
SUBSTITUTE HOUSE BILL 1551

State of Washington

66th Legislature

2019 Regular Session

By House Health Care & Wellness (originally sponsored by Representatives Jenkins, Cody, Stonier, Fey, Appleton, and Pollet; by request of Department of Health)

1 AN ACT Relating to modernizing the control of certain
2 communicable diseases; amending RCW 70.24.015, 70.24.017, 70.24.024,
3 70.24.080, 70.24.110, 70.24.120, 70.24.130, 70.24.220, 70.24.290,
4 70.24.325, 70.24.340, 70.24.360, 70.24.370, 9A.36.011, 18.35.040,
5 49.44.180, 49.60.172, 70.02.220, 43.150.050, and 74.39.005; adding
6 new sections to chapter 70.24 RCW; repealing RCW 70.24.095,
7 70.24.100, 70.24.107, 70.24.125, 70.24.140, 70.24.200, 70.24.210,
8 70.24.240, 70.24.250, 70.24.260, 70.24.270, 70.24.280, 70.24.300,
9 70.24.310, 70.24.320, 70.24.350, 70.24.380, 70.24.400, and 70.24.410;
10 and prescribing penalties.

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

12 **Sec. 1.** RCW 70.24.015 and 1988 c 206 s 901 are each amended to
13 read as follows:

14 The legislature declares that sexually transmitted diseases and
15 blood-borne pathogens constitute a serious and sometimes fatal threat
16 to the public and individual health and welfare of the people of the
17 state. The legislature finds that the incidence of sexually
18 transmitted diseases and blood-borne pathogens is rising at an
19 alarming rate and that these diseases result in significant social,
20 health, and economic costs, including infant and maternal mortality,
21 temporary and lifelong disability, and premature death. The

1 legislature further finds that sexually transmitted diseases and
2 blood-borne pathogens, by their nature, involve sensitive issues of
3 privacy, and it is the intent of the legislature that all programs
4 designed to deal with these diseases afford patients privacy,
5 confidentiality, and dignity. The legislature also finds that medical
6 knowledge and information about sexually transmitted diseases and
7 blood-borne pathogens are rapidly changing. It is therefore the
8 intent of the legislature to provide a program that is sufficiently
9 flexible to meet emerging needs, deals efficiently and effectively
10 with reducing the incidence of sexually transmitted diseases and
11 blood-borne pathogens, and provides patients with a secure knowledge
12 that information they provide will remain private and confidential.

13 **Sec. 2.** RCW 70.24.017 and 2001 c 319 s 4 are each amended to
14 read as follows:

15 Unless the context clearly requires otherwise, the definitions in
16 this section apply throughout this chapter:

17 (1) (~~("Acquired immunodeficiency syndrome" or "AIDS" means the~~
18 ~~clinical syndrome of HIV-related illness as defined by the board of~~
19 ~~health by rule.)~~) "Blood-borne pathogen" means a pathogenic
20 microorganism that is present in human blood and can cause disease in
21 humans. "Blood-borne pathogen" includes hepatitis B virus, hepatitis
22 C virus, and human immunodeficiency virus, as well as any other
23 pathogen specified by the board in rule.

24 (2) "Board" means the state board of health.

25 (3) "Department" means the department of health, or any successor
26 department with jurisdiction over public health matters.

27 (4) "Health care provider" means any person who is a member of a
28 profession under RCW 18.130.040 or other person providing medical,
29 nursing, psychological, or other health care services regulated by
30 the department of health.

31 (5) "Health care facility" means a hospital, nursing home,
32 neuropsychiatric or mental health facility, home health agency,
33 hospice, child care agency, group care facility, family foster home,
34 clinic, blood bank, blood center, sperm bank, laboratory, or other
35 social service or health care institution regulated or operated by
36 the department of health.

37 (6) (~~("HIV-related condition" means any medical condition~~
38 ~~resulting from infection with HIV including, but not limited to,~~

1 seropositivity for HIV.)) "Health order" means an order issued under
2 RCW 70.24.024 or 70.24.340.

3 (7) "Human immunodeficiency virus" or "HIV" means all HIV and
4 HIV-related viruses which damage the cellular branch of the human
5 immune (~~(or neurological)~~) system(~~(s)~~) and leave the (~~(infected)~~)
6 person immunodeficient (~~(or neurologically impaired)~~).

7 (8) "Test for a sexually transmitted disease" means a test
8 approved by the board by rule.

9 (9) "Legal guardian" means a person appointed by a court to
10 assume legal authority for another who has been found incompetent or,
11 in the case of a minor, a person who has legal custody of the child.

12 (10) "Local (~~(public)~~) health officer" (~~(means the officer~~
13 ~~directing the county health department or his or her designee who has~~
14 ~~been given the responsibility and authority to protect the health of~~
15 ~~the public within his or her jurisdiction)~~) has the same meaning as
16 in chapter 70.05 RCW.

17 (11) "Medical treatment" includes treatment for curable diseases
18 and treatment that causes a person to be unable to transmit a disease
19 to others, based upon generally accepted standards of medical and
20 public health science, as specified by the board in rule.

21 (12) "Person" includes any natural person, partnership,
22 association, joint venture, trust, public or private corporation, or
23 health facility.

24 (~~(12) "Release of test results" means a written authorization~~
25 ~~for disclosure of any sexually transmitted disease test result which~~
26 ~~is signed, dated, and which specifies to whom disclosure is~~
27 ~~authorized and the time period during which the release is to be~~
28 ~~effective.)~~)

29 (13) "Sexually transmitted disease" means a bacterial, viral,
30 fungal, or parasitic (~~(disease)~~) infection, determined by the board
31 by rule to be sexually transmitted, to be a threat to the public
32 health and welfare, and to be (~~(a disease)~~) an infection for which a
33 legitimate public interest will be served by providing for regulation
34 and treatment. The board shall designate chancroid, gonorrhea,
35 granuloma inguinale, lymphogranuloma venereum, genital herpes
36 simplex, chlamydia, (~~(nongonococcal urethritis (NGU),)~~) trachomitis,
37 genital human papilloma virus infection, syphilis, (~~(acquired~~
38 ~~immunodeficiency syndrome (AIDS),)~~) and human immunodeficiency virus
39 (HIV) infection as sexually transmitted diseases, and shall consider
40 the recommendations and classifications of the centers for disease

1 control and other nationally recognized medical authorities in
2 designating other diseases as sexually transmitted.

3 (14) "State ((public)) health officer" means the secretary of
4 health or an officer appointed by the secretary.

5 **Sec. 3.** RCW 70.24.024 and 1988 c 206 s 909 are each amended to
6 read as follows:

7 (1) Subject to the provisions of this chapter, the state and
8 local ((public)) health officers or their authorized representatives
9 may examine and counsel ((or cause to be examined and counseled))
10 persons reasonably believed to be infected with or to have been
11 exposed to a sexually transmitted disease.

