



# Optimal Health for All in the Legislative Process



## Legislative Overview Series: 2024 Public Health Spotlight

### Introduction

Public health leaders work to ensure that everyone has the same chance to be healthy, regardless of their background, by embedding health equity into aspects of their work. Achieving [optimal health for all](#) requires a comprehensive approach that includes understanding (1) historical contributions to health inequities, (2) the systems and institutions that contribute to health disparities, and (3) ways to address current environmental factors that magnify negative health outcomes. The COVID-19 pandemic highlighted many health disparities, and state legislatures are now working to address equity by improving health data collection, increasing access to health services in rural communities, and responding to climate change.

### Legislative Trends

#### Incorporating Health Equity

Multiple state and local jurisdictions are supporting and enacting statutes designed to promote health equity and address gaps in specific health-related needs within their most underserved populations. During the 2023 legislative session, Oregon enacted laws clarifying that Oregon Health Authority was permitted to collect data on a person's country of origin ([OR SB 216](#)) and directing Oregon Health Authority to develop recommendations for linguistically specific intervention programs to address communities' needs and health inequities. Further, Oregon enacted [HB 2925](#), directing the Oregon Advocacy Commission Office to report recommendations on allocating resources to address community needs from affinity task forces consisting of leaders from indigenous communities and people of color.

Building upon workforce development, several states continue to adopt laws to expand cultural awareness in the healthcare workforce. Nevada enacted [AB 267](#), which requires some medical facilities to conduct cultural competency programs to specific employees and agents. Kentucky enacted [HB 200](#), creating a new healthcare workforce investment fund to provide training scholarships to increase the diversity of the workforce and meet specific needs of historically underserved populations.

Several states extended or expanded existing health equity programs during the 2023 session. For example, California ([CA AB 1701](#)) expanded its Black Infant Health Program to more city health departments across the state. In addition, Colorado ([CO SB 23-151](#)) extended its Health Equity Commission through 2029.

California enacted [SB 414](#), establishing a Digital Equity Bill of Rights which seeks to have ubiquitous, reliable broadband access “from the most rural areas, including tribal lands, to the most populated urban areas, including all low-income neighborhoods.”

#### Collecting Health Disparity Data

Data showing evidence of health disparities continues to be crucial for tracking progress toward optimizing health for all. A lack of standardized data collection on population subgroups (e.g. individuals from pacific islands) has hindered jurisdictions' understanding of health disparities and ability to develop policies to eliminate them. In 2023, Virginia enacted legislation ([VA HB 229](#)) directing the Virginia Department of Health to collect disaggregated demographic and social determinants of health data and publish the data on their website. Several states considered legislation to expand demographic data categories, particularly for ethnically diverse populations. Hawaii enacted a new law ([HI SB 811](#)) establishing a task force to assess demographic data collection, processing, retention, and sharing among other departments. This law also requires annual reporting to the legislature.

#### Rural Healthcare Access

Accessing healthcare can be a challenge in many rural communities, especially in communities experiencing [healthcare workforce shortages](#) or [hospital closures](#). During the 2023 legislative sessions, several state legislatures took action to improve access to healthcare in rural communities. Arkansas enacted the Rural Emergency Hospital Act ([AR HB 1127](#)), creating a rural emergency hospital license for facilities that provide emergency services 24 hours a day with a physician, nurse practitioner, clinical nurse specialist, or physician assistance and have a transfer agreement with a Level I or Level II trauma center. Mississippi enacted [SB 2323](#) to guide



community hospital collaboration and consolidation to better meet the needs of rural communities.

Investment in rural community infrastructure, particularly broadband internet access, can improve access to healthcare by making it easier for rural residents to use telehealth services. At least five states—Colorado ([CO HB 23-1051](#)), Florida ([FL HB 1221](#)), Minnesota ([MN SF 1955](#)), New Mexico ([NM SB 155](#)), and Oregon ([OR HB 3201](#))—recently enacted laws investing in rural broadband infrastructure. Several states enacted laws specifically supporting expanded telehealth services. Hawaii enacted [HB 907](#), which allows telehealth services offered via an interactive telecommunications system to be reimbursed. At least two states—Indiana ([IN HB 1352](#)) and Kentucky ([KY HB 311](#))—enacted laws clarifying that providers who only offer telehealth services do not need to maintain a physical presence in the state to qualify for Medicaid reimbursement.

### Climate Change Adaptation Planning

The effects of our changing climate, from rising temperatures to an increase in the occurrence and magnitude of extreme weather events, lead to many negative health effects for individuals and communities. [Public health impacts](#) include increased instances of asthma, cardiovascular disease, and vector-borne diseases such as Lyme disease and Zika. The World Health Organization [estimates](#) that as many as 24.3% of deaths in 2016 were linked to the environment. In anticipation of these challenges, states and territories are developing [climate adaptation plans](#) tailored to the unique vulnerabilities their jurisdictions face, such as heightened risk of flooding or higher incidence of severe heat.

During the [2023 legislative sessions](#), states introduced a myriad of legislative proposals to fund climate change initiatives, implement education programs, and publish plans, assessments, and reports. California enacted the Climate Corporate Data Accountability Act ([CA SB 253](#)), requiring the state’s air resources board to make available annually reported emissions of

greenhouse gases, criteria pollutants, and toxic air contaminants. Oregon also enacted the Community Green Infrastructure Grant Program ([OR HB 3409](#)), which declares climate change a state of emergency and instructs several agencies to partner with Oregon Health Authority on various climate and environmental initiatives, including those related to water quality.

## Looking Ahead

ASTHO expects states and territories to continue considering legislative proposals to address health equity in 2024 by working to improve access for rural communities through workforce and infrastructure development, supporting the collection of race and ethnicity health data, and addressing climate change by mitigating health risks from extreme weather events. Future state legislative action may include:

- Addressing healthcare access in rural communities by increasing workforce development programs, investing in rural broadband availability, and addressing rural healthcare facility closures.
- Enhancing efforts to collect more robust disaggregated data and creating data collection systems shared through multiple agencies.
- Increasing investments to expand capacity to prevent, protect, and respond to the human health impacts of climate and extreme weather.

Oregon’s new Community Green Infrastructure Grant Program ([OR HB 3409](#)) will require several agencies to partner with the Oregon Health Authority on various climate and environmental initiatives, including improving water quality.

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