

CERTIFICATION OF ENROLLMENT  
**SECOND SUBSTITUTE SENATE BILL 6197**

59th Legislature  
2006 Regular Session

Passed by the Senate March 7, 2006  
YEAS 38 NAYS 10

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**President of the Senate**

Passed by the House March 2, 2006  
YEAS 58 NAYS 40

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**Speaker of the House of Representatives**

Approved

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**Governor of the State of Washington**

CERTIFICATE

I, Thomas Hoemann, Secretary of the Senate of the State of Washington, do hereby certify that the attached is **SECOND SUBSTITUTE SENATE BILL 6197** as passed by the Senate and the House of Representatives on the dates hereon set forth.

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**Secretary**

FILED

**Secretary of State  
State of Washington**

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**SECOND SUBSTITUTE SENATE BILL 6197**

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AS AMENDED BY THE HOUSE

Passed Legislature - 2006 Regular Session

**State of Washington                      59th Legislature                      2006 Regular Session**

**By** Senate Committee on Ways Means (originally sponsored by Senators Franklin, Regala, Eide, Prentice, Fraser, Brown, Kline, Kohl-Welles and Shin)

READ FIRST TIME 02/7/06.

1            AN ACT Relating to the creation of the governor's interagency  
2            coordinating council on health disparities; amending RCW 43.20.025;  
3            adding new sections to chapter 43.20 RCW; and adding a new section to  
4            chapter 44.28 RCW.

5            BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

6            NEW SECTION.    **Sec. 1.** A new section is added to chapter 43.20 RCW  
7            to read as follows:

8            The legislature finds that women and people of color experience  
9            significant disparities from men and the general population in  
10           education, employment, healthful living conditions, access to health  
11           care, and other social determinants of health. The legislature finds  
12           that these circumstances coupled with lower, slower, and less  
13           culturally appropriate and gender appropriate access to needed medical  
14           care result in higher rates of morbidity and mortality for women and  
15           persons of color than observed in the general population. Health  
16           disparities are defined by the national institute of health as the  
17           differences in incidence, prevalence, mortality, and burden of disease  
18           and other adverse health conditions that exist among specific  
19           population groups in the United States.

1           It is the intent of the Washington state legislature to create the  
2 healthiest state in the nation by striving to eliminate health  
3 disparities in people of color and between men and women. In meeting  
4 the intent of this act, the legislature creates the governor's  
5 interagency coordinating council on health disparities. This council  
6 shall create an action plan and statewide policy to include health  
7 impact reviews that measure and address other social determinants of  
8 health that lead to disparities as well as the contributing factors of  
9 health that can have broad impacts on improving status, health  
10 literacy, physical activity, and nutrition.

11           **Sec. 2.** RCW 43.20.025 and 1989 1st ex.s. c 9 s 208 are each  
12 amended to read as follows:

13           Unless the context clearly requires otherwise, the definitions in  
14 this section apply throughout this chapter.

15           (1) "Commissions" means the Washington state commission on African-  
16 American affairs established in chapter 43.113 RCW, the Washington  
17 state commission on Asian Pacific American affairs established in  
18 chapter 43.117 RCW, the Washington state commission on Hispanic affairs  
19 established in chapter 43.115 RCW, and the governor's office of Indian  
20 affairs.

21           (2) "Consumer representative" means any person who is not an  
22 elected official, who has no fiduciary obligation to a health facility  
23 or other health agency, and who has no material financial interest in  
24 the rendering of health services.

25           (~~(+2)~~) (3) "Council" means the (~~health care access and cost~~  
26 ~~control~~) governor's interagency coordinating council on health  
27 disparities, convened according to this chapter.

28           (~~(+3)~~) (4) "Department" means the department of health.

29           (~~(+4)~~) (5) "Health disparities" means the difference in incidence,  
30 prevalence, mortality, or burden of disease and other adverse health  
31 conditions, including lack of access to proven health care services  
32 that exists between specific population groups in Washington state.

33           (6) "Health impact review" means a review of a legislative or  
34 budgetary proposal completed according to the terms of this chapter  
35 that determines the extent to which the proposal improves or  
36 exacerbates health disparities.

1       (7) "Secretary" means the secretary of health, or the secretary's  
2       designee.

3       (~~(5)~~) (8) "Local health board" means a health board created  
4       pursuant to chapter 70.05, 70.08, or 70.46 RCW.

5       (~~(6)~~) (9) "Local health officer" means the legally qualified  
6       physician appointed as a health officer pursuant to chapter 70.05,  
7       70.08, or 70.46 RCW.

8       (~~(7)~~) (10) "Social determinants of health" means those elements  
9       of social structure most closely shown to affect health and illness,  
10       including at a minimum, early learning, education, socioeconomic  
11       standing, safe housing, gender, incidence of violence, convenient and  
12       affordable access to safe opportunities for physical activity, healthy  
13       diet, and appropriate health care services.

14       (11) "State board" means the state board of health created under  
15       chapter 43.20 RCW.