12 (2) ~~((Orders or restrictive measures directed to persons with a
13 sexually transmitted disease shall be used as the last resort when
14 other measures to protect the public health have failed, including
15 reasonable efforts, which shall be documented, to obtain the
16 voluntary cooperation of the person who may be subject to such an
17 order. The orders and measures shall be applied serially with the
18 least intrusive measures used first. The burden of proof shall be on
19 the state or local public health officer to show that specified
20 grounds exist for the issuance of the orders or restrictive measures
21 and that the terms and conditions imposed are no more restrictive
22 than necessary to protect the public health.~~

23 ~~(3) When the state or local public health officer within his or
24 her respective jurisdiction knows or has reason to believe, because
25 of direct medical knowledge or reliable testimony of others in a
26 position to have direct knowledge of a person's behavior, that a
27 person has a sexually transmitted disease and is engaging in
28 specified conduct, as determined by the board by rule based upon
29 generally accepted standards of medical and public health science,
30 that endangers the public health, he or she shall conduct an
31 investigation in accordance with procedures prescribed by the board
32 to evaluate the specific facts alleged, if any, and the reliability
33 and credibility of the person or persons providing such information
34 and, if satisfied that the allegations are true, he or she may issue
35 an order according to the following priority to:~~

36 ~~(a) Order a person to)~~ (a) The state or a local health officer
37 may conduct an investigation when:

1 (i) He or she knows or has reason to believe that a person in his
2 or her jurisdiction has a sexually transmitted disease and is
3 engaging in specified behavior that endangers the public health; and

4 (ii) The basis for the health officer's investigation is the
5 officer's direct medical knowledge or reliable testimony of another
6 who is in a position to have direct knowledge of the person's
7 behavior.

8 (b) In conducting the investigation, the health officer shall
9 evaluate the allegations, as well as the reliability and credibility
10 of any person or persons who provided information related to the
11 specified behavior that endangers the public health.

12 (3) The state or local health officer shall document measures
13 taken to protect the public health, including reasonable efforts to
14 obtain the person's voluntary cooperation, if the health officer
15 determines upon conclusion of the investigation that the allegations
16 are true and that the person continues to engage in behavior that
17 endangers the public health.

18 (4) (a) If the measures taken under subsection (3) of this section
19 fail to protect the public health, the state or local health officer
20 may issue a health order requiring the person to:

21 (i) Submit to a medical examination or testing, ((seek)) receive
22 counseling, or ((obtain)) receive medical treatment ((for curable
23 diseases)), or any combination of these((, within a period of time
24 determined by the public health officer, not to exceed fourteen days.

25 ~~(b) Order a person to~~)). If ordering a person to receive medical
26 treatment, the health officer must provide the person with at least
27 one additional appropriate option to choose from in the health order;
28 or

29 (ii) Immediately cease and desist from specified ((conduct
30 which)) behavior that endangers the public health ((of others)) by
31 imposing such restrictions upon the person as are necessary to
32 prevent the specified ((conduct)) behavior that endangers the public
33 health ((of others only if the public health officer has determined
34 that clear and convincing evidence exists to believe that such person
35 has been ordered to report for counseling as provided in (a) of this
36 subsection and continues to demonstrate behavior which endangers the
37 health of others)).

38 (b) Any restriction shall be in writing, setting forth the name
39 of the person to be restricted ((and)), the initial period of time((, not
40 to exceed three months,)) during which the health order shall

1 remain effective, the terms of the restrictions, and such other
2 conditions as may be necessary to protect the public health.
3 Restrictions shall be imposed in the least-restrictive manner
4 necessary to protect the public health. The period of time during
5 which the health order is effective must be reasonably related to the
6 purpose of the restriction or restrictions contained in the order, up
7 to a maximum period of twelve months.

8 ~~((4))~~ (5)(a) Upon the issuance of ~~((any))~~ a health order ~~((by~~
9 ~~the state or local public health officer or an authorized~~
10 ~~representative))~~ pursuant to subsection ~~((3))~~ (4) of this section
11 ~~((or RCW 70.24.340(4), such public)),~~ the state or local health
12 officer shall give written notice promptly, personally, and
13 confidentially to the person who is the subject of the order stating
14 the grounds and provisions of the order, including the factual bases
15 therefor, the evidence relied upon for proof of infection and
16 dangerous behavior, and the likelihood of repetition of such
17 behaviors in the absence of such an order~~((, and notifying))~~. The
18 written notice must inform the person who is the subject of the order
19 that, if he or she contests the order, he or she may file an appeal
20 and appear at a judicial hearing on the enforceability of the order,
21 to be held in superior court. ~~((He or she may have an attorney appear~~
22 ~~on his or her behalf in the hearing at public expense, if~~
23 ~~necessary.))~~ The hearing shall be held within seventy-two hours of
24 receipt of the notice, unless the person subject to the order agrees
25 to comply. If the person contests the order, no invasive medical
26 procedures shall be carried out prior to a hearing being held
27 pursuant to this subsection. ~~((If the person does not contest the~~
28 ~~order within seventy-two hours of receiving it, and the person does~~
29 ~~not comply with the order within the time period specified for~~
30 ~~compliance with the order, the state or local public health officer~~
31 ~~may request a warrant be issued by the superior court to insure~~
32 ~~appearance at the hearing. The hearing shall be within seventy-two~~
33 ~~hours of the expiration date of the time specified for compliance~~
34 ~~with the original order.))~~

35 (b) The health officer may apply to the superior court for a
36 court order requiring the person to comply with the health order if
37 the person fails to comply with the health order within the time
38 period specified.

39 (c) At a hearing held pursuant to (a) or (b) of this subsection
40 (5), the person subject to the health order may have an attorney

1 appear on his or her behalf at public expense, if necessary. The
2 burden of proof shall be on the (~~public~~) health officer to show by
3 clear and convincing evidence that the specified grounds exist for
4 the issuance of the order and for the need for compliance and that
5 the terms and conditions imposed therein are no more restrictive than
6 necessary to protect the public health. Upon conclusion of the
7 hearing, the court shall issue appropriate orders affirming,
8 modifying, or dismissing the health order.

9 (~~(b)~~) (d) If the superior court dismisses the health order (~~(of~~
10 ~~the public health officer)~~), the fact that the order was issued shall
11 be expunged from the records of the department or local department of
12 health.

13 (~~(5) Any hearing conducted pursuant to this section shall be~~
14 ~~closed and confidential unless a public hearing is requested by the~~
15 ~~person who is the subject of the order, in which case the hearing~~
16 ~~will be conducted in open court. Unless in open hearing, any~~
17 ~~transcripts or records relating thereto shall also be confidential~~
18 ~~and may be sealed by the order of the court.))~~

19 NEW SECTION. Sec. 4. A new section is added to chapter 70.24
20 RCW to read as follows:

21 A person who violates or fails to comply with a health order
22 issued under RCW 70.24.024 is guilty of a gross misdemeanor
23 punishable by confinement until the order has been complied with or
24 terminated, up to a maximum period of three hundred sixty-four days.
25 In lieu of confinement, the court may place the defendant on
26 probation upon condition that the defendant comply with the health
27 order, up to the length of the health order. If the defendant is
28 placed on probation and subsequently violates or fails to comply with
29 the health order, the court shall revoke the probation and reinstate
30 the original sentence of confinement.

