

WASHINGTON STATE BOARD OF HEALTH

Final Minutes of the State Board of Health

April 14, 2021

Electronic meeting via GoToWebinar

State Board of Health members present:

Thomas Pendergrass, MD, MSPH Vice-Chair
Fran Bessermin
Umair A. Shah, MD, MPH
Stephen Kutz, BSN, MPH
Bob Lutz, MD, MPH
Vazaskia Crockrell
Elisabeth L. Crawford

State Board of Health members absent:

Keith Grellner, RS, Chair
Temple Lentz, MOL

State Board of Health staff present:

Michelle Davis, Executive Director
Melanie Hisaw, Executive Assistant
Kelie Kahler, Communication Manager
Samantha Pskowski, Health Policy Advisor
Kaitlyn Donahoe, Health Policy Advisor
Cait Lang-Perez, Health Policy Analyst

Guests and other participants:

Kelly Cooper, Department of Health
Michele Roberts, Department of Health

Thomas Pendergrass, Vice Chair, called the public meeting to order at 9:30 a.m. and read from a prepared statement (on file). He then detailed operating procedure and ground rules for conducting a virtual meeting, and asked board members to introduce themselves.

1. APPROVAL OF AGENDA

Motion: Approve April 14, 2021 agenda

Motion/Second: Member Crockrell/Member Bessermin. Approved unanimously

2. ADOPTION OF MARCH 10, 2021 MEETING MINUTES

Motion: Approve the March 10, 2021 minutes, with a correction of Agenda Item 2 Title, correcting the date, to read: ADOPTION OF JANUARY 13, 2021 MEETING MINUTES.

Motion/Second: Member Crawford/Member Crockrell. Approved unanimously

3. BOARD ANNOUNCEMENTS AND OTHER BUSINESS

Michelle Davis, Executive Director, greeted the Board and directed Board members to materials in their packets. Ms. Davis announced that Governor Inslee had appointed Temple Lentz to the Board and indicated that Member Lentz's biography is in the meeting materials.

Ms. Davis said Anzhane Slaughter joined Board staff and supports the Social Equity in Cannabis Task Force, replacing Elise Rasmussen who accepted a position at the DOH.

Ms. Davis updated the Board on Health Impact Reviews (HIR). She said the team completed their final HIR for legislative session last week. She said that topics from this legislative session include health coverage, lunch co-pays, and taxation (including sweetened beverages and carbon pollution). She reminded Board members that the HIRs are available on the Board's website, and indicated that two HIR bills have passed the legislature – post-partum coverage and lunch co-pays, and that staff submitted a memo to the governor sharing those findings related to HIR. She said the next HIR request, post-session, was related to solitary confinement.

Ms. Davis announced the third emergency rule for COVID-19 reporting was filed with the Code Reviser on March 26, 2021. She said the Notifiable Conditions rule team was working to finalize materials regarding the order of adoption for the permanent rules adopted by the Board in March and noted that staff hope to file the rule by the end of the month.

Ms. Davis announced that the Board had received a significant number of comments related to vaccine passports and clarified that this item was not on the Board's agenda.

Ms. Davis indicated that the investigator continues her work reviewing records received through multiple public records requests. She noted that the investigator had received the final installment of records from city of Spokane yesterday. Once the investigator completes her review the records and any other interviews, she will present her findings for the Board's consideration.

Vice Chair Pendergrass asked if the number of HIRs this year is a record. Ms. Davis replied that it was not, and explained that during legislative session, the team is constrained to a 10-day completion deadline. She said this year's HIR's have been quite complicated. She said the team will update the Board in late summer regarding HIRs completed during the 2021 Fiscal year.

4. DEPARTMENT OF HEALTH NOVEL CORONAVIRUS (COVID-19) UPDATE AND LEGISLATIVE, BUDGET & POLICY UPDATE

Umar A. Shah, Secretary of Health and Board Member shared the Secretary's Priorities and the COVID-19 and Health Transformation (see presentation on file). The presentation included the three V's of Public Health; Visibility, Value and Validation. It also included equity and engagement work, personnel changes with Liz Perez joining the leadership team from Harris County Public Health, and the Roadmap for Recovery.

Michele Roberts, Acting Assistant Secretary, Prevention and Community Health, provided additional information on the vaccine allocation projections as of April 11, 2021

(386,810 doses of vaccines from Pfizer, Moderna, and Janssen). She reported that effective April 13, there is a pause on the Janssen (J&J) vaccine, which was ordered out of an overabundance of caution for rare, serious side effects. She said the side effect symptoms are extremely rare, about 6 cases out of 7 million doses. She said the Advisory Committee on Immunization Practices and federal government were looking closely at the side effects and noted that J&J makes up about 6 percent of Washington's vaccine supply.

