

These minutes contain materials which paraphrase and/or summarize statements made during this session. Only text enclosed in quotation marks

report a speaker's exact words. For complete contents of the proceedings, please refer to the tapes.

HOUSE COMMITTEE ON HUMAN RESOURCES

January 16, 1991Hearing Room D 2:00
p.m.

Tapes 1 - 3

MEMBERS PRESENT:Rep. Mary Alice Ford, Chair Rep. Beverly Stein,
Vice-Chair (arrived at 2:03) Rep. Jerry Barnes Rep. Cedric Hayden Rep.
John Meek Rep. Hedy Rijken Rep. Jackie Taylor

STAFF PRESENT: Melanie Zermer, Committee Administrator Pamela
Berger, Committee Assistant

WITNESSES: Mike Skeels, Health Division Jim Scherzinger,
Legislative Revenue Larry Foster, Health Division

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TAPE 1, SIDE A

010 CHAIR FORD: Calls the meeting to order at 1:32 p.m.

ORGANIZATIONAL MEETING

- The goal of the committee is to examine service delivery in human resource areas in view of Measure 5. - The committee will be starting promptly at 1:30 p.m; if necessary as a subcommittee. - It is my goal to hear all bills referred to the committee. - Members are to submit specific questions to staff who in turn will alert the person who will be testifying. - Supplies are to remain in the committee hearing room. - Reference notebooks will be provided at each meeting and are to remain in the hearing room. 140 - Urges members to visit some of the state institutions (EXHIBIT B). - Describes the Human Resources/Education special committee. - Reviews 1/18/91 agenda.

180 Members and staff introduce themselves and describe their background.

TAPE 2, SIDE A

Staff submits proposed committee rules (EXHIBIT A).

025 MOTION: REP. MEEK MOVES TO ADOPT THE PROPOSED COMMITTEE RULES.

VOTE: IN A VOICE VOTE, THE MOTION PASSES UNANIMOUSLY.

MIKE SKEELS, HEALTH DIVISION: Introduces Larry Foster and Art Keil. - Defines public health: what we collectively, as a society, do to assure that the conditions in which people can be healthy. - Prevention is at the heart of public health. - Great advances in human health is a result of basic public health measures (i.e. sanitation, immunization, pre-natal care). 164 - Submits and summarizes the Health Division's mission statement (EXHIBIT C). 245 - Describes the agency (See: Page 2, Exhibit C). 290 - Describes the organization of the Health Division (See: Page 3, Exhibit C). - Provides a biennial budget summary (See: Page 4, Exhibit C). 340 - Submits and describes a transition document (EXHIBIT D). - Discusses environmental effects on health.

TAPE 1, SIDE B

020 - Discusses minority health needs. - In response to CHAIR FORD, the Governor's budget includes an elimination of support of school based health clinics. - In response to CHAIR FORD, local government has been included in the decision making of our budget cuts. 080 - In response to REP. BARNES, we are associated with the OHSU in terms of being colleagues, and have a direct service relationship (i.e. maternal/child health). 094 - Submits and explains a report of the Oregon Health 2000 Project (EXHB IT E). - In response to REP. STEIN, we will provide periodic updates on the Oregon Health 200 0 Project.

132 DR. LARRY FOSTER, HEALTH DIVISION: Discusses the AIDS epidemic in Oregon (See: page 4, Exhibit D). 195 - Discusses the need to educate teenagers and I.V. drug users about AIDS. - We explain to drug users the need to stop drug usage. If they are not interested in doing so, then we educate them about not sharing needles. - I.V. drug users are the primary source for infecting the heterosexual population.

300 - In response to CHAIR FORD, in Oregon, we have no evidence that athletes injecting steroids and sharing needles are contracting AIDS, although it is a potential. - We have had some success in convincing drug users not to share needles but have had no success in convincing them to be safer in their sexual practices. - The National Institute of Drug Abuse Project (NIDA) funds will be eliminated September 1991. 340 - There are a number of HIV positive individuals who are not taking precautions to protect others. We are developing a program to educate these individuals. 365 - Discusses funding needs to support preventative health care of HIV infected individuals (See: page 4, Exhibit D). - We need to organize health care services for HIV positive individuals, without wasting resources. - In response to REP. HAYDEN, the legislature has recently revised statutes regarding quarantining. Public health agencies do have the authority to isolate an individual who has an infectious disease and poses a threat to the public. I believe that such measures would not be appropriate for HIV/AIDS individuals since a person cannot contract it unless they choose to act in un-safe behavior (i.e. unprotected sex with multiple partners, sharing needles).

TAPE 2, SIDE B

- The emphasis of our resources are to focus on education rather than segregation.

020 REP. HAYDEN: Is it a health decision or an administrative/political decision to put at risk 90-95% of the healthy population in order to

mainstream those with a transmissible disease?

FOSTER: This is a health and fiscal decision. - Describes quarantine costs.

060 SKEELS: In response to REP. HAYDEN, AIDS is a disease which is hard to transmit and is transmitted only through certain types of behavior. - The general population is not at much risk; two people must participate to transmit this virus.

FOSTER: We are faced with an almost insoluble problem and we will probably continue to see growth in the HIV infection until we reach the point that all people participating in risky behavior are educated and choose to reduce their risk.

094 REP. MEEK: The general population is at risk, fiscally.

CHAIR FORD: Requests that the Health Division provide information on their budget cuts, by program. - Recesses the meeting at 3:30 p.m. - Re-convenes the meeting at 3:50 p.m.

135 JIM SCHERZINGER, LEGISLATIVE REVENUE OFFICE: Submits and describes a report on the impact of Measure 5 (EXHIBIT F).

- Describes the limitation on property (See: pages 2-4, Exhibit F). - Describes the impact of measure 5 on schools (See: page 11, Exhibit F).

TAPE 3, SIDE A

- Continues presentation. 100 - Submits and explains implementation issues regarding Measure 5 (EXHIBIT G). - Uses an overhead projector and explains state replacement requirements (EXHIBIT H).

197 CHAIR FORD: Adjourns the meeting at 4:10 p.m.

Submitted by,

Reviewed by,

Pamela Berger

Melanie Zermer

EXHIBIT LOG: A - Committee Rules - staff - 2 pp. B - Memo regarding institutional tours - staff - 1 p. C - Health Division Mission Statement - Skeels - 4 pp. D - Health Division Transition Document - Skeels - 10 pp. E - Oregon Health 2000 Project - Skeels - 43 pp. F - Measure 5 Report - Scherzinger - 27 pp. G - Measure 5 Issues - Scherzinger - 2 pp. H - Overhead graphs for Measure 5 - Scherzinger 6 pp.