31 NEW SECTION. Sec. 5. A new section is added to chapter 70.24
32 RCW to read as follows:

33 (1) It is unlawful for a person who knows that he or she has HIV
34 to have sexual intercourse if:

35 (a) The person has been counseled by a health care provider or
36 public health professional regarding the risk of transmitting HIV to
37 others;

1 (b) The partner or partners exposed to HIV through sexual
2 intercourse did not know that the person had HIV; and

3 (c) The person intended to transmit HIV to the partner.

4 (2) It is a defense to a prosecution under this section if:

5 (a) HIV was not transmitted to the partner; or

6 (b) The person took or attempted to take practical means to
7 prevent transmission of HIV.

8 (3) (a) Except as provided in (b) of this subsection, violation of
9 this section is a misdemeanor punishable as provided in RCW
10 9A.20.021.

11 (b) Violation of this section is a gross misdemeanor punishable
12 as provided in RCW 9A.20.021 if the person knowingly misrepresented
13 his or her infection status to the partner.

14 (c) Violation of this section does not require registration under
15 RCW 9A.44.130.

16 (4) For purposes of this section, the following terms have the
17 following meanings:

18 (a) "Practical means to prevent transmission" means good faith
19 employment of an activity, behavior, method, or device that is
20 scientifically demonstrated to measurably reduce the risk of
21 transmitting a sexually transmitted disease, including but not
22 limited to: The use of a condom, barrier protection, or other
23 prophylactic device; or good faith participation in a treatment
24 regimen prescribed by a health care provider or public health
25 professional.

26 (b) "Sexual intercourse" has its ordinary meaning and occurs upon
27 any penetration, however slight, of the vagina or anus of one person
28 by the sexual organs of another whether such persons are of the same
29 or another sex.

30 **Sec. 6.** RCW 70.24.080 and 1988 c 206 s 911 are each amended to
31 read as follows:

32 Except as provided in sections 4 and 5 of this act, any person
33 who shall violate any of the provisions of this chapter or any lawful
34 rule adopted by the board pursuant to the authority herein granted,
35 or who shall fail or refuse to obey any lawful order issued by any
36 state, county or municipal (~~public~~) health officer, pursuant to the
37 authority granted in this chapter, shall be deemed guilty of a gross
38 misdemeanor punishable as provided under RCW 9A.20.021.

1 **Sec. 7.** RCW 70.24.110 and 1988 c 206 s 912 are each amended to
2 read as follows:

3 A minor fourteen years of age or older who may have come in
4 contact with any sexually transmitted disease or suspected sexually
5 transmitted disease may give consent to the furnishing of hospital,
6 medical, and surgical care related to the diagnosis or treatment of
7 such disease; and treatment to avoid HIV infection. Such consent
8 shall not be subject to disaffirmance because of minority. The
9 consent of the parent, parents, or legal guardian of such minor shall
10 not be necessary to authorize hospital, medical, and surgical care
11 related to such disease, and such parent, parents, or legal guardian
12 shall not be liable for payment for any care rendered pursuant to
13 this section.

14 **Sec. 8.** RCW 70.24.120 and 1991 c 3 s 324 are each amended to
15 read as follows:

16 (~~Sexually transmitted~~) (1) Disease case investigators, upon
17 specific authorization from a physician or by a physician's standing
18 order, are hereby authorized to (~~perform~~) gather specimens,
19 including through performance of venipuncture or (~~skin~~) fingerstick
20 puncture (~~on~~), from a person for the sole purpose of (~~withdrawing~~
21 blood) obtaining specimens for use in (~~sexually transmitted disease~~
22 tests) testing for sexually transmitted diseases, blood-borne
23 pathogens, and other infections as defined by the board by rule.

24 (~~The term "sexually transmitted~~) (2) For the purposes of this
25 section:

26 (a) "Disease case investigator" (~~shall~~) means only those
27 persons who:

28 (~~(1)~~) (i) Are employed by public health authorities; and

29 (~~(2)~~) (ii) Have been trained by a physician in proper
30 procedures to be employed when withdrawing specimens, including
31 blood, in accordance with training requirements established by the
32 department of health; and

33 (~~(3)~~) (iii) Possess a statement signed by the instructing
34 physician that the training required by (a)(ii) of this subsection
35 (~~(2) of this section~~) has been successfully completed.

36 (~~The term~~) (b) "Physician" means any person licensed under the
37 provisions of chapters 18.57 or 18.71 RCW.

1 **Sec. 9.** RCW 70.24.130 and 1991 c 3 s 325 are each amended to
2 read as follows:

3 (1) The board shall adopt such rules as are necessary to
4 implement and enforce this chapter~~((Rules may also be adopted by~~
5 ~~the department of health for the purposes of this chapter. The rules~~
6 ~~may include)), including, but not limited to, rules:~~

7 (a) Establishing procedures for taking appropriate action, in
8 addition to any other penalty under this chapter, with regard to
9 health care facilities or health care providers ~~((which))~~ that
10 violate this chapter or the rules adopted under this chapter~~((The~~
11 ~~rules shall prescribe))~~;

12 (b) Prescribing stringent safeguards to protect the
13 confidentiality of the persons and records subject to this chapter,
14 consistent with chapter 70.02 RCW;

15 (c) Establishing reporting requirements for sexually transmitted
16 diseases;

17 (d) Establishing procedures for investigations under RCW
18 70.24.024;

19 (e) Specifying, for purposes of RCW 70.24.024, behavior that
20 endangers the public health, based upon generally accepted standards
21 of medical and public health science;

22 (f) Defining, for the purposes of RCW 70.24.120, specimens that
23 can be obtained and tests that can be administered for sexually
24 transmitted diseases, blood-borne pathogens, and other infections as
25 defined by the board by rule;

26 (g) Determining, for purposes of RCW 70.24.340, categories of
27 employment that are at risk of substantial exposure to a blood-borne
28 pathogen; and

29 (h) Defining, for purposes of RCW 70.24.340, 70.24.360, and
30 70.24.370, what constitutes an exposure that presents a possible risk
31 of transmission of a blood-borne pathogen.

32 (2) In addition to any rules adopted by the board, the department
33 may adopt any rules necessary to implement and enforce this chapter.

34 (3) The procedures set forth in chapter 34.05 RCW apply to the
35 administration of this chapter, except that in case of conflict
36 between chapter 34.05 RCW and this chapter, the provisions of this
37 chapter shall control.

38 **Sec. 10.** RCW 70.24.220 and 1988 c 206 s 401 are each amended to
39 read as follows:

1 The legislature finds that the public schools provide a unique
2 and appropriate setting for educating young people about the
3 pathology and prevention of (~~acquired immunodeficiency syndrome~~
4 ~~(AIDS)~~) sexually transmitted diseases. The legislature recognizes
5 that schools and communities vary throughout the state and that
6 locally elected school directors should have a significant role in
7 establishing a program of (~~(AIDS)~~) sexually transmitted disease
8 education in their districts, consistent with RCW 28A.230.020 and
9 28A.300.475.

