

HOUSE COMMITTEE ON HUMAN RESOURCES

February 18, 1999 Hearing Room E

1:00 PM Tapes 26 - 27

MEMBERS PRESENT: Rep. Jeff Kruse, Chair

Rep. Kitty Piercy, Vice-Chair

Rep. Betsy Close, Vice-Chair

Rep. Tim Knopp

Rep. Jerry Krummel

Rep. Mike Lehman

Rep. Bill Morrisette

Rep. Jackie Taylor

Rep. Jackie Winters

MEMBER EXCUSED:

STAFF PRESENT: Janet L. Carlson, Administrator

Diane M. Lewis, Administrative Support

MEASURE/ISSUES HEARD: HB 2172 Public Hearing

Informational Meeting: Overview of Disease Prevention, Control, and Awareness

These minutes are in compliance with Senate and House Rules. Only text enclosed in quotation marks reports a speaker's exact words. For complete contents, please refer to the tapes.

| TAPE/# | Speaker | Comments |
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TAPE 26, A

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| 005 | Chair Kruse | Opens a Human Resources subcommittee meeting at 1:15 PM. Explains that an extended House floor session created a delay in beginning the Committee. Therefore the public hearing for HB 2174 will be rescheduled for a later date. Opens a public hearing on HB 2172. |
| <u>HB 2172 PUBLIC HEARING</u> | | |
| 015 | Charles Stern | Yamhill County Clerk, Member, Oregon Association of County Clerks, submits and presents written proposed amendments and testimony in support of HB 2172 (EXHIBIT A). Explains that HB 2172 has been drafted to clear up unintended consequences from the 1997 vital statistics bill (HB 2174, 1997). States that his proposed amendments add four words to HB 2172's amendments dated 2-5-99 (EXHIBIT B). |
| 044 | Chair Kruse | Closes the subcommittee and calls the full committee to order. |
| 048 | Janet Carlson | Committee Administrator, provides the committee with background information on HB 2172. HB 2174 from the 1997 legislative session resulted in a ruling from the Attorney General restricting the release of marriage records to the local level. |
| 068 | Rep. Lehman | Asks what HB 2174 (1997) was addressing. |
| 075 | Elinor Hall | Administrator, Department of Human Resources Health Division, testifies in support of HB 2172 and clarifies the intent of HB 2174 (1997) as vital records housekeeping. States that HB 2174 (1997) was intended to bring all parts of vital records law into one entity, clarify and adopt standard definitions, and create penalties for people who were falsely accessing information or using information fraudulently. |
| 095 | Rep. Lehman | Asks if access to records was the biggest concern of the 1997 bill. |
| 096 | Hall | Responds affirmatively. Penalties for falsely accessing and using vital statistics were greatly increased in HB 2174 (1997). |
| 101 | Rep. Lehman | Asks for a summary of county-level and state-level record-keeping. |
| 105 | Edward Johnson | State Registrar, Vital Records, states that Rep. Lehman's question will be answered in his testimony. Submits and presents written testimony in support of HB 2172 (EXHIBIT C). Walks the committee through items of HB 2172 by referring to EXHIBIT C , page 2, which lists sections of the bill. Explains that vital records are maintained at the county and state level. Marriage records are maintained in the county clerk's office and divorce records are maintained in the county courts. |
| 150 | Rep. Lehman | Asks if birth certificates are filed at the county and state level. |