Kelly Cooper, Director of Policy & Legislative Relations, Department of Health, updated the Board on the 2021 legislative session, and highlighted several bills of interest (see presentation on file).

Vice Chair Pendergrass talked about the public perception of association and causation. He asked what the data mean in a causative way. Member Shah described how the VAERS system works and noted that finding these cases is like finding a needle in a haystack. He said that the federal government took quick action to notify and educate providers. He said his tagline has been: Don't hesitate, vaccinate.

Vazaskia Crockrell, Board Member raised a question regarding the 3 sites moving to phase 3, especially Pierce County. She asked about the demographics of cases and, specifically whether it shows an increase in rates in black and brown communities.

Member Shah said the Department was working with Pierce County, and acknowledged the work that Dr. Chen, Director of the Health District, was doing in response to the COVID-19 outbreak. Member Shah wished everyone a happy National Public Health Week, and discussed vaccine allocation challenges, given the number of different streams of vaccine coming to the state through the federal government (such as the Department of Defense, Veteran's Affairs, Pharmacies, and community health clinics). He noted that there are many moving pieces regarding ethnicity, age, and other tracking. He talked about food deserts, now he's likening this to vaccine deserts and working to increase access, not just talking the talk, but implementing at the ground level. Ms. Roberts said they don't know the data yet; CDC has the more detailed information and they are looking forward to the analysis from the federal government.

Stephen Kutz, Board Member, mentioned 16 & 17-year old's and asked if the vaccine was limited to Pfizer. Member Shah said starting April 15 in Washington, those 16 and older will be eligible to receive COVID vaccines. He said that supply is an issue. He emphasized the importance of focusing on risk factors.

Ms. Roberts said the Department was working to update the vaccine finder and types of vaccines.

Elisabeth Crawford, Board member, asked about the President's timeline and the allocation of vaccines. Member Shah said commented on assuring there's vaccine access and said they were being told there will be more vaccine distribution. He said the trillion-dollar question is when and then estimated early May. He said issues arise such as production issues, which have ripple effects. He said it's a complicated process. Member Crawford asked Ms. Roberts about the state efforts to increase vaccinations in vulnerable populations. Ms. Roberts said the most critical things are partnerships and

working with community-based organizations for COVID outreach and education, which is critical for implementation. She said making money available, helping with scheduling with culturally and linguistically resources, increased access to call centers for those not able to schedule on the internet, more events, and weekend hour availabilities, and working with healthcare and community providers, especially those in our BIPOC communities and those most at risk.

Bob Lutz, Board Member said he had a question for Kelly Cooper and planned to reach out to her separately on due to time constraint.

Vice Chair Pendergrass thanked the leadership at DOH for their time, hard work and efforts to keep our state safe.

The Board took a break at 10:53 a.m. and reconvened at 11:05 a.m.

5. PUBLIC COMMENT

Vice Chair Pendergrass opened public comment and read from a prepared statement on file.

Ashley Arthur, Illumina, manufacturer of non-invasive prenatal screening technology, said she has concerns with pre and post procedure genetic counseling. She said she believes this would restrict access to a lot of patients. She said ACOG discusses informed consent, but counseling is more restrictive, and more restrictive than what any other insurer is requiring. She said she thought Trish Brown would like to comment, but Ms. Brown could not share due to technical difficulties.

Hannah Baer, coalition for access to prenatal screening, said the WA Health Tech assessment found evidence to safer tests in 2020. She said many other states looked at their Medicaid work. She talked about level A recommendation based on good scientific evidence about screening. She talked about draft rule and the restrictions for counseling and against the restrictions. She talked about expanding coverage to align with ACOG rules.

Xavier Figueroa, research scientist in WA, speaking as private citizen, commented on emergency use trials. He said he believes we are seeing adverse effects 10-20% higher shows we should raise alarm bells at DOH. He said he believes he has yet to hear of any concerns about the historically known effects and said he believes it is causing more harm than good by lock down procedures and push for vaccinations. He said he hopes DOH takes his comments to heart.

Angelina Jackson, local resident of Pacific County, small business owner, and works with local school district. She said she agreed with Mr. Figueroa. She asked what board members are doing to protect citizens regarding experimental vaccines. She said she believes through research and statistical information to have a vaccine made in 9 months gives her a lot of caution. She said she's pregnant and concerned.

Susie Olson Corgan said she listened to J&J concerns on the 239 reports given to VAERS. She said she believes most are Pfizer and Moderna far more than the J&J vaccine. She asked what the Board is doing for transparency to public. She said she

heard about J&J on 4/12 and she said she is hoping DOH will provide more transparency and clear communication and that it would make it much easier to trust public health. She said she is working with minority populations and this is a concern. (She said there is no question box in her window on the GTW platform).

