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**SUBSTITUTE HOUSE BILL 1432**

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**State of Washington                      65th Legislature                      2017 Regular Session**

**By** House Appropriations (originally sponsored by Representatives Robinson, Harris, Jenkins, Pollet, Kilduff, Slatter, and Cody; by request of Department of Health)

READ FIRST TIME 02/24/17.

1            AN ACT Relating to foundational public health services; amending  
2 RCW 43.70.512, 43.70.514, and 43.70.516; adding a new section to  
3 chapter 43.70 RCW; repealing RCW 43.70.520; and creating a new  
4 section.

5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

6            NEW SECTION.    **Sec. 1.**    A new section is added to chapter 43.70  
7 RCW to read as follows:

8            The core public health services account is created in the state  
9 treasury. All receipts from moneys appropriated for foundational  
10 public health services must be deposited into the account. Moneys in  
11 the account may be spent only after appropriation. Expenditures from  
12 the account may only be used for foundational public health services.  
13 Distributions from the account shall be made by the department under  
14 allocation plans mutually agreed to by the department and local  
15 health jurisdictions, and shall not be subject to any administrative  
16 fees, expenses, or other deductions by the department.

17            **Sec. 2.**    RCW 43.70.512 and 2007 c 259 s 60 are each amended to  
18 read as follows:

19            (1) Protecting the public's health across the state is a  
20 fundamental responsibility of the state which is accomplished in

1 collaboration with local health jurisdictions and sovereign tribal  
2 nations. With any ((new)) state funding of the public health system  
3 (~~as appropriated for the purposes of sections 60 through 65 of this~~  
4 ~~act~~)), the state expects that measurable benefits will be realized to  
5 the health of the residents of Washington. A transparent process that  
6 shows the impact of increased public health spending on performance  
7 measures related to the health outcomes in subsection (2) of this  
8 section is of great value to the state and its residents. In  
9 addition, a well-funded governmental public health system is expected  
10 to become a more integral part of the state's emergency preparedness  
11 system.

12 (2) Subject to the availability of amounts appropriated for the  
13 purposes of (~~sections 60 through 65 of~~) this act, (~~distributions~~  
14 ~~to local health jurisdictions~~) the governmental public health system  
15 shall deliver (~~the following~~) measurable outcomes(~~:~~

16 ~~(a) Create a disease response system capable of responding at all~~  
17 ~~times;~~

18 ~~(b) Stop the increase in, and reduce, sexually transmitted~~  
19 ~~disease rates;~~

20 ~~(c) Reduce vaccine preventable diseases;~~

21 ~~(d) Build capacity to quickly contain disease outbreaks;~~

22 ~~(e) Decrease childhood and adult obesity and types I and II~~  
23 ~~diabetes rates, and resulting kidney failure and dialysis;~~

24 ~~(f) Increase childhood immunization rates;~~

25 ~~(g) Improve birth outcomes and decrease child abuse;~~

26 ~~(h) Reduce animal to human disease rates; and~~

27 ~~(i) Monitor and protect drinking water across jurisdictional~~  
28 ~~boundaries.~~

29 ~~(3) Benchmarks for these outcomes shall be drawn from the~~  
30 ~~national healthy people 2010 goals, other reliable data sets, and any~~  
31 ~~subsequent national goals)) related to core public health services~~  
32 ~~and essential capabilities that comprise foundational public health~~  
33 ~~services.~~

34 **Sec. 3.** RCW 43.70.514 and 2007 c 259 s 61 are each amended to  
35 read as follows:

36 The definitions in this section apply throughout (~~sections 60~~  
37 ~~through 65 of this act~~) this chapter unless the context clearly  
38 requires otherwise.

1       (1) "Core programs" means public health programs needed in every  
2 community in order to protect people's health including:

3       (a) Control of communicable disease and other notifiable  
4 conditions;

5       (b) Chronic disease and injury prevention;

6       (c) Environmental public health;

7       (d) Maternal, child, and family health;

8       (e) Access to and linkage with medical, oral, and behavioral  
9 health care services; and

10       (f) Vital records.