10 **Sec. 11.** RCW 70.24.290 and 1988 c 206 s 606 are each amended to
11 read as follows:

12 The superintendent of public instruction shall adopt rules that
13 require appropriate education and training, to be included as part of
14 their present continuing education requirements, for public school
15 employees on the prevention, transmission, and treatment of (~~(AIDS)~~)
16 blood-borne pathogens. The superintendent of public instruction shall
17 (~~(work with the office on AIDS under RCW 70.24.250 to)~~) develop the
18 educational and training material necessary for school employees.

19 **Sec. 12.** RCW 70.24.325 and 1989 c 387 s 1 are each amended to
20 read as follows:

21 (1) This section shall apply to (~~(counseling and)~~) consent for
22 (~~(HIV)~~) blood-borne pathogen testing administered as part of an
23 application for coverage authorized under Title 48 RCW.

24 (2) Persons subject to regulation under Title 48 RCW who are
25 requesting an insured, a subscriber, or a potential insured or
26 subscriber to furnish the results of (~~(an HIV)~~) a blood-borne
27 pathogen test for underwriting purposes as a condition for obtaining
28 or renewing coverage under an insurance contract, health care service
29 contract, or health maintenance organization agreement shall:

30 (a) Provide written information to the individual prior to being
31 tested which explains(~~(+~~

32 ~~(i) What an HIV test is;~~

33 ~~(ii) Behaviors that place a person at risk for HIV infection;~~

34 ~~(iii))~~) which blood-borne pathogen test is being administered;

35 and that the purpose of (~~(HIV)~~) blood-borne pathogen testing in this
36 setting is to determine eligibility for coverage(~~(+~~

37 ~~(iv) The potential risks of HIV testing; and~~

38 ~~(v) Where to obtain HIV pretest counseling))~~).

1 (b) Obtain informed specific written consent for ~~((an HIV test))~~
2 the blood-borne pathogen test or tests. The written informed consent
3 shall include(~~(+~~

4 ~~(i))~~ an explanation of the confidential treatment of the test
5 results which limits access to the results to persons involved in
6 handling or determining applications for coverage or claims of the
7 applicant or claimant ~~((and to those persons designated under~~
8 ~~(e)(iii) of this subsection; and~~

9 ~~(ii) Requirements under (c)(iii) of this subsection)).~~

10 (c) Establish procedures to inform an applicant of the following:

11 (i) ~~((That post-test counseling, as specified under WAC~~
12 ~~248-100-209(4), is required if an HIV test is positive or~~
13 ~~indeterminate;~~

14 ~~(ii) That post-test counseling occurs at the time a positive or~~
15 ~~indeterminate HIV test result is given to the tested individual;~~

16 ~~(iii))~~ That the applicant may designate a health care provider
17 or health care agency to whom the insurer, the health care service
18 contractor, or health maintenance organization will provide
19 ~~((positive or indeterminate))~~ test results indicative of infection
20 with a blood-borne pathogen for interpretation ~~((and post-test~~
21 ~~counseling. When an applicant does not identify a designated health~~
22 ~~care provider or health care agency and the applicant's test results~~
23 ~~are either positive or indeterminate, the insurer, the health care~~
24 ~~service contractor, or health maintenance organization shall provide~~
25 ~~the test results to the local health department for interpretation~~
26 ~~and post-test counseling)); and~~

27 ~~((iv))~~ (ii) That ~~((positive or indeterminate HIV))~~ test results
28 ~~((shall not))~~ indicative of infection with a blood-borne pathogen
29 will be sent directly to the applicant.

30 **Sec. 13.** RCW 70.24.340 and 2011 c 232 s 2 are each amended to
31 read as follows:

32 ~~((1) Local health departments authorized under this chapter~~
33 ~~shall conduct or cause to be conducted pretest counseling, HIV~~
34 ~~testing, and posttest counseling of all persons:~~

35 ~~(a) Convicted of a sexual offense under chapter 9A.44 RCW;~~

36 ~~(b) Convicted of prostitution or offenses relating to~~
37 ~~prostitution under chapter 9A.88 RCW; or~~

1 ~~(c) Convicted of drug offenses under chapter 69.50 RCW if the~~
2 ~~court determines at the time of conviction that the related drug~~
3 ~~offense is one associated with the use of hypodermic needles.~~

4 ~~(2) Such testing shall be conducted as soon as possible after~~
5 ~~sentencing and shall be so ordered by the sentencing judge.~~

6 ~~(3) This section applies only to offenses committed after March~~
7 ~~23, 1988.~~

8 ~~(4)) A law enforcement officer, firefighter, health care~~
9 ~~provider, health care facility staff person, department of~~
10 ~~corrections' staff person, jail staff person, or person employed in~~
11 ~~other categories of employment determined by the board in rule to be~~
12 ~~at risk of ((substantial)) exposure ((to HIV)) that presents a~~
13 ~~possible risk of transmission of a blood-borne pathogen, who has~~
14 ~~experienced ((a-substantial)) an exposure to another person's bodily~~
15 ~~fluids in the course of his or her employment, may request a state or~~
16 ~~local ((public)) health officer to order ((pretest counseling, HIV~~
17 ~~testing, and posttest counseling)) blood-borne pathogen testing for~~
18 ~~the person whose bodily fluids he or she has been exposed to. ((A~~
19 ~~person eligible to request a state or local health official to order~~
20 ~~HIV testing under this chapter and board rule may also request a~~
21 ~~state or local health officer to order testing for other blood-borne~~
22 ~~pathogens.)) If the state or local ((public)) health officer refuses~~
23 ~~to order ((counseling and)) testing under this ((sub))section, the~~
24 ~~person who made the request may petition the superior court for a~~
25 ~~hearing to determine whether an order shall be issued. The hearing on~~
26 ~~the petition shall be held within seventy-two hours of filing the~~
27 ~~petition, exclusive of Saturdays, Sundays, and holidays. The standard~~
28 ~~of review to determine whether the ((public)) state or local health~~
29 ~~officer shall be required to issue the order is whether~~
30 ~~((substantial)) an exposure occurred and whether that exposure~~
31 ~~presents a possible risk of transmission of ((the HIV virus as~~
32 ~~defined by the board by rule)) a blood-borne pathogen. Upon~~
33 ~~conclusion of the hearing, the court shall issue the appropriate~~
34 ~~order((, which may require additional testing for other blood-borne~~
35 ~~pathogens)).~~

36 The person who is subject to the state or local ((public)) health
37 officer's order to receive ((counseling and)) testing shall be given
38 written notice of the order promptly, personally, and confidentially,
39 stating the grounds and provisions of the order, including the
40 factual basis therefor. If the person who is subject to the order

1 refuses to comply, the state or local (~~public~~) health officer may
2 petition the superior court for a hearing. The hearing on the
3 petition shall be held within seventy-two hours of filing the
4 petition, exclusive of Saturdays, Sundays, and holidays. The standard
5 of review for the order is whether (~~substantial~~) an exposure
6 occurred and whether that exposure presents a possible risk of
7 transmission of (~~the HIV virus as defined by the board by rule~~) a
8 blood-borne pathogen. Upon conclusion of the hearing, the court shall
9 issue the appropriate order.