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| 152 | Johnson | Responds that birth certificates are initially filed with the state and county vital records offices. After six months the records are maintained only at the state level. Explains that this is also true of death certificates. |
| 160 | Rep. Lehman | Asks about the maintenance of marriage certificates. |
| 161 | Johnson | States that marriage records are maintained at the state and county level as permanent records. |
| 169 | Johnson | Continues to explain HB 2172 by referring to EXHIBIT C , page 2, items 2-4. |
| 210 | Johnson | Continues explaining the bill by referring to EXHIBIT C , page 3, items 5-7. |
| 237 | Rep. Knopp | Refers to HB 2172, page 3, lines 15-19, and asks if there are limitations imposed upon the state registrar. |
| 245 | Johnson | Responds that section 1, sub-section 13, lines 15-19, is a return to practice prior to HB 2174 (1997). Explains that this section is intended to restrict the use of information for a specified purpose. States that the state registrar has been charged by state law to ensure confidentiality and lawful use of statistical information. |
| 268 | Rep. Knopp | Asks if HB 2172 will give the state registrar power or authority to violate confidentiality of information. |
| 275 | Johnson | Replies that it is not the intent of the bill to provide the state registrar with additional authority to misuse information. States that HB 2172 authorizes the state registrar to set standards by which others may access and use information, i.e. researchers using statistical data for the purpose of reports and studies and not personal uses. |
| 292 | Rep. Close | Asks if HB 2174 (1997) was a reaction to the individual who accessed information from the Motor Vehicles Division and publicized it on the Internet. |
| 297 | Johnson | Responds negatively. The intent of HB 2174 (1997) was to bring Oregon in compliance with national model laws. |
| 310 | Rep. Winters | Asks for situations where rules of confidentiality are waived by the state registrar. |
| 315 | Johnson | Replies that confidentiality is not waived. Explains that the state registrar may provide identifying information to someone who is asking for individual records for a specific purpose. Emphasizes that it is the duty of the registrar to ensure that such identifying information is used lawfully. |
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| 326 | Rep. Winters | Asks if sub-section (13), lines 15-19, is intended for entities needing information for studies and research. |
| 330 | Johnson | Responds affirmatively. HB 2172, section 1, sub-section 13, only involves federal, state and local agency requests for data and outlines lawful use of statistical data. |
| 350 | Rep. Krummel | Refers to HB 2172, page 2, line 30, and asks if this section is intended to prohibit a relative from acquiring a death certificate unless a personal or property right was in question. |
| 364 | Johnson | Explains that HB 2172, page 2, lines 27-29, are for relatives acquiring a death certificate and line 30 refers to a non-relative that may have owned a business or property with the decedent. |
| 377 | Rep. Krummel | Asks if the only way an acquaintance of a decedent could get a death certificate was if they were business partners or co-owned property. |
| 384 | Johnson | Responds affirmatively. |
| 398 | Chair Kruse | Refers to the same section and asks about the language change from "shall" to "may." |
| 400 | Johnson | States that the department is using federal model language. |
| TAPE 27, A | | |
| 010 | Chair Kruse | Asks if Johnson is comfortable with the addition of four words to the 11 amendments by the Association of County Clerks. |
| 013 | Johnson | Responds affirmatively. |
| 020 | Bob Costagna | Oregon Catholic Conference, states that he comes before the committee with questions and concerns regarding HB 2172. Discusses the 1994 New York State Task Force on "Life and the Law." Explains that the unanimous conclusion of the task force stated that physician-assisted suicide was an "unwise and dangerous public policy." Submits and explains copy of ORS 127.865 regarding Measure 16 reporting requirements (EXHIBIT D). Refers to HB 2172, page 2, lines 7-8 which is language to be removed and page 3, lines 15-19, which is proposed language. Explains that these changes will not allow other governmental agencies to look over the shoulder of the Health Division and exercise a system of checks and balances. States that these changes give the Health Division too much authority over the control of information, particularly regarding the reporting of physician-assisted suicide. |
| 080 | Rep. Lehman | Asks if Costagna is indicating that HB 2172, page 3, lines 15-19, is more restrictive than current practice. |

