using the types of nationally recognized public health guidelines and standards described in subsection (1);

28 (b) work with the public health and safety division and the public health system improvement task force
29 to ensure proper use of the grant, including participation in a process to evaluate the pilot project efforts; and

30 (c) complete measurement criteria established by the public health and safety division and the public

1 health system improvement task force.

2 (5) The public health and safety division and the public health system improvement task force shall:

3 (a) serve as a resource for local and tribal public health agencies selected for the pilot project. In this
4 capacity, the public health system improvement task force shall participate in:

5 (i) regularly scheduled conference calls; and

6 (ii) at least two meetings a year that are held in one of the counties in which the pilot project agencies
7 are located;

8 (b) ensure that the technical assistance and training needs of the pilot project agencies are met; and

9 (c) assess the results of the pilot project.

10 (6) The public health system improvement task force and the pilot project agencies shall report the
11 following information to the appropriate interim committees of the legislature by September 15, 2012:

12 (a) the estimated costs of creating an accredited, sustainable, local public health agency;

13 (b) assessments of the ability of Montana's local, state, and tribal public health agencies serving
14 jurisdictions with varying population sizes in becoming accredited agencies through the national accreditation
15 program, including funding and other resource management issues and challenges;

16 (c) suggestions for preparing local, state, and tribal public health agencies for national accreditation,
17 developing a standards-based public health system, and defining sustainability relevant to the populations each
18 pilot project agency serves;

19 (d) the public health benefits created by the pilot project activities for residents within each pilot project
20 agency's jurisdiction;

21 (e) how the efforts of the pilot project agencies met the nationally recognized public health standards and
22 guidelines described in subsection (1); and

23 (f) recommendations for improving local, state, and tribal public health systems and creating a
24 sustainable model for local, state, and tribal public health agencies in Montana.

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26 **NEW SECTION. Section 2. Public health system improvement task force -- membership.** (1) The
27 public health system improvement task force, which is within the public health and safety division of the
28 department of public health and human services, must have membership representation from the legislative
29 branch and the governor's office. Members of the public health system improvement task force from the legislative
30 branch and the governor's office must be appointed as follows:

1 (a) two members of the Montana house of representatives, with one member appointed by the speaker
2 of the house and the other member appointed by the house minority leader;

3 (b) two members of the Montana senate, with one member appointed by the president of the senate and
4 the other member appointed by the senate minority leader; and

5 (c) one staff member from the governor's office appointed by the governor.

6 (2) Legislative members of the public health system improvement task force are entitled to receive
7 compensation and expenses as provided in 5-2-301 for each day spent on task force business. Other members
8 are entitled to reimbursement for expenses, as provided in 2-18-501 through 2-18-503, while engaged in task
9 force business.

10 (3) The public health system improvement task force is attached to the public health and safety division
11 of the department of public health and human services for administrative purposes, including staffing support,
12 and the public health and safety division is responsible for the compensation of task force members.

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14 **NEW SECTION. Section 3. Public health system improvement task force -- purpose and role.** (1)

15 The purpose of the public health system improvement task force is to develop and oversee, along with the public
16 health and safety division of the department of public health and human services, the pilot project for
17 implementing national public health standards and standards-based public health system for all local, state, and
18 tribal public health agencies and overseeing the creation of a definition of sustainability for local, state, and tribal
19 public health agencies in Montana.

20 (2) The public health system improvement task force shall recommend to the public health and safety
21 division the projects that it considers appropriate for funding in accordance with the requirements of [section 1].
22 The task force's recommendations are not binding on the public health and safety division, but when a
23 recommendation is not followed by the public health and safety division, the division shall provide the reasons
24 to the public health system improvement task force.

25 (3) The public health system improvement task force in conjunction with the public health and safety
26 division and based on the report generated by the department of public health and human services and submitted
27 to the 2013 legislature incorporating information from the public health departments that previously received
28 pilot project grants, shall make recommendations for improving local, state, and tribal public health systems and
29 defining a sustainable model for public health agencies in Montana.

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1 **NEW SECTION. Section 4. Allocation of available funds.** (1) If funds are made available for the
2 program in [section 1], then the funds must be allocated as follows:

3 (a) Grants of \$25,000 a year in each year of the biennium must be awarded to each of the eight local
4 and tribal public health agencies selected as provided in [section 1].

5 (b) Funds for the biennium to pay expenses for the public health and safety division of the department
6 of public health and human services in administering the grant program, providing technical assistance to the
7 local and tribal public health agencies, and reimbursing the costs of travel for members of the public health
8 system improvement task force as provided in 2-18-501 through 2-18-503 must come from public health system
9 improvement funds, from federal grants awarded to the public health and safety division of the department of
10 public health and human services under the federal Patient Protection and Affordable Care Act, and from the
11 centers for disease control grant.

12 (2) If less than \$400,000 is available for the program provided for in [section 1], then the funding must
13 be prorated on the basis of the allocations in subsection (1).

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15 **NEW SECTION. Section 5. Notification to tribal governments.** The secretary of state shall send a
16 copy of [this act] to each tribal government located on the seven Montana reservations and to the Little Shell
17 Chippewa tribe.

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19 **NEW SECTION. Section 6. Effective date.** [This act] is effective July 1, 2011.

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21 **NEW SECTION. Section 7. Termination.** [This act] terminates December 31, 2012.

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