10 The state or local (~~public~~) health officer shall perform
11 (~~counseling and~~) testing under this (~~sub~~)section if he or she
12 finds that the exposure (~~was substantial and~~) presents a possible
13 risk (~~as defined by the board of health by rule~~) of transmission of
14 a blood-borne pathogen or if he or she is ordered to do so by a
15 court.

16 The (~~counseling and~~) testing required under this (~~sub~~)section
17 shall be completed as soon as possible after the substantial exposure
18 or after an order is issued by a court, but shall begin not later
19 than seventy-two hours after the (~~substantial~~) exposure or an order
20 is issued by the court.

21 **Sec. 14.** RCW 70.24.360 and 1988 c 206 s 706 are each amended to
22 read as follows:

23 Jail administrators, with the approval of the local (~~public~~)
24 health officer, may order (~~pretest counseling, HIV testing, and~~
25 ~~posttest counseling for persons~~) blood-borne pathogen testing for a
26 person detained in the jail if the local (~~public~~) health officer
27 determines that (~~actual or threatened~~) the detainee's behavior
28 (~~presents a possible risk to~~) exposed the staff, general public, or
29 other persons, and that exposure presents a possible risk of
30 transmitting a blood-borne pathogen. (~~Approval of the local public~~
31 ~~health officer shall be based on RCW 70.24.024(3) and may be~~
32 ~~contested through RCW 70.24.024(4). The administrator shall~~
33 ~~establish, pursuant to RCW 70.48.071, a procedure to document the~~
34 ~~possible risk which is the basis for the HIV testing. "Possible~~
35 ~~risk," as used in this section, shall be defined by the board in~~
36 ~~rule.~~) Documentation of the behavior(~~, or threat thereof,~~) shall
37 be reviewed with the person to (~~try to assure~~) ensure that the
38 person understands the basis for testing.

1 **Sec. 15.** RCW 70.24.370 and 1988 c 206 s 707 are each amended to
2 read as follows:

3 (1) ~~((Department of corrections facility administrators may order~~
4 ~~pretest counseling, HIV testing, and posttest counseling for inmates~~
5 ~~if the secretary of corrections or the secretary's designee~~
6 ~~determines that actual or threatened))~~ The chief medical officer of
7 the department of corrections may order blood-borne pathogen testing
8 for an inmate if the chief medical officer or his or her designee
9 determines that the inmate's behavior ((presents a possible risk to))
10 exposed the staff, general public, or other inmates, and that
11 exposure presents a possible risk of transmitting a blood-borne
12 pathogen. The department of corrections shall establish a procedure
13 to document the exposure that presents a possible risk of
14 transmitting a blood-borne pathogen which is the basis for the
15 ((HIV)) testing. ~~((("Possible risk," as used in this section, shall be~~
16 ~~defined by the department of corrections after consultation with the~~
17 ~~board. Possible risk, as used in the documentation of the behavior,~~
18 ~~or threat thereof, shall be reviewed with the inmate.))~~ The chief
19 medical officer, or his or her designee, shall review the exposure
20 that presents a possible risk of transmitting a blood-borne pathogen
21 in the documentation of the behavior with the inmate to ensure that
22 he or she understands the basis for the testing.

23 (2) ~~((Department of corrections administrators and~~
24 ~~superintendents who are authorized to make decisions about testing~~
25 ~~and dissemination of test information shall, at least annually,~~
26 ~~participate in training seminars on public health considerations~~
27 ~~conducted by the assistant secretary for public health or her or his~~
28 ~~designee.~~

29 ~~(3))~~ Administrative hearing requirements set forth in chapter
30 34.05 RCW do not apply to the procedure developed by the department
31 of corrections pursuant to this section. This section shall not be
32 construed as requiring any hearing process except as may be required
33 under existing federal constitutional law.

34 ~~((4) RCW 70.24.340 does not apply to the department of~~
35 ~~corrections or to inmates in its custody or subject to its~~
36 ~~jurisdiction.))~~

37 **Sec. 16.** RCW 9A.36.011 and 1997 c 196 s 1 are each amended to
38 read as follows:

1 (1) A person is guilty of assault in the first degree if he or
2 she, with intent to inflict great bodily harm:

3 (a) Assaults another with a firearm or any deadly weapon or by
4 any force or means likely to produce great bodily harm or death; or

5 (b) Administers, exposes, or transmits to or causes to be taken
6 by another, poison(~~(, the human immunodeficiency virus as defined in~~
7 ~~chapter 70.24 RCW,)~~) or any other destructive or noxious substance;
8 or

9 (c) Assaults another and inflicts great bodily harm.

10 (2) Assault in the first degree is a class A felony.

11 **Sec. 17.** RCW 18.35.040 and 2014 c 189 s 4 are each amended to
12 read as follows:

13 (1) An applicant for licensure as a hearing aid specialist must
14 have the following minimum qualifications and shall pay a fee
15 determined by the secretary as provided in RCW 43.70.250. An
16 applicant shall be issued a license under the provisions of this
17 chapter if the applicant has not committed unprofessional conduct as
18 specified by chapter 18.130 RCW, and:

19 (a)(i) Satisfactorily completes the hearing aid specialist
20 examination required by this chapter; and

21 (ii) Satisfactorily completes:

22 (A) A minimum of a two-year degree program in hearing aid
23 specialist instruction. The program must be approved by the board;

24 (B) A two-year or four-year degree in a field of study approved
25 by the board from an accredited institution, a nine-month
26 board-approved certificate program offered by a board-approved
27 hearing aid specialist program, and the practical examination
28 approved by the board. The practical examination must be given at
29 least quarterly, as determined by the board. The department may hire
30 licensed industry experts approved by the board to proctor the
31 examination; or

32 (b) Holds a current, unsuspended, unrevoked license from another
33 jurisdiction if the standards for licensing in such other
34 jurisdiction are substantially equivalent to those prevailing in this
35 state as provided in (a) of this subsection; or

36 (c)(i) Holds a current, unsuspended, unrevoked license from
37 another jurisdiction, has been actively practicing as a licensed
38 hearing aid specialist in another jurisdiction for at least forty-
39 eight of the last sixty months, and submits proof of completion of

1 advance certification from either the international hearing society
2 or the national board for certification in hearing instrument
3 sciences; and

4 (ii) Satisfactorily completes the hearing aid specialist
5 examination required by this chapter or a substantially equivalent
6 examination approved by the board.

7 The applicant must present proof of qualifications to the board
8 in the manner and on forms prescribed by the secretary (~~and proof of~~
9 ~~completion of a minimum of four clock hours of AIDS education and~~
10 ~~training pursuant to rules adopted by the board~~)).