11       (2) "Core public health ((functions)) services of statewide  
12 significance" or "foundational public health ((functions)) services"  
13 means ((health services that:

14       ~~(a) Address: Communicable disease prevention and response;~~  
15 ~~preparation for, and response to, public health emergencies caused by~~  
16 ~~pandemic disease, earthquake, flood, or terrorism; prevention and~~  
17 ~~management of chronic diseases and disabilities; promotion of healthy~~  
18 ~~families and the development of children; assessment of local health~~  
19 ~~conditions, risks, and trends, and evaluation of the effectiveness of~~  
20 ~~intervention efforts; and environmental health concerns;~~

21       ~~(b) Promote uniformity in the public health activities conducted~~  
22 ~~by all local health jurisdictions in the public health system,~~  
23 ~~increase the overall strength of the public health system, or apply~~  
24 ~~to broad public health efforts; and~~

25       ~~(c) If left neglected or inadequately addressed, are reasonably~~  
26 ~~likely to have a significant adverse impact on counties beyond the~~  
27 ~~borders of the local health jurisdiction)) essential capabilities and~~  
28 ~~core programs that must be present in every community through the~~  
29 ~~governmental public health system to effectively and efficiently~~  
30 ~~protect and promote healthy individuals, families, and communities~~  
31 ~~throughout Washington and:~~

32       (a) Are population-based prevention services or individual  
33 interventions that have significant population health implications;

34       (b) Require a consistent and uniform level of services throughout  
35 all communities in the state to protect the population;

36       (c) Have governmental public health as the only or primary  
37 service provider; or

38       (d) Provide the necessary organizational capabilities to support  
39 program services.

1       (3) "Essential capabilities" means the knowledge, skill, ability,  
2 and systems infrastructure necessary to support effective and  
3 efficient governmental public health services including:

4       (a) Assessing the health of populations through surveillance and  
5 epidemiology;

6       (b) Public health emergency planning;

7       (c) Communication;

8       (d) Policy development and support;

9       (e) Community partnership development; and

10       (f) Business competencies.

11       (4) "Governmental public health system" means the state  
12 department of health, state board of health, local public health  
13 agencies and boards, and the sovereign tribal nations of Washington.

14       ~~((+2))~~ (5) "Local health jurisdiction" or "jurisdiction" means a  
15 county board of health organized under chapter 70.05 RCW, a health  
16 district organized under chapter 70.46 RCW, or a combined city and  
17 county health department organized under chapter 70.08 RCW.

18       (6) "Shared services" means a systematic sharing of resources and  
19 functions among state and local governmental public health entities  
20 and sovereign tribal nations to increase capacity and improve  
21 efficiency and effectiveness.

22       **Sec. 4.** RCW 43.70.516 and 2007 c 259 s 62 are each amended to  
23 read as follows:

24       ~~(1) ((The department shall accomplish the tasks included in~~  
25 ~~subsection (2) of this section by utilizing the expertise of varied~~  
26 ~~interests, as provided in this subsection.~~

27       ~~(a) In addition to the perspectives of local health~~  
28 ~~jurisdictions, the state board of health, the Washington health~~  
29 ~~foundation, and department staff that are currently engaged in~~  
30 ~~development of the public health services improvement plan under RCW~~  
31 ~~43.70.520, the secretary shall actively engage:~~

32       ~~(i) Individuals or entities with expertise in the development of~~  
33 ~~performance measures, accountability and systems management, such as~~  
34 ~~the University of Washington school of public health and community~~  
35 ~~medicine, and experts in the development of evidence-based medical~~  
36 ~~guidelines or public health practice guidelines; and~~

37       ~~(ii) Individuals or entities who will be impacted by performance~~  
38 ~~measures developed under this section and have relevant expertise,~~

1 such as community clinics, public health nurses, large employers,  
2 tribal health providers, family planning providers, and physicians.

3 (b) In developing the performance measures, consideration shall  
4 be given to levels of performance necessary to promote uniformity in  
5 core public health functions of statewide significance among all  
6 local health jurisdictions, best scientific evidence, national  
7 standards of performance, and innovations in public health practice.  
8 The performance measures shall be developed to meet the goals and  
9 outcomes in RCW 43.70.512. The office of the state auditor shall  
10 provide advice and consultation to the committee to assist in the  
11 development of effective performance measures and health status  
12 indicators.

13 (c) On or before November 1, 2007, the experts assembled under  
14 this section shall provide recommendations to the secretary related  
15 to the activities and services that qualify as core public health  
16 functions of statewide significance and performance measures. The  
17 secretary shall provide written justification for any departure from  
18 the recommendations.

