

## **Health Impact Review Request Form**

Date of request:	05 /16 /2023					
Requester:	Senator Yasmin Trudeau					
-	Note: Health impact reviews may only be requested by the Governor or a legislator.					
Staff Contact:	Name: Justine Jadallah					
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	r none.	300-780	0-7032		Justine.Jadanan@ieg.wa.gov	
What is the subject of	the Heal	th Impa	ct Review?			
⊠ Bill	·		ESHB 2114	Title:	Improving housing stability for tenants subject to the residential landlord-tenant act and the manufactured/mobile home landlord-tenant act by limiting rent and fee increases, requiring notice of rent and fee increases, limiting fees and deposits, establishing a landlord resource center and associated services, authorizing tenant lease termination, creating parity	
				_	between lease types, and providing for attorney general enforcement.	
☐ Bill Draft	Draft Number:					
☐ Decision Package	If possible, please attach a copy of the relevant portion/aspect of what you are					
<ul><li>☐ Budget Proposal</li><li>☐ Other:</li></ul>	requesting to be reviewed.					
Should the Health Imp	oot Boyis	ow analy	rza tha antira r	ronocal o	r only a partian?	
	Jact Revie	ew allaly	/ze the entire p	•	• •	
☑ Entire ☐ Portion If only a portion, please describe what portion(s) the review should analyze.						
ii only a portion, please	describe	wriat po	rtion(s) the revi	ew sriouid a	anaryze.	
Requested completion	n date:	In	terim 2024			
If requesting less than a	a ten-day i	turnarou	nd during sessi		than a 60-day turnaround during the interim, review completed in time for a committee	

Please consider completing the optional section on the back of this form, which will give the Board a sense of why this review has been requested.

**Washington State Board of Health** 

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## ~ Optional ~

Please consider completing this optional section, which will give the Board a sense of why this review has been requested.

**NOTE:** When conducting a health impact review, the Washington State Board of Health will consider various ways that a proposal might exacerbate or ameliorate health disparities. Completing this section will give the Board a head start by helping it understand the reasons why a review is being requested.

Briefly describe how you think the proposal might impact health disparities and whether you believe the					
impact will be in a po	sitive or negative direction.				
Are there specific orgreview if time allows?	ganizations or community groups you would like the Board to contact as part of this				

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