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HOUSE BILL 1865

2019 Regular Session State of Washington 66th Legislature

By Representatives Cody, Harris, Pettigrew, Caldier, Tharinger, and Thai

1 AN ACT Relating to acupuncture and Eastern medicine; amending RCW 2 18.06.010, 18.06.020, 18.06.045, 18.06.050, 18.06.060, 18.06.080, 3 18.06.130, 18.06.140, 18.06.190, 18.06.220, 18.06.230, 4.24.240, 4.24.290, 7.70.020, 18.120.020, 18.130.040, 18.250.010, 41.05.074, 4 5 43.70.110, and 48.43.016; reenacting and amending RCW 69.41.010; adding a new section to chapter 18.06 RCW; creating a new section; 6 7 and repealing RCW 18.06.070, 18.06.180, and 18.06.005.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON: 8

9 NEW SECTION. Sec. 1. The legislature finds that acupuncture and Eastern medicine is a holistic system of medicine that has developed 11 through traditional medical practices in China, Japan, Korea, and the other East Asian countries. The legislature intends to recognize that 13 acupuncturists and acupuncture and Eastern medicine practitioners licensed by the state of Washington engage in a system of medicine to 14 15 maintain and promote wellness, manage and reduce pain and/or 16 substance abuse, and prevent, diagnose, and treat disease. 17 system of medicine includes more than the treatment of acupuncture 18 needling therapy alone. For purposes of this chapter, acupuncture is 19 considered the full scope of treatments based on traditional, as well as evidence-based and modern, medical theories identified in this chapter.

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The legislature finds that the practice of acupuncture has become mainstream in the health care system nationally and internationally. The legislature intends to align the professional title of acupuncture with state and federal designations for the profession, defining it as a comprehensive system of medicine.

The legislature does not intend to require persons currently licensed under this chapter to change the business name of their practice if otherwise in compliance with this chapter.

- **Sec. 2.** RCW 18.06.010 and 2016 c 97 s 1 are each amended to read 10 as follows:
 - The following terms in this chapter shall have the meanings set forth in this section unless the context clearly indicates otherwise:
 - (1) "Acupuncture" or "((East Asian)) Eastern medicine" means a ((health care service utilizing East Asian medicine diagnosis and treatment to promote health and treat organic or functional disorders and includes the following)) holistic system of medicine often referred to as traditional Chinese medicine, Oriental medicine, Eastern medicine, and other terms, which includes a variety of traditional and modern therapeutic treatments including, but not limited to, the practice of acupuncture techniques and herbal medicine, to maintain and promote wellness, prevent, manage, and reduce pain, manage substance use disorder, and prevent, diagnose, and treat disease. Acupuncture or Eastern medicine includes:
 - (a) ((Acupuncture, including the)) Use of presterilized, disposable needles, such as filiform needles, and other acupuncture needles/syringes, or lancets to directly and indirectly stimulate acupuncture points, including ashi points, motor, and trigger points, intramuscular needling, and meridians;
 - (b) Use of electrical, mechanical, or magnetic devices to stimulate acupuncture points, including ashi points, motor, and trigger points, intramuscular needling, and meridians;
- 32 (c) All points and protocols for ear acupuncture including, but
 33 not limited to, auricular acupuncture, national acupuncture
 34 detoxification association protocol, battlefield acupuncture, and the
 35 Nogier system;
- 36 (d) Use of contact needling and noninsertion tools such as
 37 teishin, enshin, or zanshin;
- 38 <u>(e)</u> Moxibustion;

 $((\frac{d}{d}))$ Acupressure;

