RCW 43.70.715 COVID-19 public health response account. (1) The COVID-19 public health response account is created in the custody of the state treasurer. The account shall consist of funds appropriated by the legislature and grants received by the department of health for activities in response to the coronavirus pandemic (COVID-19). Only the secretary, or the secretary's designee, may authorize expenditures from the account for costs related to the public health response to COVID-19, subject to any limitations imposed by grant funding deposited into the account. The COVID-19 public health response account is subject to allotment procedures under chapter 43.88 RCW, but an appropriation is not required for expenditures.

(2) (a) The legislature finds that a safe, efficient, and effective delivery of vaccinations is of the utmost importance for restoring societal and economic functions. As we learn more about the virus, the vaccine, and challenges to vaccine allocation and distribution, it is anticipated that the state's COVID-19 vaccination distribution plan will evolve. To that end, the legislature has provided flexibility by funding expenditures for testing, contact tracing, mitigation activities, vaccine administration and distribution, and other allowable uses for the state, local health jurisdictions, and tribes at the discretion of the secretary and without an appropriation. However, to maintain fiscal control and to ensure spending priorities align, the department is required to collaborate and communicate with the chairs and ranking members of the health care and fiscal committees of the legislature and local health jurisdictions in advance of any significant revision of the state's COVID-19 vaccination plan and to provide regular updates on its implementation and spending.

(b) As part of the public health response to COVID-19, the expenditures from the account must be used to effectively administer the vaccine for COVID-19 and conduct testing and contact tracing. The department must ensure that COVID-19 outreach is accessible, culturally and linguistically appropriate, and that it includes community-driven partnerships and strategies.

(c) When making expenditures for administering the vaccine for COVID-19, the department must focus on identifying persons for vaccination, prioritizing underserved, underrepresented, and hard-toreach communities, making the vaccine accessible, and providing support to schools for safe reopening. Strategies for vaccine distribution shall include the establishment and expansion of community vaccination centers, mobile vaccination units, reporting enhancements, in-home visits for vaccinations for the elderly, and transportation of individuals to vaccination sites.

(d) When making expenditures regarding testing and contact tracing, the department must provide equitable access, prioritize underserved, underrepresented, and hard-to-reach communities, and provide support and resources to facilitate the safe reopening of schools while minimizing community spread of the virus.

(e) The department may also make expenditures from the account related to developing the public health workforce using funds granted by the federal government for that purpose in section 2501, the American rescue plan act of 2021, P.L. 117-2.

(3) When making expenditures from the account, the department must include an emphasis on public communication regarding the availability and accessibility of the vaccine and testing, and the importance of vaccine and testing availability to the safe reopening of the state.

(4)(a) The department must report to the fiscal and health care committees of the legislature on a monthly basis regarding its COVID-19 response.

To the extent that it is available, the report must include data regarding vaccine distribution, testing, and contact tracing, as follows:

(i) The number of vaccines administered per day, including regional data regarding the location and age groups of persons receiving the vaccine, specifically identifying hard-to-reach communities in which vaccines were administered; and

(ii) The number of tests conducted per week, including data specifically addressing testing conducted in hard-to-reach communities.

(b) (i) Beginning with the quarter ending March 31, 2022, the department must report to the fiscal and health care committees of the legislature on a quarterly basis regarding revenues and expenditures related to the COVID-19 response. The reports must include:

(A) Quarterly expenditures of funds, by fund source, including the appropriated amounts pursuant to section 222 (76) and (77), chapter 297, Laws of 2022 for:

(I) Diagnostic testing;

(II) Case investigation and contact tracing;

(III) Outbreak response;

(IV) Care coordination;

(V) Community outreach;

(VI) Information and technology operations;

(VII) Surveillance;

(VIII) Vaccines;

(IX) Client services;

(X) Local health jurisdictions; and

(XI) Tribes; and

(B) Grant amounts received during the reporting quarter that may be used in the COVID-19 response.

(ii) The quarterly reports must reflect the previous quarter, a projection of expected expenditures and revenue for the next quarter, and an accounting of the expenditures and revenue for the 2021-2023 fiscal biennium to date. The quarterly reports are due no later than 30 days after the end of the applicable quarter.

(c) The first monthly report pursuant to (a) of this subsection is due no later than one month from February 19, 2021. Monthly reports are no longer required upon the department's determination that the remaining balance of the COVID-19 public health response account is less than 100,000. [2022 c 297 § 955; 2022 c 157 § 7. Prior: 2021 c 334 § 1004; 2021 c 3 § 19.]

Reviser's note: This section was amended by 2022 c 157 § 7 and by 2022 c 297 § 955, each without reference to the other. Both amendments are incorporated in the publication of this section under RCW 1.12.025(2). For rule of construction, see RCW 1.12.025(1).

Effective date-2022 c 297: See note following RCW 43.79.565.

Conflict with federal requirements—Effective date—2021 c 334: See notes following RCW 43.79.555.

Conflict with federal requirements—2021 c 3: "If any part of this act is found to be in conflict with federal requirements that are

a prescribed condition to the allocation of federal funds to the state, the conflicting part of this act is inoperative solely to the extent of the conflict and with respect to the agencies directly affected, and this finding does not affect the operation of the remainder of this act in its application to the agencies concerned. Rules adopted under this act must meet federal requirements that are a necessary condition to the receipt of federal funds by the state." [2021 c 3 § 21.]

Effective date—2021 c 3: "This act is necessary for the immediate preservation of the public peace, health, or safety, or support of the state government and its existing public institutions, and takes effect immediately [February 19, 2021]." [2021 c 3 § 22.]