

CERTIFICATION OF ENROLLMENT  
**SECOND SUBSTITUTE HOUSE BILL 1497**

Chapter 14, Laws of 2019

66th Legislature  
2019 Regular Session

FOUNDATIONAL PUBLIC HEALTH SERVICES

EFFECTIVE DATE: July 28, 2019

Passed by the House March 5, 2019  
Yeas 94 Nays 4

FRANK CHOPP

**Speaker of the House of Representatives**

Passed by the Senate March 27, 2019  
Yeas 44 Nays 1

CYRUS HABIB

**President of the Senate**

Approved April 3, 2019 3:20 PM

JAY INSLEE

**Governor of the State of Washington**

CERTIFICATE

I, Bernard Dean, Chief Clerk of the House of Representatives of the State of Washington, do hereby certify that the attached is **SECOND SUBSTITUTE HOUSE BILL 1497** as passed by House of Representatives and the Senate on the dates hereon set forth.

BERNARD DEAN

**Chief Clerk**

FILED

April 4, 2019

**Secretary of State  
State of Washington**

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SECOND SUBSTITUTE HOUSE BILL 1497

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Passed Legislature - 2019 Regular Session

State of Washington

66th Legislature

2019 Regular Session

**By** House 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)

READ FIRST TIME 03/01/19.

1 AN ACT Relating to foundational public health services; amending  
2 RCW 43.70.512; adding a new section to chapter 43.70 RCW; and  
3 repealing RCW 43.70.514, 43.70.516, 43.70.520, 43.70.522, and  
4 43.70.580.

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

6 **Sec. 1.** RCW 43.70.512 and 2007 c 259 s 60 are each amended to  
7 read as follows:

8 (1) Protecting the public's health across the state is a  
9 fundamental responsibility of the state(~~(. With any new state funding~~  
10 ~~of the public health system as appropriated for the purposes of~~  
11 ~~sections 60 through 65 of this act, the state expects that measurable~~  
12 ~~benefits will be realized to the health of the residents of~~  
13 ~~Washington. A transparent process that shows the impact of increased~~  
14 ~~public health spending on performance measures related to the health~~  
15 ~~outcomes in subsection (2) of this section is of great value to the~~  
16 ~~state and its residents. In addition, a well-funded public health~~  
17 ~~system is expected to become a more integral part of the state's~~  
18 ~~emergency preparedness system.~~

19 ~~(2) Subject to the availability of amounts appropriated for the~~  
20 ~~purposes of sections 60 through 65 of this act, distributions to~~  
21 ~~local health jurisdictions shall deliver the following outcomes:~~

- 1       ~~(a) Create a disease response system capable of responding at all~~  
2 ~~times;~~  
3       ~~(b) Stop the increase in, and reduce, sexually transmitted~~  
4 ~~disease rates;~~  
5       ~~(c) Reduce vaccine preventable diseases;~~  
6       ~~(d) Build capacity to quickly contain disease outbreaks;~~  
7       ~~(e) Decrease childhood and adult obesity and types I and II~~  
8 ~~diabetes rates, and resulting kidney failure and dialysis;~~  
9       ~~(f) Increase childhood immunization rates;~~  
10       ~~(g) Improve birth outcomes and decrease child abuse;~~  
11       ~~(h) Reduce animal-to-human disease rates; and~~  
12       ~~(i) Monitor and protect drinking water across jurisdictional~~  
13 ~~boundaries.~~

14       ~~(3) Benchmarks for these outcomes shall be drawn from the~~  
15 ~~national healthy people 2010 goals, other reliable data sets, and any~~  
16 ~~subsequent national goals)) and is accomplished through the~~  
17 ~~governmental public health system. This system is comprised of the~~  
18 ~~state department of health, state board of health, local health~~  
19 ~~jurisdictions, sovereign tribal nations, and Indian health programs.~~

20       (2) (a) The legislature intends to define a limited statewide set  
21 of core public health services, called foundational public health  
22 services, which the governmental public health system is responsible  
23 for providing in a consistent and uniform way in every community in  
24 Washington. These services are comprised of foundational programs and  
25 cross-cutting capabilities.

