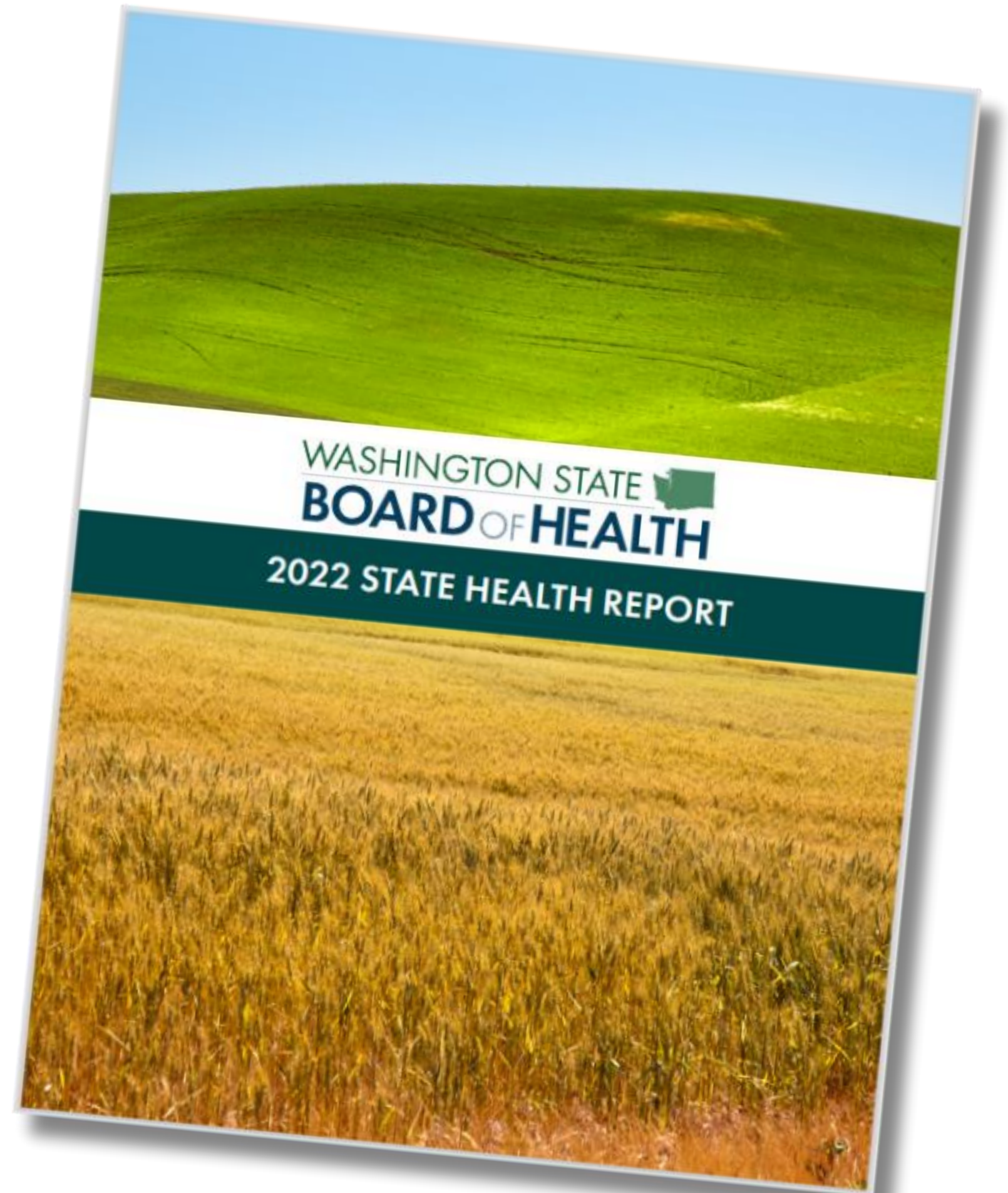


# **Updates on 2022 State Health Report Recommendations**



# WASHINGTON STATE BOARD OF HEALTH

- Improving Public Health's Response to Health Inequities Through Data Reform
- Removing Barriers to Health Care Insurance and Care Coverage
- Improving Access to Culturally and Linguistically Appropriate Health Services
- Making School Environments Healthy and Safe
- Decreasing Youth Use of Tobacco, Nicotine, and Vapor Products
- Strengthening Washington's Public Health System Through Continued Investments



# Improving Public Health's Response to Health Inequities Through Data Reform

- Provide adequate funding to the Office of Equity to lead a community-centered process aligned with Washington's pro-equity and anti-racism (PEAR) plan and playbook to develop enterprise-wide standards for the collection, analysis, storage, and protection of disaggregated demographic data, starting with race and ethnicity data.

**Status:** Over the last biennium, the Legislature did not provide the Office of Equity funding for this purpose.

- Direct and provide funding to state agencies to enhance the interoperability of data systems to facilitate the collection, analysis, storage, and protection of uniform, disaggregated demographic data.

**Status:** Many state agencies are engaged in efforts related to data disaggregation. The Legislature has provided some minor investments to enhance the interoperability of some data systems, but more investment is needed.

- Actively monitor and participate in opportunities to advocate for improvements in federal standards for interoperability and disaggregated demographic data collection.

**Status:** In April 2023, the Board, Council, and other state agencies submitted comments on the OMB's Initial Proposals for Updating Race and Ethnicity Standards. OMB Released the revised SPD 15 in March 2024 (OMB-2023-001).

# Removing Barriers to Health Care Insurance and Care Coverage

Expand access to health insurance for income-eligible individuals at least 19 years of age, regardless of immigration status.