11 (2) (a) An applicant for licensure as a speech-language
12 pathologist or audiologist must have the following minimum
13 qualifications:

14 (i) Has not committed unprofessional conduct as specified by the
15 uniform disciplinary act;

16 (ii) Has a master's degree or the equivalent, or a doctorate
17 degree or the equivalent, from a program at a board-approved
18 institution of higher learning, which includes completion of a
19 supervised clinical practicum experience as defined by rules adopted
20 by the board; and

21 (iii) Has completed postgraduate professional work experience
22 approved by the board.

23 (b) All qualified applicants must satisfactorily complete the
24 speech-language pathology or audiology examinations required by this
25 chapter.

26 (c) The applicant must present proof of qualifications to the
27 board in the manner and on forms prescribed by the secretary (~~and~~
28 ~~proof of completion of a minimum of four clock hours of AIDS~~
29 ~~education and training pursuant to rules adopted by the board~~)).

30 (3) An applicant for certification as a speech-language pathology
31 assistant shall pay a fee determined by the secretary as provided in
32 RCW 43.70.250 and must have the following minimum qualifications:

33 (a) An associate of arts or sciences degree, or a certificate of
34 proficiency, from a speech-language pathology assistant program from
35 an institution of higher education that is approved by the board, as
36 is evidenced by the following:

37 (i) Transcripts showing forty-five quarter hours or thirty
38 semester hours of speech-language pathology coursework; and

39 (ii) Transcripts showing forty-five quarter hours or thirty
40 semester hours of general education credit; or

1 (b) A bachelor of arts or bachelor of sciences degree, as
2 evidenced by transcripts, from a speech, language, and hearing
3 program from an institution of higher education that is approved by
4 the board.

5 **Sec. 18.** RCW 49.44.180 and 2004 c 12 s 1 are each amended to
6 read as follows:

7 It shall be unlawful for any person, firm, corporation, or the
8 state of Washington, its political subdivisions, or municipal
9 corporations to require, directly or indirectly, that any employee or
10 prospective employee submit genetic information or submit to
11 screening for genetic information as a condition of employment or
12 continued employment.

13 "Genetic information" for purposes of this chapter, is
14 information about inherited characteristics that can be derived from
15 a DNA-based or other laboratory test, family history, or medical
16 examination. "Genetic information" for purposes of this chapter, does
17 not include: (1) Routine physical measurements, including chemical,
18 blood, and urine analysis, unless conducted purposefully to diagnose
19 genetic or inherited characteristics; and (2) results from tests for
20 abuse of alcohol or drugs (~~(, or for the presence of HIV)~~).

21 **Sec. 19.** RCW 49.60.172 and 2003 c 273 s 2 are each amended to
22 read as follows:

23 (1) No person may require an individual to take an HIV (~~(test, as~~
24 ~~defined in chapter 70.24 RCW,)~~) or hepatitis C test, as a condition
25 of hiring, promotion, or continued employment unless the absence of
26 HIV or hepatitis C infection is a bona fide occupational
27 qualification for the job in question.

28 (2) No person may discharge or fail or refuse to hire any
29 individual, or segregate or classify any individual in any way which
30 would deprive or tend to deprive that individual of employment
31 opportunities or adversely affect his or her status as an employee,
32 or otherwise discriminate against any individual with respect to
33 compensation, terms, conditions, or privileges of employment on the
34 basis of the results of an HIV test or hepatitis C test unless the
35 absence of HIV or hepatitis C infection is a bona fide occupational
36 qualification of the job in question.

37 (3) The absence of HIV or hepatitis C infection as a bona fide
38 occupational qualification exists when performance of a particular

1 job can be shown to present a significant risk, as defined by the
2 board of health by rule, of transmitting HIV or hepatitis C infection
3 to other persons, and there exists no means of eliminating the risk
4 by restructuring the job.

5 (4) For the purpose of this chapter, any person who is actually
6 infected with HIV or hepatitis C, but is not disabled as a result of
7 the infection, shall not be eligible for any benefits under the
8 affirmative action provisions of chapter 49.74 RCW solely on the
9 basis of such infection.

10 (5) Employers are immune from civil action for damages arising
11 out of transmission of HIV or hepatitis C to employees or to members
12 of the public unless such transmission occurs as a result of the
13 employer's gross negligence.

14 **Sec. 20.** RCW 70.02.220 and 2017 3rd sp.s. c 6 s 332 are each
15 amended to read as follows:

16 (1) No person may disclose or be compelled to disclose the
17 identity of any person who has investigated, considered, or requested
18 a test or treatment for a sexually transmitted disease, except as
19 authorized by this section, RCW 70.02.210, or chapter 70.24 RCW.

20 (2) No person may disclose or be compelled to disclose
21 information and records related to sexually transmitted diseases,
22 except as authorized by this section, RCW 70.02.210, 70.02.205, or
23 chapter 70.24 RCW. A person may disclose information related to
24 sexually transmitted diseases about a patient without the patient's
25 authorization, to the extent a recipient needs to know the
26 information, if the disclosure is to:

27 (a) The subject of the test or the subject's legal representative
28 for health care decisions in accordance with RCW 7.70.065, with the
29 exception of such a representative of a minor fourteen years of age
30 or over and otherwise competent;

31 (b) The state (~~public~~) health officer as defined in RCW
32 70.24.017, a local (~~public~~) health officer, or the centers for
33 disease control of the United States public health service in
34 accordance with reporting requirements for a diagnosed case of a
35 sexually transmitted disease;

36 (c) A health facility or health care provider that procures,
37 processes, distributes, or uses: (i) A human body part, tissue, or
38 blood from a deceased person with respect to medical information
39 regarding that person; (ii) semen, including that was provided prior

1 to March 23, 1988, for the purpose of artificial insemination; or
2 (iii) blood specimens;

3 (d) Any state or local (~~public~~) health officer conducting an
4 investigation pursuant to RCW 70.24.024, so long as the record was
5 obtained by means of court-ordered (~~HIV~~) testing pursuant to RCW
6 70.24.340 or 70.24.024;

7 (e) A person allowed access to the record by a court order
8 granted after application showing good cause therefor. In assessing
9 good cause, the court shall weigh the public interest and the need
10 for disclosure against the injury to the patient, to the physician-
11 patient relationship, and to the treatment services. Upon the
12 granting of the order, the court, in determining the extent to which
13 any disclosure of all or any part of the record of any such test is
14 necessary, shall impose appropriate safeguards against unauthorized
15 disclosure. An order authorizing disclosure must: (i) Limit
16 disclosure to those parts of the patient's record deemed essential to
17 fulfill the objective for which the order was granted; (ii) limit
18 disclosure to those persons whose need for information is the basis
19 for the order; and (iii) include any other appropriate measures to
20 keep disclosure to a minimum for the protection of the patient, the
21 physician-patient relationship, and the treatment services;