19 (2) By January 1, 2008, the department shall:

20 (a) Adopt a prioritized list of activities and services performed  
21 by local health jurisdictions that qualify as core public health  
22 functions of statewide significance as defined in RCW 43.70.514; and

23 (b) Adopt appropriate performance measures with the intent of  
24 improving health status indicators applicable to the core public  
25 health functions of statewide significance that local health  
26 jurisdictions must provide.

27 (3) The secretary may revise the list of activities and the  
28 performance measures in future years as appropriate. Prior to  
29 modifying either the list or the performance measures, the secretary  
30 must provide a written explanation of the rationale for such changes.

31 (4) The department and the local health jurisdictions shall abide  
32 by the prioritized list of activities and services and the  
33 performance measures developed pursuant to this section.

34 (5) The department, in consultation with representatives of  
35 county governments, shall provide local jurisdictions with financial  
36 incentives to encourage and increase local investments in core public  
37 health functions. The local jurisdictions shall not supplant existing  
38 local funding with such state-incented resources.)) Within the funds  
39 appropriated, local health jurisdictions and the department shall  
40 expand delivery of shared services to modernize and streamline the

1 governmental public health system. This expansion must begin with a  
2 shared services project in the following two foundational public  
3 health services:

4 (a) Epidemiology assessment; and

5 (b) Communicable disease monitoring and response.

6 (2) By October 1, 2018, the department, in consultation with  
7 governmental public health systems and the entities described in (b)  
8 of this subsection, shall develop a governmental public health  
9 improvement plan.

10 (a) The plan shall include, at minimum:

11 (i) Activities and services that qualify as foundational public  
12 health services as defined in RCW 43.70.514;

13 (ii) An assessment of the current capacity, unmet needs, and  
14 current service delivery models to provide foundational public health  
15 services;

16 (iii) Statewide models for shared services and a plan for further  
17 implementation of shared services;

18 (iv) A comprehensive accountability structure including  
19 appropriate performance measures;

20 (v) The cost of providing foundational public health services  
21 statewide including the cost of improved service delivery models  
22 identified in (a)(iii) of this subsection (2);

23 (vi) A funding allocation model to ensure foundational public  
24 health services are provided across the state; and

25 (vii) Recommended schedules for periodic updates to the  
26 definitions and cost estimates, evaluation of the effectiveness of  
27 the governmental public health system, assessment of the degree to  
28 which the governmental public health system is providing foundational  
29 public health services, and reporting progress made by the state and  
30 each local health jurisdiction toward improving health outcomes.

31 (b) The department shall develop the governmental public health  
32 improvement plan in consultation with the expertise of varied  
33 interests, including but not limited to:

34 (i) Local health jurisdictions and the state board of health;

35 (ii) The Washington state association of local public health  
36 officials;

37 (iii) Individuals or entities with expertise in the development  
38 of performance measures, accountability, and systems management, and  
39 experts in the development of evidence-based public health or medical  
40 practice guidelines; and

1 (iv) Individuals or entities who will be impacted by performance  
2 measures developed under this section and have relevant expertise,  
3 such as community clinics, public health nurses, large employers, the  
4 sovereign tribal nations of Washington, other state agencies, health  
5 services providers, and citizens concerned about public health.

6 (c) The performance measures must be developed to ensure  
7 foundational public health services are available statewide and to  
8 meet the goals and outcomes identified in RCW 43.70.512. The measures  
9 must:

10 (i) Reflect best scientific evidence, national standards of  
11 performance, and innovations in governmental public health;

12 (ii) Establish the levels of performance needed to achieve core  
13 public health services delivery for each local health jurisdiction  
14 and the department; and

15 (iii) Describe the resources necessary to meet the performance  
16 levels.

17 NEW SECTION. Sec. 5. RCW 43.70.520 (Public health services  
18 improvement plan—Performance measures) and 2007 c 259 s 64 & 1993 c  
19 492 s 467 are each repealed.

20 NEW SECTION. Sec. 6. If specific funding for the purposes of  
21 this act, referencing this act by bill or chapter number, is not  
22 provided by June 30, 2017, in the omnibus appropriations act, this  
23 act is null and void.

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