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| 082 | Costagna | Responds affirmatively. |
| 083 | Rep. Lehman | Asks for specific examples of how page 3, lines 15-19, would be more restrictive. |
| 085 | Costagna | Responds that in lines 15-19, the use of requested documents is subject to the terms or conditions prescribed by the state registrar and use of requested information is limited to statistical or administrative purposes, whereas in existing language information may be used for "official duties" of the requesting governmental agency. |
| 093 | Rep. Lehman | States that page 3, lines 17-19, notes that agencies may use information for other purposes as long as they have authorization from the state registrar. States that this could be interpreted as more "liberal" language. |
| 100 | Costagna | Disagrees with Rep. Lehman and states that page 3, lines 15-19, would give the state registrar ultimate control of what information may be accessed and what it may be used for. |
| 106 | Rep. Lehman | Asks how legislation is adopted that ensures information is not being used inappropriately and at the same time makes certain it is available to necessary entities. |
| 110 | Costagna | Replies that it is not necessary to delete page 2, lines 7-8. Voices concern regarding the deletion of page 2, lines 17-23. |
| 124 | Rep. Piercy | Refers to page 3, section 1, sub-section 13, and asks if the "terms and conditions" that allow information to be released are in writing. |
| 134 | Johnson | Explains that the intent of the language "terms and conditions" is to establish rules and specific guidelines for the release of information once HB 2172 is passed. States that the division does not stipulate specific guidelines in statute. |
| 144 | Rep. Piercy | Refers to page 2, lines 7-8, and asks if it is the intention to remove federal, state, and local governmental agencies from access to information. |
| 151 | Johnson | Responds negatively. Explains that the division does not want to provide agencies with information simply because they request it. The division wants agencies to provide a specific purpose for requested information and wants to set guidelines that agencies must follow. Discusses the confidential nature of information received from health practitioners by the division and the need to protect information sources. |
| 173 | Chair Kruse | Comments that the language change takes statute from a "shall" to a "may." |
| 176 | Johnson | Concurs with the Chair's comments. |
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| 180 | Chair Kruse | Asks for an example of a federal, state or local governmental agency requesting information and using it for other purposes. |
| 187 | Johnson | Responds that if the Centers for Disease Control (CDC) obtained data from Oregon's vital records office regarding a group of people and the nature of their deaths, CDC could not hand that information off to another agency, bypassing Oregon's vital records office, because it was more convenient to do so. |
| 200 | Chair Kruse | Closes the public hearing on HB 2172 and opens an informational meeting on disease prevention, control and awareness. |
| <u>INFORMATIONAL MEETING</u> | | |
| 230 | Linda Fleming | Registered Nurse, Executive Director, Coalition of Local Health Officials, submits and presents written testimony regarding the Oregon health policy (EXHIBIT E) and introduces panel of presenters. Explains that "public health" is not the Oregon Health Plan, and it is not a major provider of individual medical care. Explains that public health is a broad spectrum of services with the goal of serving and protecting the communities' health; i.e., safe drinking water, food safety, swimming pools, efficient ambulance service, emergency medical technician training, and immunizations and flu vaccines. States that community education is an important aspect of public health. Relates that birth and death records as well as data for community assessment and planning are kept by public health offices. States that data kept by public health is utilized by commissions on children and families, school districts, hospitals, and chambers of commerce. States that 1998 was the 95 th anniversary of public health as a recognized system in Oregon. |
| 280 | Fleming | Explains that no other state office has the authority or expertise to deal with communicable disease response other than the Oregon Health Division (OHD). States that the local public health authority is the local board of county commissioners who appoint the public health administrator. Discusses five essential services the local public health office is charged to oversee: <ul style="list-style-type: none"> • Parent/child health • Communicable disease control • Environmental health • Information and referral • Vital statistics Discusses the responsibility of the OHD as the provision of technical assistance and supervision of local public health offices. States that the local health departments have the responsibility of implementing systems into communities, educating communities, and overseeing local health systems with the guidance of the OHD. States that the system is struggling. Asks the legislators to invest \$3.2 million toward communicable disease control. |
| 350 | Dr. Paul Cieslak M.D. | Manager, Oregon Health Division Communicable Disease Program, submits and presents slide presentation regarding communicable diseases and statistics in Oregon (EXHIBIT F). Refers to EXHIBIT F , page 1, and draws the distinction between the clinical practice of medicine and public health. Continues by presenting a hypothetical case of a 26-year old woman with yellow jaundice and lab tests confirming Hepatitis A, EXHIBIT F , page 2. |