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         ((\frac{e}{})) (g) Cupping;
         ((<del>(f)</del>)) <u>(h)</u> Dermal friction technique;
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         ((<del>(g)</del>)) <u>(i)</u> Infra-red;
         ((<del>(h)</del>)) <u>(j)</u> Sonopuncture;
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         ((\frac{(i)}{(i)})) <u>(k)</u> Laserpuncture;
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6
         ((\frac{1}{2})) Point injection therapy (\frac{2}{2}
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    defined in rule by the department. Point injection therapy includes
     injection of substances, ((<del>limited to</del>)) <u>including sterile</u> saline,
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    sterile water, herbs, minerals, vitamins in liquid form,
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    homeopathic and nutritional substances, and local anesthetics
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    consistent with the practice of ((East Asian)) acupuncture or Eastern
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    medicine. An acupuncturist or acupuncture and Eastern medicine
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    practitioner using point injection therapy who has met the training
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    and education requirement established in rule may use oxygen, medical
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    ozone, and epinephrine for potential emergency purposes for patient
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    care and safety. Point injection therapy does not include injection
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    of controlled substances contained in Schedules I through V of the
18
    uniform controlled substances act, chapter 69.50 RCW or steroids as
    defined in RCW 69.41.300;
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         ((\frac{k}{k})) <u>(m)</u> Dietary advice and health education ((based on East
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    Asian medical theory)) consistent with the system of acupuncture or
22
    Eastern medicine, including the recommendation and sale of herbs,
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    vitamins, minerals, and dietary and nutritional supplements;
24
         (((+1))) (n) Breathing, relaxation, and ((East Asian)) Eastern
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    exercise techniques;
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         ((-(m))) (o) Qi gong;
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         ((<del>(n) East Asian</del>)) <u>(p) Eastern</u> massage and Tui na, which is a
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    method of ((East Asian)) Eastern bodywork, characterized by the
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    kneading, pressing, rolling, shaking, and stretching of the body and
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    does not include spinal manipulation; and
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(2) "Acupuncturist" or "((East Asian)) acupuncture and Eastern medicine practitioner" means a person licensed under this chapter that practices acupuncture or Eastern medicine, a holistic system of medicine, which includes training in using needles therapeutically, educated on diagnosing and treating conditions according to medical traditions from China, Japan, Korea, and other East Asian countries, and application of modern evidence-based research to maintain and promote wellness, prevent, manage, and reduce pain, manage substance

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- 1 <u>use disorder, and prevent, diagnose, and treat conditions and</u> 2 diseases.
 - (3) "Department" means the department of health.

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4 (4) "Secretary" means the secretary of health or the secretary's designee.

Nothing in this chapter requires individuals to be licensed as an ((East Asian)) acupuncturist or acupuncture and Eastern medicine practitioner in order to provide the techniques and services in subsection (1)(((k))) (m) through (((k))) (q) of this section or to sell herbal products.

- 11 **Sec. 3.** RCW 18.06.020 and 2010 c 286 s 3 are each amended to 12 read as follows:
 - (1) No one may hold themselves out to the public as an ((East Asian medicine practitioner,)) acupuncturist, ((or)) licensed acupuncturist, acupuncture and Eastern medicine practitioner, or any derivative thereof which is intended to or is likely to lead the public to believe such a person is an ((East Asian medicine practitioner,)) acupuncturist, ((or)) licensed acupuncturist or acupuncture and Eastern medicine practitioner, unless licensed as provided for in this chapter.
- 21 (2) A person may not practice ((East Asian)) acupuncture or 22 Eastern medicine ((or acupuncture)) if the person is not licensed 23 under this chapter.
 - (3) No one may use any configuration of letters after their name (including L. Ac. $((or))_{r}$ EAMP, or AEMP) which indicates a degree or formal training in ((East Asian)) acupuncture or Eastern medicine $((r including acupuncture_{r}))$ unless licensed as provided for in this chapter.
 - (4) The secretary may by rule proscribe or regulate advertising and other forms of patient solicitation which are likely to mislead or deceive the public as to whether someone is licensed under this chapter.
- (5) ((Any)) A person licensed as an acupuncturist under this chapter ((prior to June 10, 2010, must, upon successful license renewal, be granted)) may use the title ((East Asian)) acupuncturist or acupuncture and Eastern medicine practitioner or the letters L.Ac., EAMP, or AEMP indicating such license ((title)). However, nothing in this section ((shall)) prohibits or limits in any way a practitioner licensed under this title from holding himself or

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- 1 herself out as an acupuncturist $((\frac{or}{c}))_L$ licensed acupuncturist, or
- 2 <u>acupuncture and Eastern medicine practitioner</u> or from using the
- 3 letters L.Ac., EAMP, or AEMP after his or her name.