26       (b) These governmental public health services should be delivered  
27 in ways that maximize the efficiency and effectiveness of the overall  
28 system, make best use of the public health workforce and evolving  
29 technology, and address health equity.

30       (c) Funding for the governmental public health system must be  
31 restructured to support foundational public health services. In  
32 restructuring, there must be efforts to both reinforce current  
33 governmental public health system capacity and implement service  
34 delivery models allowing for system stabilization and transformation.

35       NEW SECTION. Sec. 2. A new section is added to chapter 43.70  
36 RCW to read as follows:

37       (1) With any state funding of foundational public health  
38 services, the state expects that measurable benefits will be realized  
39 to the health of communities in Washington as a result of the

1 improved capacity of the governmental public health system. Close  
2 coordination and sharing of services are integral to increasing  
3 system capacity.

4 (2) (a) Funding for foundational public health services shall be  
5 appropriated to the office of financial management. The office of  
6 financial management may only allocate funding to the department if  
7 the department, after consultation with federally recognized Indian  
8 tribes pursuant to chapter 43.376 RCW, jointly certifies with a state  
9 association representing local health jurisdictions and the state  
10 board of health, to the office of financial management that they are  
11 in agreement on the distribution and uses of state foundational  
12 public health services funding across the public health system.

13 (b) If joint certification is provided, the department shall  
14 distribute foundational public health services funding according to  
15 the agreed-upon distribution and uses. If joint certification is not  
16 provided, appropriations for this purpose shall lapse.

17 (3) By October 1, 2020, the department, in partnership with  
18 sovereign tribal nations, local health jurisdictions, and the state  
19 board of health, shall report on:

20 (a) Service delivery models, and a plan for further  
21 implementation of successful models;

22 (b) Changes in capacity of the governmental public health system;  
23 and

24 (c) Progress made to improve health outcomes.

25 (4) For purposes of this section:

26 (a) "Foundational public health services" means a limited  
27 statewide set of defined public health services within the following  
28 areas:

29 (i) Control of communicable diseases and other notifiable  
30 conditions;

31 (ii) Chronic disease and injury prevention;

32 (iii) Environmental public health;

33 (iv) Maternal, child, and family health;

34 (v) Access to and linkage with medical, oral, and behavioral  
35 health services;

36 (vi) Vital records; and

37 (vii) Cross-cutting capabilities, including:

38 (A) Assessing the health of populations;

39 (B) Public health emergency planning;

40 (C) Communications;

- 1 (D) Policy development and support;  
2 (E) Community partnership development; and  
3 (F) Business competencies.

4 (b) "Governmental public health system" means the state  
5 department of health, state board of health, local health  
6 jurisdictions, sovereign tribal nations, and Indian health programs  
7 located within Washington.

8 (c) "Indian health programs" means tribally operated health  
9 programs, urban Indian health programs, tribal epidemiology centers,  
10 the American Indian health commission for Washington state, and the  
11 Northwest Portland area Indian health board.

12 (d) "Local health jurisdictions" means a public health agency  
13 organized under chapter 70.05, 70.08, or 70.46 RCW.

14 (e) "Service delivery models" means a systematic sharing of  
15 resources and function among state and local governmental public  
16 health entities, sovereign tribal nations, and Indian health programs  
17 to increase capacity and improve efficiency and effectiveness.

18 NEW SECTION. **Sec. 3.** The following acts or parts of acts are  
19 each repealed:

20 (1) RCW 43.70.514 (Public health—Definitions) and 2007 c 259 s  
21 61;

22 (2) RCW 43.70.516 (Public health—Department's duties) and 2007 c  
23 259 s 62;

24 (3) RCW 43.70.520 (Public health services improvement plan—  
25 Performance measures) and 2007 c 259 s 64 & 1993 c 492 s 467;

26 (4) RCW 43.70.522 (Public health performance measures—Assessing  
27 the use of funds—Secretary's duties) and 2007 c 259 s 65; and

28 (5) RCW 43.70.580 (Public health improvement plan—Funds—  
29 Performance-based contracts—Rules—Evaluation and report) and 1995 c  
30 43 s 3.

Passed by the House March 5, 2019.  
Passed by the Senate March 27, 2019.  
Approved by the Governor April 3, 2019.  
Filed in Office of Secretary of State April 4, 2019.

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