TAPE 26, B

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| 005 | Cieslak | Refers to EXHIBIT F , page 1, and discusses the increase in infectious disease death rates. States that age is a factor in the death rate as older people are more susceptible to infections. States that local health departments in Oregon handled between 8,000-13,000 reports per year. Explains that there are more than 1,400 deaths per year due to communicable diseases and the state handles approximately 25 outbreaks per year. Continues by discussing tuberculosis in Oregon, EXHIBIT F , page 4. |
| 030 | Cieslak | Explains disease outbreaks in Oregon during 1997-98, EXHIBIT F , pages 4-5. |
| 052 | Cieslak | Continues by referring to EXHIBIT F , pages 6-7, and discusses emerging infections in Oregon. |
| 084 | Rep. Winters | Asks how the Oregon ET-5 strain of meningococcus rate, which is three to four times the national rate, translates into numbers. |
| 085 | Cieslak | Responds that Oregon's rate is three to four cases per 100,000 per year. This translates into roughly 140 cases per year. |
| 095 | Cieslak | Continues by referring to EXHIBIT F , pages 7-9, and discusses antimicrobial resistance and new challenges in communicable disease control. |
| 137 | Rep. Winters | Comments that she has served on the Environmental Health Advisory Group and is assured that her restaurant staff is trained in proper food preparation and handling. States that most of the general public needs education regarding proper food preparation and cross-contamination. Submits that eating out may not be as large a factor in the challenges of disease control as is thought by the Health Division. People need to learn proper food handling and preparation in their own homes. |
| 153 | Cieslak | Concurs with Rep. Winter's comments. |
| 163 | Rep. Taylor | Asks if people are contributing to the problem of "super-germs" with the use of so many antibacterial products in our homes. |
| 168 | Cieslak | Responds negatively. |
| 180 | Cieslak | Continues discussing challenges by referring to EXHIBIT F , pages 9-10. States that large food suppliers providing multiple food companies with products create national problems. |
| 232 | Cieslak | Refers to EXHIBIT F , pages 11-13, and discusses a case of bioterrorism involving Anthrax in the municipal building in Tualatin, OR, January 13, 1999. |
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| 325 | Chair Kruse | Asks when a health concern moves from a local issue to a state issue. |
| 332 | Cieslak | When an outbreak occurs it immediately becomes a state issue and sometimes a federal issue. Explains the "presidential decision directive" that determines that the FBI take the lead in instances of bioterrorism. |
| 340 | Chair Kruse | Maintains that there must be substantial concern to have the FBI take the lead in a situation. |
| 343 | Cieslak | Explains that the FBI is supposed to be at all situations where there is a biological health threat to assist in determining if there is a credible public threat. |
| 348 | Chair Kruse | Describes a situation in a rural area where the closest, local health official is made aware of a possible health threat and asks if the FBI is immediately called in or if more determination from local and state officials is required first. States that if a health threat is a hoax it may all be contained and handled before the FBI arrives. |
| 370 | Kinseki | Responds that local officials almost always make the first determination as to the severity of a situation. States that he would like to think that the FBI is <u>immediately</u> called in all situations of bioterrorism. |
| 388 | Cieslak | Refers to EXHIBIT F , page 13, and discusses the role of local health departments. |
| 410 | Chair Kruse | Asks about the small amount of reporting of hepatitis C as compared to hepatitis A and B. |
| TAPE 27, B | | |
| 010 | Cieslak | Explains that there is no laboratory test that will distinguish between an acute (recent) infection of hepatitis C and an infection that happened 20 years ago. This is relevant because most of the reportable data comes from laboratories. States that a recent contraction of hepatitis A and B can be determined which makes the tracking of the disease easier and more accurate. |
| 028 | Rep. Taylor | Asks if an individual can have hepatitis C and not know. |
| 031 | Cieslak | Responds affirmatively. States that 80% of individuals infected with hepatitis C are "chronic" carriers and have little to no symptoms. One quarter of those individuals will develop cirrhosis of the liver. |
| 040 | Gwen Bowman | Registered Nurse, Public Health Administrator, Josephine County Health Department, discusses a tuberculosis epidemic in her county and the process put into place for identification and containment. Discusses the massive testing program that went into place and how limited resources put a stop to all other normal functions of the local health department so that a wide testing for |

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| | | tuberculosis could take place. |
| 114 | Dr. Alan Melnick | Clackamas County Health Officer, submits and presents written testimony explaining communicable disease control efforts (EXHIBIT G). States that health departments form partnerships with many members of the community including restaurants, community centers, schools, etc. Refers to EXHIBIT G , page 1, and defines "communicable disease control." Explains the process for reporting, investigating, analyzing, and controlling disease, EXHIBIT G , page 1. Elaborates on the services that the Health Division and local health departments provide, EXHIBIT G , page 1. States that the work provided by the Health Division is close to detective work. |
| 210 | Melnick | Discusses reasons why local health departments need funding, EXHIBIT G , page 2. |
| 241 | Fleming | Explains that the Senate Health and Human Services Committee has agreed to write a letter to Ways and Means encouraging budget support of local health departments. Respectfully requests that the House Human Resources Committee do the same. |
| 250 | Rep. Krummel | Asks if health insurance companies will come on board to assist in prevention strategies. |
| 259 | Bowman. | Responds that in Josephine County there is a program called "Pathways to Care." All managed care organizations are on board along with hospitals and non-profits. States that collaboration is the key to prevention. |
| 290 | Chair Kruse | Closes the informational hearing and closes the meeting at 3:05 P.M. |

Submitted By, Reviewed By,

Diane M. Lewis, Janet L. Carlson,
Administrative Support Administrator

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EXHIBIT SUMMARY

A ñ HB 2172, written testimony and proposed amendments, Charles Stern 2 pp.

B ñ HB 2172, -1 amendments dated 2/18/99, staff, 1 p.

C ñ HB 2172, written testimony, Elinor Hall, 3 pp.

D ñ HB 2172, statute 127.865, Bob Costagna, 1 p.

E ñ Information regarding public health and Oregonís policies, Linda Fleming, 3 pp.

F ñ power point slide hardcopies regarding public health issues in Oregon, Paul Cieslak M.D., 13 pp.

G ñ information regarding communicable disease control, Alan Melnick M.D., 8 pp.