

FINAL BILL REPORT

ESHB 1946

C 260 L 25
Synopsis as Enacted

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

Sponsors: House Committee on Local Government (originally sponsored by Representatives Hill, Lekanoff, Reed, Parshley, Pollet, Obras, Nance, Ormsby and Macri).

House Committee on Local Government
Senate Committee on Local Government

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.

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 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, the board must include a tribal representative selected by the American Indian Health Commission if a federally recognized Indian tribe holds reservation, trust lands, or usual and accustomed areas within the county, or a charitable organization registered in Washington serves American Indian or Alaska Native people and provides services within the county.

The legislative authority or board of county commissioners may, in its discretion, increase

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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.

District Health Boards.

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 board of health operates in a similar manner and has a similar governing and membership structure to a local board of health.

Summary:

Modifications are made to tribal representative membership on district and local boards of health (Board). A Board must allow a tribal representative from each of the following, and notify the American Indian Health Commission:

- any federally recognized tribe whose reservation or trust lands are within the county; and
- any Urban Indian Organization recognized by the Indian Health Service, registered as a 501(c)(3) organization in Washington that serves American Indian and Alaska Native people, and is providing services within the county.

The tribal representative must be selected by the tribe or organization. If a tribal representative is added to a Board as provided above, the county commissioners or county legislative authority must modify the membership of the Board to comply with applicable Board membership requirements:

- in compliance with timelines established by the State Board of Health in rule, once the rules go into effect; and
- until the rules go into effect, within 60 days of receipt of notice of the selection of a tribal representative.

The State Board of Health must adopt rules establishing timelines for modifying the membership of a Board as required by state statute. The rules must go into effect no later than 1 year after the effective date of the bill.

Votes on Final Passage:

House	61	36	
Senate	40	9	(Senate amended)
House	59	38	(House concurred)

Effective: July 27, 2025