

SENATE BILL REPORT

2SHB 1497

As Passed Senate, March 27, 2019

Title: An act relating to foundational public health services.

Brief Description: Concerning foundational public health services.

Sponsors: House Committee on Appropriations (originally sponsored by Representatives Robinson, Harris, Cody, Jenkins, DeBolt, Macri, Stonier, Corry, Riccelli, Thai, Kilduff, Stanford and Kloba; by request of Department of Health).

Brief History: Passed House: 3/05/19, 94-4.

Committee Activity: Health & Long Term Care: 3/18/19, 3/20/19 [DP, DNP].

Floor Activity:

Passed Senate: 3/27/19, 44-1.

Brief Summary of Bill

- Requires the Department of Health, federally recognized Indian tribes, a state association representing local health jurisdictions, and the State Board of Health to agree to the distribution and use of funds appropriated for foundational public health services in order for the funds to be distributed.
- Defines foundational public health services.
- Repeals statutes related to the public health services improvement plan.

SENATE COMMITTEE ON HEALTH & LONG TERM CARE

Majority Report: Do pass.

Signed by Senators Cleveland, Chair; Randall, Vice Chair; O'Ban, Ranking Member; Conway, Frockt, Keiser and Van De Wege.

Minority Report: Do not pass.

Signed by Senators Bailey and Becker.

Staff: Greg Attanasio (786-7410)

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

Background: The public health system in Washington includes the Department of Health (DOH), the State Board of Health (BOH), 35 local health jurisdictions, and tribal governments. DOH is charged with performing duties related to vital statistics; studying factors related to health improvement, the causes of morbidity and mortality, and the effects of the environment on public health; investigating and advising local health officers; performing health inspections; regulating public water systems; and maintaining a public health laboratory. BOH provides a public forum for the development of public health policy. Rules adopted by BOH cover issues such as newborn screening, childhood immunizations, disease prevention and control, cleanliness of facilities, drinking water quality, food service, and vital statistics. Local health jurisdictions enforce public health statutes, as well as rules adopted by BOH, DOH, and local governments. The state, tribes, and urban Indian health clinics address public health issues through a government-to-government relationship.

DOH is required to submit a biennial public health services improvement plan developed in coordination with BOH, local health jurisdictions, and others. The plan addresses minimum standards for public health protection, strategies and a schedule for improving public health programs throughout the state, and a recommended level of dedicated funding.

In 2007, the Legislature required DOH to develop a prioritized list of activities and services performed by local health jurisdictions that qualify as core public health functions of statewide significance and to adopt performance measures, by January 1, 2008. DOH and local health jurisdictions must abide by the list and performance measures. DOH must provide local jurisdictions with financial incentives to encourage local investments in core public health functions.

The 2016 supplemental operating budget directed DOH and local health jurisdictions to provide a proposal outlining a plan for implementing foundational public health services statewide to modernize, streamline, and fund a twenty-first century public health system. In the 2017-2019 operating budget, the Legislature appropriated one-time funding of \$12 million for foundational public health services.

Summary of Amended Bill: "Foundational public health services" means a limited statewide set of defined public health services within the following areas: control of communicable diseases and other notifiable conditions; chronic disease and injury prevention; environmental public health; maternal, child, and family health; access to and linkage with medical, oral, and behavioral health services; vital records; and cross-cutting capabilities including assessing the health of populations, public health emergency planning, communications, policy development and support, community partnership development, and business competencies.

Funding for foundational public health services must be appropriated to the Office of Financial Management (OFM). OFM may only allocate funding to DOH if DOH, after consultation with federally recognized Indian tribes, jointly certifies with a state association representing local health jurisdictions and BOH, that there has been an agreement on the distribution and uses of the funding across the public health system. If joint certification is provided, DOH must distribute the funding according to the agreed-upon distribution and uses. If joint certification is not provided, the appropriation for foundational public health services lapse.

By October 1, 2020, DOH, in partnership with tribes, local health jurisdictions, and BOH, must report on:

- service delivery models for foundational public health services, and a plan for further implementation of successful models;
- changes in capacity of the governmental public health system; and
- progress made to improve health outcomes.

Statutes requiring DOH to submit a public health services improvement plan, define core public health functions, and provide local jurisdictions with financial incentives to encourage investments in core public health functions are repealed.

Appropriation: None.

Fiscal Note: Available.

Creates Committee/Commission/Task Force that includes Legislative members: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony: PRO: A sound public health system is vital for health communities. The bill would standardize what local public health means in Washington. Current law does not include tribes as a formal part of the system. This bill will bring together all relevant members of the public health system and promote collaboration.

Persons Testifying: PRO: Representative June Robinson, Prime Sponsor; Michelle Davis, Washington State Board of Health; John Wiesman, Secretary, Department of Health; Steve Kutz, American Indian Health Commission; Stephanie Wright, Snohomish County Board of Health; Theresa Adkinson, Grant County Health District.

Persons Signed In To Testify But Not Testifying: No one.