22 (f) Persons who, because of their behavioral interaction with the
23 infected individual, have been placed at risk for acquisition of a
24 sexually transmitted disease, as provided in RCW 70.24.022, if the
25 health officer or authorized representative believes that the exposed
26 person was unaware that a risk of disease exposure existed and that
27 the disclosure of the identity of the infected person is necessary;

28 (g) A law enforcement officer, firefighter, health care provider,
29 health care facility staff person, department of correction's staff
30 person, jail staff person, or other persons as defined by the board
31 of health in rule pursuant to RCW 70.24.340(~~(+4)~~), who has requested
32 a test of a person whose bodily fluids he or she has been
33 substantially exposed to, pursuant to RCW 70.24.340(~~(+4)~~), if a
34 state or local (~~public~~) health officer performs the test;

35 (h) Claims management personnel employed by or associated with an
36 insurer, health care service contractor, health maintenance
37 organization, self-funded health plan, state administered health care
38 claims payer, or any other payer of health care claims where such
39 disclosure is to be used solely for the prompt and accurate
40 evaluation and payment of medical or related claims. Information

1 released under this subsection must be confidential and may not be
2 released or available to persons who are not involved in handling or
3 determining medical claims payment; and

4 (i) A department of children, youth, and families worker, a
5 child-placing agency worker, or a guardian ad litem who is
6 responsible for making or reviewing placement or case-planning
7 decisions or recommendations to the court regarding a child, who is
8 less than fourteen years of age, has a sexually transmitted disease,
9 and is in the custody of the department of children, youth, and
10 families or a licensed child-placing agency. This information may
11 also be received by a person responsible for providing residential
12 care for such a child when the department of social and health
13 services, the department of children, youth, and families, or a
14 licensed child-placing agency determines that it is necessary for the
15 provision of child care services.

16 (3) No person to whom the results of a test for a sexually
17 transmitted disease have been disclosed pursuant to subsection (2) of
18 this section may disclose the test results to another person except
19 as authorized by that subsection.

20 (4) The release of sexually transmitted disease information
21 regarding an offender or detained person, except as provided in
22 subsection (2)(d) of this section, is governed as follows:

23 (a) The sexually transmitted disease status of a department of
24 corrections offender who has had a mandatory test conducted pursuant
25 to RCW 70.24.340(~~(1)~~), 70.24.360, or 70.24.370 must be made
26 available by department of corrections health care providers and
27 local (~~public~~) health officers to the department of corrections
28 health care administrator or infection control coordinator of the
29 facility in which the offender is housed. The information made
30 available to the health care administrator or the infection control
31 coordinator under this subsection (4)(a) may be used only for disease
32 prevention or control and for protection of the safety and security
33 of the staff, offenders, and the public. The information may be
34 submitted to transporting officers and receiving facilities,
35 including facilities that are not under the department of
36 corrections' jurisdiction according to the provisions of (d) and (e)
37 of this subsection.

38 (b) The sexually transmitted disease status of a person detained
39 in a jail who has had a mandatory test conducted pursuant to RCW
40 70.24.340(~~(1)~~), 70.24.360, or 70.24.370 must be made available by

1 the local (~~public~~) health officer to a jail health care
2 administrator or infection control coordinator. The information made
3 available to a health care administrator under this subsection (4)(b)
4 may be used only for disease prevention or control and for protection
5 of the safety and security of the staff, offenders, detainees, and
6 the public. The information may be submitted to transporting officers
7 and receiving facilities according to the provisions of (d) and (e)
8 of this subsection.

9 (c) Information regarding the sexually transmitted disease status
10 of an offender or detained person is confidential and may be
11 disclosed by a correctional health care administrator or infection
12 control coordinator or local jail health care administrator or
13 infection control coordinator only as necessary for disease
14 prevention or control and for protection of the safety and security
15 of the staff, offenders, and the public. Unauthorized disclosure of
16 this information to any person may result in disciplinary action, in
17 addition to the penalties prescribed in RCW 70.24.080 or any other
18 penalties as may be prescribed by law.

19 (d) Notwithstanding the limitations on disclosure contained in
20 (a), (b), and (c) of this subsection, whenever any member of a jail
21 staff or department of corrections staff has been substantially
22 exposed to the bodily fluids of an offender or detained person, then
23 the results of any tests conducted pursuant to RCW 70.24.340(~~((+1))~~),
24 70.24.360, or 70.24.370, must be immediately disclosed to the staff
25 person in accordance with the Washington Administrative Code rules
26 governing employees' occupational exposure to blood-borne pathogens.
27 Disclosure must be accompanied by appropriate counseling for the
28 staff member, including information regarding follow-up testing and
29 treatment. Disclosure must also include notice that subsequent
30 disclosure of the information in violation of this chapter or use of
31 the information to harass or discriminate against the offender or
32 detainee may result in disciplinary action, in addition to the
33 penalties prescribed in RCW 70.24.080, and imposition of other
34 penalties prescribed by law.

35 (e) The staff member must also be informed whether the offender
36 or detained person had any other communicable disease, as defined in
37 RCW 72.09.251(3), when the staff person was substantially exposed to
38 the offender's or detainee's bodily fluids.

39 (f) The test results of voluntary and anonymous (~~(HIV)~~) testing
40 (~~(or HIV-related condition)~~) for a blood-borne pathogen, as defined

1 in RCW 70.24.017, may not be disclosed to a staff person except as
2 provided in this section and RCW 70.02.050(1)(d) and
3 70.24.340(~~(4)~~). A health care administrator or infection control
4 coordinator may provide the staff member with information about how
5 to obtain the offender's or detainee's test results under this
6 section and RCW 70.02.050(1)(d) and 70.24.340(~~(4)~~).

7 (5) The requirements of this section do not apply to the
8 customary methods utilized for the exchange of medical information
9 among health care providers in order to provide health care services
10 to the patient, nor do they apply within health care facilities where
11 there is a need for access to confidential medical information to
12 fulfill professional duties.

13 (6) Upon request of the victim, disclosure of test results under
14 this section to victims of sexual offenses under chapter 9A.44 RCW
15 must be made if the result is negative or positive. The county
16 prosecuting attorney shall notify the victim of the right to such
17 disclosure. The disclosure must be accompanied by appropriate
18 counseling, including information regarding follow-up testing.

19 (7) A person, including a health care facility or health care
20 provider, shall disclose the identity of any person who has
21 investigated, considered, or requested a test or treatment for a
22 sexually transmitted disease and information and records related to
23 sexually transmitted diseases to federal, state, or local public
24 health authorities, to the extent the health care provider is
25 required by law to report health care information; when needed to
26 determine compliance with state or federal certification or
27 registration rules or laws; or when needed to protect the public
28 health. Any health care information obtained under this subsection is
29 exempt from public inspection and copying pursuant to chapter 42.56
30 RCW.

