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THE APPARENT PROBLEM:

Every year the Department of Public Health is required by law to identify "priority" health problems in the state and prepare a proposed list of basic preventive, personal, and environmental health services to be made available to people in the state. The current nine-item list of basic public health services includes immunizations, communicable disease control, venereal disease control, tuberculosis control, prevention of gonorrhea eye infections in newborns, screening newborns for hypothyroidism and phenylketonuria, the health/medical annex of the emergency preparedness plan, licensing and surveillance of agricultural labor camps, and prenatal care.

Every two years, the department also is required to determine the level of coverage of the people in Michigan for each basic public health service. The code allows the use of scientific sampling of the population to determine the level of coverage of basic health services, but specifically prohibits the use of "indirect evidence, such as number of immunizations or other services delivered, chunk samples of conveniently accessible but unrepresentative segments of the population, or other methods not involving direct contact with a representative cross section of the people of this state."

However, though the Department of Public Health has asked local health departments for information concerning utilization of basic public health services, apparently there have been no evaluations carried out as prescribed by the code since the revised Public Health Code was adopted in 1978. One problem with the code's requirements is that the code restricts the methods to be used in such a determination to "scientific sampling of the population," which apparently is more cumbersome and costly than other scientific statistical methods. At the request of the Department of Public Health, legislation has been introduced which would allow the department to use other statistical methods to determine basic health service coverage.

THE CONTENT OF THE BILL:

The bill would amend the Public Health Code to allow, in addition to scientific sampling, "other scientific statistical techniques that will provide an accurate estimate of the level of coverage," striking mention of "indirect evidence." MCL 333.2615

FISCAL IMPLICATIONS:

The Department of Public Health says the bill has no fiscal implications. (2-13-90)

ARGUMENTS:

For:

Current law requires the Department of Public Health to assess the level of coverage for basic public health services by using only scientific sampling of the population involved.

BASIC HEALTH SERVICE INFORMATION

House Bill 5412 as introduced First Analysis (3-13-90)

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Sponsor: Rep. John D. Pridnia Committee: Public Health MAR 2 1 1990

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However, not only is the cost of sampling the general population high, for some basic services the general population is not the direct recipient of the service and therefore the level of coverage of that service cannot be determined by sampling the population. In many cases there are sufficient data from administrative records or specific data systems to accurately evaluate coverage. It would be more effective and more cost efficient to allow the use of these data along with appropriate scientific tabulations and analysis methods to measure the coverage of basic services.

POSITIONS:

The Department of Public Health supports the bill. (2-13-90)

The Michigan Association of Local Public Health supports the bill. (3-9-90)