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- 4 **Sec. 4.** RCW 18.06.045 and 2010 c 286 s 4 are each amended to 5 read as follows:
- Nothing in this chapter shall be construed to prohibit or restrict:
- 8 (1) The practice by an individual credentialed under the laws of 9 this state and performing services within such individual's 10 authorized scope of practice;
 - (2) The practice by an individual employed by the government of the United States while engaged in the performance of duties prescribed by the laws of the United States;
 - (3) The practice by a person who is a regular student in an educational program approved by the secretary, and whose performance of services is pursuant to a regular course of instruction or assignments from an instructor and under the general supervision of the instructor;
 - (4) The practice of ((East Asian)) acupuncture or Eastern medicine((, including acupuncture,)) by any person credentialed to perform ((East Asian)) acupuncture or Eastern medicine((, including acupuncture,)) in any other jurisdiction where such person is doing so in the course of regular instruction of a school of ((East Asian medicine, including)) acupuncture, Eastern medicine, traditional Chinese medicine, or medical traditions from Japan, Korea, and other East Asian countries, approved by the secretary or in an educational seminar by a professional organization of ((East Asian)) acupuncture or Eastern medicine, ((including acupuncture,)) provided that in the latter case, the practice is supervised directly by a person licensed under this chapter or licensed under any other healing art whose scope of practice is ((East Asian)) acupuncture and Eastern medicine((, including acupuncture)).
- 33 **Sec. 5.** RCW 18.06.050 and 2010 c 286 s 5 are each amended to 34 read as follows:
- Any person seeking to be ((examined)) <u>licensed</u> shall present to the secretary ((at least forty-five days before the commencement of the examination)):

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- 1 (1) A written application on a form or forms provided by the 2 secretary setting forth under affidavit such information as the 3 secretary may require; and
 - (2) Proof that the candidate has:

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- Successfully completed a <u>master's level or nat</u>ionally 5 6 certified course, approved by the secretary, of didactic training in 7 basic sciences and ((East Asian)) acupuncture, Eastern medicine, ((including acupuncture,)) traditional Chinese medicine, or medical 8 traditions from Japan, Korea, and other East Asian countries over a 9 minimum period of ((two)) three academic years. The training shall 10 11 include such subjects as anatomy, physiology, microbiology, biochemistry, pathology, hygiene, and a survey of western clinical 12 sciences. The basic science classes must be equivalent to those 13 offered at the collegiate level. However, if the applicant is a 14 licensed chiropractor under chapter 18.25 RCW or a naturopath 15 16 licensed under chapter 18.36A RCW, the requirements of this 17 subsection relating to basic sciences may be reduced by up to one year depending upon the extent of the candidate's qualifications as 18 19 determined under rules adopted by the secretary;
- 20 (b) Successfully completed ((five hundred hours of)) clinical 21 training in ((East Asian)) acupuncture or Eastern medicine((r 22 including acupuncture,)) as defined in rules that is nationally 23 certified and approved by the secretary.
- 24 **Sec. 6.** RCW 18.06.060 and 1991 c 3 s 8 are each amended to read 25 as follows:
 - The department shall consider for approval any $school((\tau))$ or $program((\tau))$ apprenticeship, or tutorial which)) that meets the requirements outlined in this chapter and provides the training required under RCW 18.06.050. Clinical and didactic training may be approved as separate programs or as a joint program. The process for approval shall be established by the secretary by rule.
- 32 **Sec. 7.** RCW 18.06.080 and 2010 c 286 s 6 are each amended to 33 read as follows:
 - (1) The secretary is hereby authorized and empowered to execute the provisions of this chapter and shall offer <u>nationally certified</u> examinations in ((East Asian)) order to become a licensed acupuncturist or acupuncture and Eastern medicine((, including acupuncture,)) practitioner at least twice a year at such times and

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places as the secretary may select. The examination shall be a written examination and may include a practical examination.

