

1 (45) \$189,000 of the dedicated marijuana account—state  
2 appropriation for fiscal year 2020 is provided solely to implement  
3 Engrossed Substitute House Bill No. 1094 (medical marijuana  
4 renewals). If the bill is not enacted by June 30, 2019, the amount  
5 provided in this subsection shall lapse.

6 (46) \$200,000 of the general fund—local appropriation is provided  
7 solely to implement chapter 68, Laws of 2019 (HB 1177) (dental  
8 laboratory registry).

9 (47) \$88,000 of the general fund—state appropriation for fiscal  
10 year 2020 and \$87,000 of the general fund—state appropriation for  
11 fiscal year 2021 are provided solely for an online tutorial and link  
12 to web-based, continuing education funded by the centers for disease  
13 control for training for the primary care health workforce regarding  
14 the protocols for perinatal monitoring, birth-dose immunization,  
15 early diagnosis, linkage to care, and treatment for persons diagnosed  
16 with chronic hepatitis B or hepatitis using the project ECHO  
17 telehealth model operated by the University of Washington. Training  
18 shall focus on increased provider proficiency and increased number of  
19 trained providers in areas with high rates of reported cases of  
20 hepatitis B or hepatitis, including regions with high incidence of  
21 drug use or upward trend of children who have not received hepatitis  
22 B virus vaccinations according to centers for disease control  
23 recommendations. All digital and hardcopy training, educational, and  
24 outreach materials for this program must be culturally relevant and  
25 linguistically diverse.

26 (48) \$300,000 of the general fund—state appropriation for fiscal  
27 year 2020 and \$90,000 of the general fund—state appropriation for  
28 fiscal year 2021 are provided solely to the department of health for  
29 a task force established to recommend strategies for incorporating  
30 environmental justice principles into how state agencies discharge  
31 their responsibilities.

32 (a) The membership of the task force established under this  
33 section is as follows:

34 (i) The director of the department of commerce, or the director's  
35 designee;

36 (ii) The director of the department of ecology, or the director's  
37 designee;

38 (iii) The executive director of the Puget Sound partnership, or  
39 the executive director's designee;

1 (iv) The secretary of the department of transportation, or the  
2 secretary's designee;

3 (v) The secretary of the department of health, or the secretary's  
4 designee;

5 (vi) The chair of the energy facility site evaluation council, or  
6 the chair's designee;

7 (vii) The chair of the governor's interagency council on health  
8 disparities, or the chair's designee;

9 (viii) The commissioner of public lands, or the commissioner's  
10 designee;

11 (ix) A member from an organization representing statewide  
12 environmental justice issues, appointed by the governor;

13 (x) Three members from community-based organizations, appointed  
14 by the cochairs specified under (b) of this subsection, the  
15 nominations of which are based upon maintaining a balanced and  
16 diverse distribution, of representation from census tracts that are  
17 ranked at an eight or higher on the cumulative impact analysis and of  
18 ethnic, geographic, gender, sexual orientation, age, socioeconomic  
19 status, and occupational representation, where practicable;

20 (xi) A tribal leader, invited by the governor;

21 (xii) One member from an association representing business  
22 interests, appointed by the governor;

23 (xiii) One member from a union or other organized labor  
24 association representing worker interests, appointed by the governor;

25 (xiv) The director of the department of agriculture, or the  
26 director's designee; and

27 (xv) One member from an organization representing statewide  
28 agricultural interests, appointed by the governor.

29 (b) The representative of statewide environmental justice  
30 interests, and the chair of the governor's interagency council on  
31 health disparities, or the chair's designee, must cochair the task  
32 force.

33 (c) The governor's interagency council on health disparities  
34 shall provide staff support to the task force. The interagency  
35 council may work with other agencies, departments, or offices as  
36 necessary to provide staff support to the task force.

37 (d) The task force must submit a final report of its findings and  
38 recommendations to the appropriate committees of the legislature and  
39 the governor by October 31, 2020, and in compliance with RCW  
40 43.01.036. The goal of the final report is to provide guidance to

1 agencies, the legislature, and the governor, and at a minimum must  
2 include the following:

3 (i) Guidance for state agencies regarding how to use a cumulative  
4 impact analysis tool developed by the department of health. Guidance  
5 must cover how agencies identify highly impacted communities and must  
6 be based on best practices and current demographic data;

7 (ii) Best practices for increasing public participation and  
8 engagement by providing meaningful opportunities for involvement for  
9 all people, taking into account barriers to participation that may  
10 arise due to race, color, ethnicity, religion, income, or education  
11 level;

12 (iii) Recommendations for establishing measurable goals for  
13 reducing environmental health disparities for each community in  
14 Washington state and ways in which state agencies may focus their  
15 work towards meeting those goals;

16 (iv) Model policies for prioritizing highly impacted communities  
17 and vulnerable populations for the purpose of reducing environmental  
18 health disparities and advancing a healthy environment for all  
19 residents.

20 (e) If time and resources permit, the task force may also include  
21 in its final report:

22 (i) Recommendations for creating and implementing equity analysis  
23 into all significant planning, programmatic and policy decision  
24 making, and investments. The equity analysis methods may include a  
25 process for describing potential risks to, benefits to, and  
26 opportunities for highly impacted communities and vulnerable  
27 populations;

28 (ii) Best practices and needed resources for cataloging and  
29 cross-referencing current research and data collection for programs  
30 within all state agencies relating to the health and environment of  
31 people of all races, cultures, and income levels, including minority  
32 populations and low-income populations of the state.

33 (f) Members of the task force who are not state employees must be  
34 compensated in accordance with RCW 43.03.240 and are entitled to  
35 reimbursement individually for travel expenses incurred in the  
36 performance of their duties as members of the task force in  
37 accordance with RCW 43.03.050 and 43.03.060. The expenses of the task  
38 force must be paid by the governor's interagency council on health  
39 disparities.

(g) The task force must hold four regional meetings to seek input from, present their work plan and proposals to, and receive feedback from communities throughout the state. The following locations must be considered for these meetings: Northwest Washington, central Puget Sound region, south Puget Sound region, southwest Washington, central Washington, and eastern Washington.

(h) Reports submitted under this section must be available for public inspection and copying through the governor's interagency council on health disparities and must be posted on its web site.

(49) \$500,000 of the general fund—state appropriation for fiscal year 2020 and \$500,000 of the general fund—state appropriation for fiscal year 2021 are provided solely for testing of lead in public schools. The department must determine which school districts have the highest priority and test those districts first. The department and the school districts for which tests are conducted must provide to parents, educators, school staff, and the public clear communications regarding the test results, the consequences of even low levels of exposure or ingestion, such as cognitive deficits, reduction in IQ, and neurological development, and the information that no level of lead in drinking water is safe. The communications must include a comparison of the results to the recommendation of the American academy of pediatrics (August 2017) and the national toxicology program of the national institutes of health and the center for disease control, regardless of whether the level exceeds the standard for action pursuant to the federal lead and copper rule. Communications regarding test results where levels exceed the level recommended by the American academy of pediatricians must be accompanied by examples of actions districts may take to prevent exposure, including automated flushing of water fountains and sinks, and installation of certified water filters or bottle filling stations.

**\*NEW SECTION. Sec. 222. FOR THE DEPARTMENT OF CORRECTIONS**

The appropriations to the department of corrections in this act shall be expended for the programs and in the amounts specified in this act.

**(1) ADMINISTRATION AND SUPPORT SERVICES**

General Fund—State Appropriation (FY 2020)	\$68,636,000
General Fund—State Appropriation (FY 2021)	\$69,672,000