- **Status:** Over the past biennium, the Legislature provided funding to expand access to Apple Health and Exchange Plans for people who are income-eligible and at least 19 years of age, regardless of immigration status. Enrollment for the new Apple Health program will start in July 2024. Due to the available funding levels, the program will have a capped enrollment of 13,000 individuals. More funding is needed.

Employ strategies identified by the Tubman Center for Health and Freedom to ensure access to the type of healthcare services that members of marginalized communities most rely on, including but not limited to:

- i. Requiring insurers to cover the cost of health care utilized by Washington communities, including CAM.
  - ii. Employ health care providers from the communities they are serving.
  - iii. Incentivize providers who use the health care that communities who have been historically or are currently marginalized prefer to use.
  - iv. Remove systemic barriers to care, such as cost and insufficient provider networks, so that communities can access timely, culturally-based care.
- **Status:** The Legislature has made some progress on these recommendations. Examples include legislation banning ground ambulance balance billing, increasing access to quality telehealth services, expanding income eligibility for Apple Health pregnancy/postpartum coverage, and directing agencies to study approaches to improving healthcare affordability. Funding was also provided for reimbursing services provided by doulas for Apple Health clients, continuing community health worker grant programs, and increasing the number of American Indian and Alaska Native physicians practicing in Washington.

# Improving Access to Culturally and Linguistically Appropriate Health Services

Expand culturally and linguistically appropriate health care services, including but not limited to prescription information translation and increased access to interpretation services for medical appointments and emergency room visits.

- **Status:** The Legislature didn't pass legislation related to prescription information translation over the past biennium. However, the Pharmacy Commission and the Department of Health initiated rulemaking in June 2023 to consider amendments to WAC 246-945-015 and WAC 246-945-417 and possibly add new sections to chapter 246-945 WAC about prescription drug label accessibility. This work is ongoing. Several bills related to interpreters and translators were introduced over the biennium. One bill that passed, SB 5304, required DSHS to convene a language access workgroup to study and recommend language interpreter certification policies and programs to the Legislature. The workgroup's report was sent to the Legislature in December 2023.

Provide funding to establish a task force made up of public health, health care, community-based organizations, and appropriate state agencies to conduct an assessment and develop a baseline report regarding the provision of culturally and linguistically appropriate health care services for communities served, as well as recommendations for improvement as applicable.

- **Status:** The Legislature has not provided funding for this purpose.

# Making School Environments Healthy and Safe

Remove the budget proviso that prevents revision and implementation of the Board's school environmental health and safety rules.

- **Status:** The budget proviso suspending the Board's rules was not removed. However, a new proviso that directs the Board to initiate a School Rule Review project with key partners was created. The Board will receive this funding starting July 2024.

Require the Department of Health, local health jurisdictions, OSPI, and the Board to collaborate to conduct a school environmental health and safety review and needs assessment to inform updates to the K-12 School Health and Safety Guide and future rulemaking.

- **Status:** The Board, Department, local health jurisdictions, OSPI and other partners will conduct a school environmental health and safety rule review as part of the 2024 School Rule Review budget proviso (see ESSB 5950, Section 222, subsection 159, page 492).

Prioritize funding for K-12 school HVAC system maintenance and necessary upgrades to minimize transmission of contaminants and communicable diseases.

- **Status:** The Legislature made a large investment (~\$40 million) to OSPI to improve classroom air quality by allowing school districts to repair and replace HVAC and air delivery systems. Note that this funding (~\$30 million) was possible because of the Climate Commitment Act (CCA). If the CCA is repealed on the ballot in the November 2024 election, funding for this work will lapse by the end of the year.

Actively monitor and participate in opportunities to advocate for federal indoor air quality standards in the built environment.

- **Status:** The Board is unaware of activities completed over the past biennium related to this recommendation.

# Decreasing Youth Use of Tobacco, Nicotine, and Vapor Products

Prohibit the sale of all flavored nicotine and tobacco products to the public, including vapor products, to reduce the appeal and use of these products by youth and young adults.

- **Status:** While legislation prohibiting and regulating the sale of flavored vaping products was introduced over the last biennium, the Legislature did not take action.

# Strengthening Washington's Public Health System Through Continued Investments

Prioritize continued and expanded foundational public health investments in the 2023-2025 biennium as well as future biennia to ensure Washington's governmental public health system can continue to: 1) assess and control communicable diseases and enhance environmental public health services and 2) improve services over the life course (e.g., chronic disease, injury prevention, maternal and child health) and improve business competencies (e.g., technology, leadership, facilities, and operations).

- **Status:** During the 2023 Legislative session, the Legislature invested an additional \$50 million for Fiscal Years 24 and 25 for Foundational Public Health Services (\$100 million total).



# ACCESSIBILITY AND THE AMERICANS WITH DISABILITIES ACT (ADA)

- The Washington State Board of Health (Board) is committed to providing information and services that are accessible to people with disabilities. We provide reasonable accommodations, and strive to make all our meetings, programs, and activities accessible to all persons, regardless of ability, in accordance with all relevant state and federal laws.
- Our agency, website, and online services follow the Americans with Disabilities (ADA) standards, Section 508 of the Rehabilitation Act of 1973, Washington State Policy 188, and Web Content Accessibility Guidelines (WCAG) 2.0, level AA. We regularly monitor for compliance and invite our users to submit a request if they need additional assistance or would like to notify us of issues to improve accessibility.
- We are committed to providing access to all individuals visiting our agency website, including persons with disabilities. If you cannot access content on our website because of a disability, have questions about content accessibility or would like to report problems accessing information on our website, please call (360) 236-4110 or email [wsboh@sboh.wa.gov](mailto:wsboh@sboh.wa.gov) and describe the following details in your message:
  - The nature of the accessibility needs
  - The URL (web address) of the content you would like to access
  - Your contact information

We will make every effort to provide you the information requested and correct any compliance issues on our website.