

1 State of Arkansas  
2 88th General Assembly  
3 Regular Session, 2011

# A Bill

SENATE BILL 459

4  
5 By: Senator Crumbly

## For An Act To Be Entitled

8 AN ACT TO FOCUS STATE AGENCY ATTENTION ON MORTALITY  
9 DISPARITIES; TO DEFINE RED COUNTIES; TO CREATE  
10 PROGRAMS TO REMEDY MORTALITY DISPARITIES IN THIS  
11 STATE; AND FOR OTHER PURPOSES.

## Subtitle

15 TO FOCUS STATE AGENCY ATTENTION ON  
16 MORTALITY DISPARITIES; TO DEFINE RED  
17 COUNTIES; AND TO CREATE PROGRAMS TO  
18 REMEDY MORTALITY DISPARITIES IN THIS  
19 STATE.

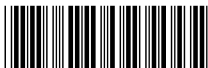
22 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

24 SECTION 1. Arkansas Code Title 25, Chapter 1, subchapter 1 is amended  
25 to add an additional section to read as follows:

26 25-1-118. Services and studies concerning mortality disparities.

27 (a) As used in this section, "red counties" means counties most in  
28 need of services to reduce mortality disparities as follows:

- 29 (1) Arkansas;  
30 (2) Chicot;  
31 (3) Crittenden;  
32 (4) Cross;  
33 (5) Dallas;  
34 (6) Desha;  
35 (7) Fulton;  
36 (8) Jackson;



- 1           (9) Jefferson;
- 2           (10) Mississippi;
- 3           (11) Monroe;
- 4           (12) Ouachita;
- 5           (13) Perry;
- 6           (14) Phillips;
- 7           (15) Poinsett;
- 8           (16) St. Francis;
- 9           (17) Sevier;
- 10          (18) Union; and
- 11          (19) Woodruff;

12          (b) The General Assembly finds:

13           (1) It is unacceptable for Arkansans born and living in one part  
 14 of the state to have a life expectancy rate six (6) to ten (10) years less  
 15 than Arkansans born and living in another part of the state;

16           (2) Complex factors operating at the levels of individuals,  
 17 interpersonal networks, organizations, or communities influence disparities  
 18 in health and healthcare; and

19           (3) Health and healthcare disparities are not only unacceptable,  
 20 but also have human, economic, social, and developmental costs that affect  
 21 all residents of the nation and the State of Arkansas.

22          (c) Each state agency, board, and commission that receives state  
 23 dollars or tobacco settlement funds intended to improve the quality of health  
 24 in Arkansas shall create and maintain programs, services, and research aimed  
 25 at reducing mortality disparities in red counties, including without  
 26 limitation:

- 27           (1) Coordinated and comprehensive health screenings;
- 28           (2) Preventative health services;
- 29           (3) Health outreach programs;
- 30           (4) Health awareness programs; and
- 31           (5) Public outreach to inform the general population about

32 health concerns.

33          (d)(1) The following entities shall work together to identify the red  
 34 counties most in need of help with mortality disparities and shall make that  
 35 data available to the public:

- 36           (A) The Arkansas Center for Health Improvement;

- 1                   (B) The Arkansas Minority Health Commission;
- 2                   (C) The Arkansas Department of Environmental Quality;
- 3                   (D) The Department of Health; and
- 4                   (E) Fay W. Boozman College of Public Health of the
- 5 University of Arkansas for Medical Sciences.

6                   (2) The entities listed in subdivision (d)(1) of this section  
7 shall jointly prepare an annual report for the chair of the House Committee  
8 on Public Health, Welfare, and the chair of the Labor and the chair of the  
9 Senate Committee on Public Health, Welfare, and Labor and the Governor to be  
10 delivered on or before October 1 of each year.

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