
Local Government Committee

HB 1946

Brief Description: Clarifying tribal membership on local boards of health.

Sponsors: Representatives Hill, Lekanoff, Reed, Parshley, Pollet, Obras, Nance, Ormsby and Macri.

<p style="text-align: center;">Brief Summary of Bill</p> <ul style="list-style-type: none">• Modifies how tribal representatives are selected for local health boards and health districts.
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Hearing Date: 2/18/25

Staff: Michelle Rusk (786-7153).

Background:

Local Health Boards.

Local boards of health (boards) are county-level organizations with a wide remit over matters of public health. Boards enforce state public health statutes and rules through a local health officer, control and prevent infectious diseases, and prevent, control, or abate public health nuisances.

In Washington, counties may take one of two forms: home rule charter or noncharter. Noncharter counties operate under a commission form of government with a board ranging from three to five commissioners. Home rule charter counties may adopt a form of county government other than the commission form.

The board membership requirements for home rule charter and noncharter counties are similar in that each is comprised of three parts. First, the board must include county commissioners or representatives from the county legislative authority. Second, members who are not elected

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officials must be selected who represent:

1. health care providers, practitioners, or employees of health care facilities;
2. residents that are consumers of public health; and
3. other community stakeholders.

Third, if the county contains a federally recognized Indian tribe's reservation, trust lands, or usual and accustomed areas, or a charitable organization that serves American Indian or Alaska Native people and provides services within the county, then the board must include a tribal representative selected by the American Indian Health Commission.

The legislative authority or board of county commissioners may, in its discretion, increase by ordinance the size and composition of a board to include additional members, including elected officials from cities and towns, as long as the number of members from the three categories above is equal to the number of elected officials on the board.

Health Districts.

Each county has a board that is coextensive with the county, unless the county has opted to create a health district (district) on its own or in conjunction with one or more other counties. A single-county or multi-county district operates in a similar manner and has a similar governing structure to a board.

Summary of Bill:

The manner in which a tribal representative is selected for a board or district is modified. When any federally recognized tribe's reservation, trust lands, or usual and accustomed areas are within a county, the county board or district must include a tribal representative from each tribe. When any charitable organization serving American Indian and Alaska Native people is providing services within a county, the county board or district must include a representative of each organization. In each instance the board or district must notify the American Indian Health Commission.

Appropriation: None.

Fiscal Note: Requested on February 13, 2025.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.