



LAWS OF ALASKA

1973

Source

HCS CSSB 43

Chapter No.

78

AN ACT

Relating to comprehensive health planning.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

* Section 1. AS 18 is amended by adding a new chapter to read:

CHAPTER 07. COMPREHENSIVE HEALTH PLANNING.

Sec. 18.07.010. PURPOSE. (a) The objective of the Comprehensive Health Advisory Council is the health of the people of the state. By means of its recommendations, the council seeks to improve the planning for, and delivery of, health care services by:

- (1) moderating health care costs;
- (2) closing gaps in health care services;
- (3) preventing fragmentation and overlap in health care services;
- (4) encouraging the growth of preventive health care;
- (5) promoting better distribution and wiser use of resources;
- (6) establishing accountability for health care; and
- (7) ensuring that consumers of health care services have a voice in health planning and decision making.

(b) The concerns of the council are unique in that

they encompass all aspects of health and all factors that influence health.

Sec. 18.07.020. COMPREHENSIVE HEALTH ADVISORY COUNCIL. There is created a Comprehensive Health Advisory Council whose membership reflects the broad geographic, socio-economic, age, sex, ethnic, and professional health elements in the state. The composition of the council's membership and the term of office of its members shall comply with applicable provisions of federal law.

Sec. 18.07.030. MEMBERSHIP; TERM OF OFFICE. (a) The Comprehensive Health Advisory Council consists of 24 members of whom 3 are governmental and 21 are nongovernmental. Consumers of health care services shall constitute a minimum of 51 per cent of the total membership.

(b) The three governmental members are the commissioner of health and social services, or his designee from within the department; a representative of the Indian Health Service of the United States Public Health Service; and a representative of the Veterans Administration of the United States; and one representative of the health care service or delivery agencies of the armed forces of the United States to serve in an advisory capacity. Council members representing federal agencies shall be appointed by, and serve at the pleasure of, their respective agencies.

(c) Nongovernmental members are appointed by the governor, subject to confirmation by a majority of the members of the legislature in joint session. Of the nongovernmental members, 13 shall be consumers of health care services and 8 shall be providers of health care services. Unless federal law provides otherwise, nongovernmental members are appointed for four-year staggered terms. Of the initial appointees, the governor shall appoint six nongovernmental members for one-year terms, five for two-year terms, five for three-year terms, and five for four-year terms. Each nongovernmental member holds office at the pleasure of the governor notwithstanding the member's term.

(d) Vacancies shall be filled by the appointing authority in the same manner as original appointment.

Sec. 18.07.040. ADDITIONAL MEMBERS; SPECIAL COMMITTEES. (a) Additional members may be appointed by the governor in compliance with applicable provisions of federal law and sec. 30 of this chapter. The terms of office of any additional members shall be four years, but a term of less than four years shall be assigned when appointment to a full four-year term would impair the system of staggered four-year terms under sec. 30(c) of this chapter.

(b) The council may create special committees or task forces outside its membership and may recommend persons who are not members of the council to serve as advisors or consultants to any committee created to carry out the purposes of the council.

Sec. 18.07.050. OFFICERS. The council shall elect a chairman and a vice-chairman to serve two-year terms. The

chairmanship and vice-chairmanship shall rotate between a provider-member and a consumer-member every two years, and at no time may these positions be held simultaneously by two provider-members or two consumer-members.

Sec. 18.07.060. MEETINGS. The council shall meet at times and places determined by the chairman, but no less than twice a year. The council shall prescribe its own rules of procedure. However, a quorum is a majority of the members of the council. Effective action requires the affirmative vote of a majority of the members of the council present. No council member may, with respect to a matter before the council, vote for or on behalf of, or in any way exercise the vote of, another member of the council.

Sec. 18.07.070. COMPENSATION AND PER DIEM. Members of the council serve without compensation but are entitled to per diem and travel expenses as may be authorized by law for boards and commissions.

Sec. 18.07.080. FUNCTIONS AND DUTIES. The council shall

(1) consult with persons with various health viewpoints and advise the commissioner as to its duties under sec. 90 of this chapter, concerning

(A) health objectives, goals, priorities, and policy;

(B) distribution of health resources and health care services;

(C) health education;

(D) development and updating of a comprehensive state health plan;

(E) special needs of high risk population groups for preventive and health care services;

(F) health needs in the fields of welfare, education and rehabilitation;

(2) promote the cooperation of governmental and nongovernmental agencies in realizing the objectives of a statewide comprehensive health plan by

(A) fostering coordinated planning efforts among these agencies;

(B) encouraging coordination of activities and plans of areawide comprehensive health planning councils and other voluntary health planning groups;

(C) creating committees and task forces for specific health problems; and

(D) evaluating its past recommendations, accomplishments and impact as a statewide advisory council;

(3) perform additional functions and duties that are necessary to comply with applicable state and federal health programs or other functions and duties requested by the department;

(4) promote development of areawide and state-assisted local comprehensive health planning groups;

(5) review and comment on, at the request of the department, applications for programming and for public funds;

(6) alert the department to health-related public concerns;

(7) serve as the Hill-Burton Advisory Council under Title VI, Public Health Service Act (P.L. 79-725, as amended) and the Community Mental Health Centers Advisory Council under Title II, Community Mental Health Centers Construction Act (P.L. 88-164, as amended).

Sec. 18.07.090. PLANNING AGENCY. (a) The Department of Health and Social Services is the state agency responsible for the administration of state comprehensive health planning functions under sec. 314(a) of the Public Health Service Act (P.L. 89-749, as amended).

(b) The office of comprehensive health planning in the department is responsible for carrying out the comprehensive health planning functions under (a) of this section. This office shall provide professional staff for the council.

(c) The department shall promulgate regulations under the Administrative Procedure Act (AS 44.62) governing the scope and functions of the office of comprehensive health planning.

Sec. 18.07.100. DEFINITIONS. In this chapter

(1) "commissioner" means the commissioner of health and social services;

(2) "consumer of health care services" means a person who is not a provider of health care services as defined in (6) of this section;

(3) "council" means the Comprehensive Health Advisory Council;

(4) "department" means the Department of Health and Social Services;

(5) "office" means the office of comprehensive health planning in the Department of Health and Social Services;

(6) "provider of health care services" means a person whose occupation or profession is, or has been, the providing of health care or the administration of health care services; he has fiduciary obligations to a health activity, facility or other health agency, or a legal or financial interest in the rendering of any component of

health services, research or teaching of health science or of the healing arts; he may be an active, inactive or retired practitioner in the healing arts.

* Sec. 2. AS 18.05.051 - 18.05.055 are repealed.