31 **Sec. 21.** RCW 43.150.050 and 1992 c 66 s 5 are each amended to
32 read as follows:

33 The center, working in cooperation with individuals, local
34 groups, and organizations throughout the state, may undertake any
35 program or activity for which funds are available which furthers the
36 goals of this chapter. These programs and activities may include, but
37 are not limited to:

1 (1) Providing information about programs, activities, and
2 resources of value to volunteers and to organizations operating or
3 planning volunteer or citizen service programs;

4 (2) Sponsoring recognition events for outstanding individuals and
5 organizations;

6 (3) Facilitating the involvement of business, industry,
7 government, and labor in community service and betterment;

8 (4) Organizing, or assisting in the organization of, training
9 workshops and conferences;

10 (5) Publishing schedules of significant events, lists of
11 published materials, accounts of successful programs and programming
12 techniques, and other information concerning the field of
13 volunteerism and citizen service, and distributing this information
14 broadly;

15 (6) Reviewing the laws and rules of the state of Washington, and
16 proposed changes therein, to determine their impact on the success of
17 volunteer activities and programs, and recommending such changes as
18 seem appropriate to ensure the achievement of the goals of this
19 chapter;

20 (7) Seeking funding sources for enhancing, promoting, and
21 supporting the ethic of service and facilitating or providing
22 information to those organizations and agencies which may benefit;

23 (8) Providing information about agencies and individuals who are
24 working to prevent the spread of the human immunodeficiency virus, as
25 defined in chapter 70.24 RCW, and to agencies and individuals who are
26 working to provide health and social services to persons living with
27 (~~acquired immunodeficiency syndrome~~) the human immunodeficiency
28 virus, as defined in chapter 70.24 RCW.

29 **Sec. 22.** RCW 74.39.005 and 1995 1st sp.s. c 18 s 10 are each
30 amended to read as follows:

31 The purpose of this chapter is to:

32 (1) Establish a balanced range of health, social, and supportive
33 services that deliver long-term care services to (~~chronically,~~
34 ~~functionally disabled~~) persons with chronic functional disabilities
35 of all ages;

36 (2) Ensure that functional ability shall be the determining
37 factor in defining long-term care service needs and that these needs
38 will be determined by a uniform system for comprehensively assessing
39 functional disability;

1 (3) Ensure that services are provided in the most independent
2 living situation consistent with individual needs;

3 (4) Ensure that long-term care service options shall be developed
4 and made available that enable (~~(functionally disabled)~~) persons with
5 functional disabilities to continue to live in their homes or other
6 community residential facilities while in the care of their families
7 or other volunteer support persons;

8 (5) Ensure that long-term care services are coordinated in a way
9 that minimizes administrative cost, eliminates unnecessarily complex
10 organization, minimizes program and service duplication, and
11 maximizes the use of financial resources in directly meeting the
12 needs of persons with functional limitations;

13 (6) Develop a systematic plan for the coordination, planning,
14 budgeting, and administration of long-term care services now
15 fragmented between the division of developmental disabilities,
16 division of mental health, aging and adult services administration,
17 division of children and family services, division of vocational
18 rehabilitation, (~~(office on AIDS,)~~) division of health, (~~(and)~~)
19 bureau of alcohol and substance abuse, and the department of health;

20 (7) Encourage the development of a statewide long-term care case
21 management system that effectively coordinates the plan of care and
22 services provided to eligible clients;

23 (8) Ensure that individuals and organizations affected by or
24 interested in long-term care programs have an opportunity to
25 participate in identification of needs and priorities, policy
26 development, planning, and development, implementation, and
27 monitoring of state supported long-term care programs;

28 (9) Support educational institutions in Washington state to
29 assist in the procurement of federal support for expanded research
30 and training in long-term care; and

31 (10) Facilitate the development of a coordinated system of long-
32 term care education that is clearly articulated between all levels of
33 higher education and reflective of both in-home care needs and
34 institutional care needs of (~~(functionally disabled)~~) persons with
35 functional disabilities.

36 NEW SECTION. **Sec. 23.** The following acts or parts of acts are
37 each repealed:

38 (1) RCW 70.24.095 (Pregnant women—Drug treatment program
39 participants—AIDS counseling) and 1988 c 206 s 705;

1 (2) RCW 70.24.100 (Syphilis laboratory tests) and 1991 c 3 s 323,
2 1979 c 141 s 95, & 1939 c 165 s 2;

3 (3) RCW 70.24.107 (Rule-making authority—1997 c 345) and 1999 c
4 372 s 14 & 1997 c 345 s 6;

5 (4) RCW 70.24.125 (Reporting requirements for sexually
6 transmitted diseases—Rules) and 1988 c 206 s 905;

7 (5) RCW 70.24.140 (Certain infected persons—Sexual intercourse
8 unlawful without notification) and 1988 c 206 s 917;

9 (6) RCW 70.24.200 (Information for the general public on sexually
10 transmitted diseases—Emphasis) and 1988 c 206 s 201;

11 (7) RCW 70.24.210 (Information for children on sexually
12 transmitted diseases—Emphasis) and 1988 c 206 s 202;

13 (8) RCW 70.24.240 (Clearinghouse for AIDS educational materials)
14 and 1988 c 206 s 601;

15 (9) RCW 70.24.250 (Office on AIDS—Repository and clearinghouse
16 for AIDS education and training material—University of Washington
17 duties) and 1988 c 206 s 602;

18 (10) RCW 70.24.260 (Emergency medical personnel—Rules for AIDS
19 education and training) and 1988 c 206 s 603;

20 (11) RCW 70.24.270 (Health professionals—Rules for AIDS education
21 and training) and 1988 c 206 s 604;

22 (12) RCW 70.24.280 (Pharmacy quality assurance commission—Rules
23 for AIDS education and training) and 2013 c 19 s 122 & 1988 c 206 s
24 605;

25 (13) RCW 70.24.300 (State and local government employees—
26 Determination of substantial likelihood of exposure—Rules for AIDS
27 education and training) and 1993 c 281 s 60 & 1988 c 206 s 607;

28 (14) RCW 70.24.310 (Health care facility employees—Rules for AIDS
29 education and training) and 1988 c 206 s 608;

30 (15) RCW 70.24.320 (Counseling and testing—AIDS and HIV—
31 Definitions) and 1988 c 206 s 701;

32 (16) RCW 70.24.350 (Prostitution and drug offenses—Voluntary
33 testing and counseling) and 1988 c 206 s 704;

34 (17) RCW 70.24.380 (Board of health—Rules for counseling and
35 testing) and 1988 c 206 s 709;

36 (18) RCW 70.24.400 (Funding for office on AIDS—Center for AIDS
37 education—Department's duties for awarding grants) and 2010 1st sp.s.
38 c 3 s 1, 1998 c 245 s 126, 1991 c 3 s 327, & 1988 c 206 s 801; and

1 (19) RCW 70.24.410 (AIDS advisory committee—Duties, review of
2 insurance problems—Termination) and 1991 c 3 s 328 & 1988 c 206 s
3 803.

4 NEW SECTION. **Sec. 24.** If any provision of this act or its
5 application to any person or circumstance is held invalid, the
6 remainder of the act or the application of the provision to other
7 persons or circumstances is not affected.

--- END ---