

LOCAL BOARDS OF HEALTH - TRIBAL MEMBERSHIP (ESHB 1946)

Engrossed Substitute House Bill (ESHB) 1946 passed during the 2025 legislative session. This law is effective July 27, 2025. **Local boards of health will be required to follow this law until the Washington State Board of Health (Board) completes rulemaking.** Rulemaking will establish timelines and clarify requirements for Tribal representation on local boards of health (LBOH).

This law:

- Clarifies the requirements for Tribal representation on LBOHs.
- Requires the Board to adopt rules to establish timelines for adjusting LBOH membership to keep a balanced mix of elected and non-elected members when Tribal representatives are added.
- Expands representation to ensure Tribes and Urban Indian organizations recognized by the Indian Health Service and registered as a 501(c)(3) within a jurisdiction, choose their representative for LBOHs or health district boards.
- Shifts the appointment authority from the American Indian Health Commission (AIHC) to the Tribes and Urban Indian organizations, respecting Tribal sovereignty and self-determination.
- Requires that LBOH notify the AIHC when a Tribe or Urban Indian organization appoints a Tribal representative. Previously, the law required the AIHC to select Tribal representatives for LBOHs, where applicable.

The State Board of Health has 12 months to complete the update of the local board of health composition rules (chapter 246-90 WAC) to reflect the changes required by ESHB 1946. **Until the new rules are effective, local boards of health must allow Tribal representatives selected by Tribes or Urban Indian organizations a seat on the local board of health within 60 days. The law also requires local boards of health to notify the American Indian Health Commission of the appointment.** Under RCW 43.20.300, the Board has the authority to set rules for appointing non-elected members, including Tribal representatives, to LBOHs.