6. BRIEFING—PRENATAL TESTS – CONGENITAL AND HERITABLE DISORDERS, CHAPTER 246-680 WAC

Bob Lutz, Board Member, introduced this rule update and gave a brief background (see materials on file). He said the Board last updated the rule in 2003. Since then there have been many advances in science for prenatal testing. The Board filed a CR-101 in 2018. The CR-102 was filed in December 2020. Samantha Pskowski, Board Staff, provided a brief background on the Board's authority to establish standards for screening and diagnostic procedures for prenatal diagnosis of congenital disorders of the fetus. She said the rule was last updated in 2003, and since then significant advances have been made in medical technology in the prenatal testing arena. Ms. Pskowski provided a timeline of events in this rulemaking beginning with the filing of the CR-101, Preproposal Statement of Inquiry in November 2018 and culminating in the most recent informal comment period in March 2021. Ms. Pskowski said the rules hearing was held at the Board's January 2021 meeting and she summarized the comments the Board received. A description of the edits made to a working draft was provided, including changes to criteria for cytogenomic microarray analysis and cell-free DNA testing, gender inclusive language, and clarification of tests requiring pre and post procedure genetic counseling. Ms. Pskowski directed Board members to a summary of comments received on the working draft and discussed the comments and provided staff recommendation for responding to the comments.

Member Crockrell had no questions but thanked staff for the good work. Member Lutz commended Ms. Pskowski and team. He said it's a complicated and technical rule and this demonstrates a good process with formal and informal comments. He thanked everyone for their input. Vice Chair Pendergrass agreed and said that this topic will be revisited at the Board's June meeting.

7. LEGISLATIVE SESSION UPDATE

Michelle Davis, Executive Director, gave a legislative update. She thanked Ms. Cooper for her earlier update. She said the 2021 regular session will close on April 25 and the last cutoff by opposite house was Sunday, April 11, 2021.

Ms. Davis provided a list of bills of interest for the Board, including HB 1139, related to lead testing in schools, and commented that the capital budget includes funds for lead remediation. She also reported on HB 1152, Comprehensive Health Districts, a Governor request bill. She described the public health advisory board, noting its size and membership. She said the Board would be staffed by DOH. She said the bill also adds non-elected officials to local boards of health and tasked the Board with rulemaking. Ms. Davis noted the Board may be interested in bills related to statewide pandemic response, vapor products taxation, and implementation of the environmental justice task force recommendations.

Ms. Davis identified bills of interest that failed to pass and commented that they would return in the next legislative session. She said she would provide a final report at the end of session.

Ms. Cooper commented on the unusual nature of session and watching floor sessions virtually. She said session was amazingly productive and indicated that they would watch the budget closely.

Member Lutz asked Ms. Cooper the significant difference between the House and Senate budgets. Ms. Cooper said she was hopeful the budget is closer to the Senate version and that the most important idea is that of ongoing funding to build sustainable programs to address shortfalls and gaps.

Member Kutz thinks longer term plan to put money in public health is to work together to come up with a plan for longer term funding. Ms. Cooper concurred and said both the House and Senate has used the general fund for funding source, which has its limitations to the fiscal year.

Ms. Davis reminded the Board of the long-term discussions of the FPHS Steering Committee regarding the meaningful work of public health and seeking opportunities and planning a fully funded system.

Vice Chair Pendergrass thanked them.

8. BOARD MEMBER COMMENTS

Vice Chair Pendergrass called for comments.

Member Crockrell said this was a great meeting. She thanked Dr. Shah and team for updates and responding to her inquiry on racial and ethnic disparities, specifically in Pierce County.

Member Bessermin agreed and echoed Member Crockrell's comments.

Vice Chair Pendergrass said one of the challenges of FPHS is that infectious disease is now dominating the conversation. He said we're talking more about it than environmental health and there are many challenges in environmental health. He said he hopes we will learn from the COVID pandemic and what we've learned from previous pandemics. He talked about diseases in Europe, Middle East, and 1917 WWI and the spread of influenza through several peaks and valleys until 1919, however we're still dealing with it today. He said that vaccine may benefit in all the studies we've done. He said a valid concern of any vaccine when it is flowing for years is to ask about the adverse effects. He said the Vaccine Adverse Event Reporting System (VAERS) is a retrospective system of gathering data. He said V-Safe is a public reporting system for folks to report their vaccine experience. He said it's important data and most people are reporting minor reactions. He said it may take 20 or 30 years to gather data, but this will help. He said please demonstrate persistence to get the vaccination to protect you from COVID-19. He said we still have lots of work to do around schools, airflow, and safety.

He said COVID-19 is different than influenza. He said you can go to the store, school, work, restaurants because public health has been there before you.

ADJOURNMENT

Thomas Pendergrass, Vice Chair, adjourned the meeting at 12:11 p.m.

WASHINGTON STATE BOARD OF HEALTH

Thomas Pendergrass, Vice Chair

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