16       NEW SECTION. Sec. 3. A new section is added to chapter 43.20 RCW  
17       to read as follows:

18       (1) In collaboration with staff whom the office of financial  
19       management may assign, and within funds made expressly available to the  
20       state board for these purposes, the state board shall assist the  
21       governor by convening and providing assistance to the council. The  
22       council shall include one representative from each of the following  
23       groups: Each of the commissions, the state board, the department, the  
24       department of social and health services, the department of community,  
25       trade, and economic development, the health care authority, the  
26       department of agriculture, the department of ecology, the office of the  
27       superintendent of public instruction, the department of early learning,  
28       the work force training and education coordinating board, and two  
29       members of the public who will represent the interests of health care  
30       consumers. The council is a class one group under RCW 43.03.220. The  
31       two public members shall be paid per diem and travel expenses in  
32       accordance with RCW 43.03.050 and 43.03.060. The council shall reflect  
33       diversity in race, ethnicity, and gender. The governor or the  
34       governor's designee shall chair the council.

35       (2) The council shall promote and facilitate communication,  
36       coordination, and collaboration among relevant state agencies and  
37       communities of color, and the private sector and public sector, to

1 address health disparities. The council shall conduct public hearings,  
2 inquiries, studies, or other forms of information gathering to  
3 understand how the actions of state government ameliorate or contribute  
4 to health disparities. All state agencies must cooperate with the  
5 council's efforts.

6 (3) The council with assistance from the state board, shall assess  
7 through public hearings, review of existing data, and other means, and  
8 recommend initiatives for improving the availability of culturally  
9 appropriate health literature and interpretive services within public  
10 and private health-related agencies.

11 (4) In order to assist with its work, the council shall establish  
12 advisory committees to assist in plan development for specific issues  
13 and shall include members of other state agencies and local  
14 communities.

15 (5) The advisory committee shall reflect diversity in race,  
16 ethnicity, and gender.

17 NEW SECTION. **Sec. 4.** A new section is added to chapter 43.20 RCW  
18 to read as follows:

19 The council shall consider in its deliberations and by 2012, create  
20 an action plan for eliminating health disparities. The action plan  
21 must address, but is not limited to, the following diseases,  
22 conditions, and health indicators: Diabetes, asthma, infant mortality,  
23 HIV/AIDS, heart disease, strokes, breast cancer, cervical cancer,  
24 prostate cancer, chronic kidney disease, sudden infant death syndrome  
25 (SIDS), mental health, women's health issues, smoking cessation, oral  
26 disease, and immunization rates of children and senior citizens. The  
27 council shall prioritize the diseases, conditions, and health  
28 indicators according to prevalence and severity of the health  
29 disparity. The council shall address these priorities on an  
30 incremental basis by adding no more than five of the diseases,  
31 conditions, and health indicators to each update or revised version of  
32 the action plan. The action plan shall be updated biannually. The  
33 council shall meet as often as necessary but not less than two times  
34 per calendar year. The council shall report its progress with the  
35 action plan to the governor and the legislature no later than January  
36 15, 2008. A second report shall be presented no later than January 15,  
37 2010, and a third report from the council shall be presented to the

1 governor and the legislature no later than January 15, 2012.  
2 Thereafter, the governor and legislature shall require progress updates  
3 from the council every four years in odd-numbered years. The action  
4 plan shall recognize the need for flexibility.

5 NEW SECTION. **Sec. 5.** A new section is added to chapter 43.20 RCW  
6 to read as follows:

7 The state board shall, to the extent that funds are available  
8 expressly for this purpose, complete health impact reviews, in  
9 collaboration with the council, and with assistance that shall be  
10 provided by any state agency of which the board makes a request.

11 (1) A health impact review may be initiated by a written request  
12 submitted according to forms and procedures proposed by the council and  
13 approved by the state board before December 1, 2006.

14 (2) Any state legislator or the governor may request a review of  
15 any proposal for a state legislative or budgetary change. Upon  
16 receiving a request for a health impact review from the governor or a  
17 member of the legislature during a legislative session, the state board  
18 shall deliver the health impact review to the requesting party in no  
19 more than ten days.

20 (3) The state board may limit the number of health impact reviews  
21 it produces to retain quality while operating within its available  
22 resources.

23 (4) A state agency may decline a request to provide assistance if  
24 complying with the request would not be feasible while operating within  
25 its available resources.

26 (5) Upon delivery of the review to the requesting party, it shall  
27 be a public document, and shall be available on the state board's web  
28 site.

29 (6) The review shall be based on the best available empirical  
30 information and professional assumptions available to the state board  
31 within the time required for completing the review. The review should  
32 consider direct impacts on health disparities as well as changes in the  
33 social determinants of health.

34 (7) The state board and the department shall collaborate to obtain  
35 any federal or private funding that may become available to implement  
36 the state board's duties under this chapter. If the department  
37 receives such funding, the department shall allocate it to the state

1 board and affected agencies to implement its duties under this chapter,  
2 and any state general funds that may have been appropriated but are no  
3 longer needed by the state board shall lapse to the state general fund.

4 NEW SECTION. **Sec. 6.** A new section is added to chapter 43.20 RCW  
5 to read as follows:

6 The state board and the department shall collaborate to obtain any  
7 federal or private funding that may become available to implement the  
8 state board's duties under this chapter. If the department receives  
9 such funding, the department shall allocate it to the state board to  
10 implement its duties under this chapter, and any state general funds  
11 that may have been appropriated but are no longer needed by the state  
12 board shall lapse to the state general fund.

13 NEW SECTION. **Sec. 7.** A new section is added to chapter 44.28 RCW  
14 to read as follows:

15 The joint committee shall conduct a review of the governor's  
16 interagency coordinating council on health disparities and its  
17 functions. The review shall be substantially the same as a sunset  
18 review under chapter 43.131 RCW. The joint committee shall present its  
19 findings to appropriate committees of the legislature by December 1,  
20 2016.

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