- The secretary shall ((develop or)) approve a licensure examination in the subjects that the secretary determines are within the scope of and commensurate with the work performed by an ((East Asian)) acupuncturist or acupuncture and Eastern practitioner and shall include but not necessarily be limited to anatomy, physiology, microbiology, biochemistry, pathology, hygiene, acupuncture, and ((East Asian)) Eastern medicine((, including acupuncture)). All application papers shall be deposited with the secretary and there retained for at least one year, when they may be destroyed.
- 13 (3) If the examination is successfully passed, the secretary
 14 shall confer on such candidate the title of ((East Asian))
 15 acupuncturist or acupuncture and Eastern medicine practitioner.
- **Sec. 8.** RCW 18.06.130 and 2010 c 286 s 8 are each amended to 17 read as follows:
- 18 (1) The secretary shall develop a form to be used by a person licensed under this chapter to inform the patient of the scope of practice and qualifications of an ((East Asian)) acupuncturist or acupuncture and Eastern medicine practitioner. All license holders shall bring the form to the attention of the patients in whatever manner the secretary, by rule, provides.
 - (2) A person violating this section is guilty of a misdemeanor.
- **Sec. 9.** RCW 18.06.140 and 2015 c 60 s 2 are each amended to read as follows:
 - (1) When a person licensed under this chapter sees patients with potentially serious disorders such as cardiac conditions, acute abdominal symptoms, and such other conditions, the practitioner shall immediately request a consultation or recent written diagnosis from a primary health care provider licensed under chapter 18.71, 18.57, 18.57A, 18.36A, or 18.71A RCW or RCW 18.79.050. In the event that the patient with the disorder refuses to authorize such consultation or provide a recent diagnosis from such primary health care provider, ((East Asian medical)) acupuncture or Eastern medicine treatments((rincluding acupuncturer)) may only be continued after the patient signs a written waiver acknowledging the risks associated with the failure to pursue treatment from a primary health care provider. The

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- 1 waiver must also include: (a) An explanation of an ((East Asian))
- acupuncturist's or acupuncture and Eastern medicine practitioner's 2
- 3 scope of practice, including the services and techniques ((East
- Asian)) acupuncturists or acupuncture and Eastern 4
- practitioners are authorized to provide and (b) a statement that the 5
- 6 services and techniques that an ((East Asian)) acupuncturist or
- acupuncture and Eastern medicine practitioner is authorized to 7
- provide ((will)) may or may not necessarily resolve the patient's 8
- underlying potentially serious disorder. The requirements of the 9
- 10 waiver shall be established by the secretary in rule.
- 11 (2) In an emergency, a person licensed under this chapter shall:
- 12 (a) Initiate the emergency medical system by calling 911; (b) request
- ambulance; and (c) provide patient support until emergency 13
- 14 response arrives.
- 15 (3) A person violating this section is guilty of a misdemeanor.
- 16 Sec. 10. RCW 18.06.190 and 2010 c 286 s 10 are each amended to 17 read as follows:
- 18 The secretary may license a person without examination if such
- 19 person is credentialed as an ((East Asian)) acupuncturist or
- 20 acupuncture and Eastern medicine practitioner ((or licensed
- 21 acupuncturist)), or equivalent, in another jurisdiction if, in the
- 22 secretary's judgment, the requirements of that jurisdiction are
- equivalent to or greater than those of Washington state. 23
- Sec. 11. RCW 18.06.220 and 2015 c 60 s 1 are each amended to 24
- read as follows: 25

- The Washington state ((East Asian)) acupuncture and Eastern 26
- 27 medicine advisory committee is established.
- (1) The committee consists of five members, each of whom must be 28
- a resident of the state of Washington. Four committee members must be
- 30 ((East Asian)) acupuncturists or acupuncture and Eastern medicine
- practitioners licensed under this chapter who have not less than five 31
- years' experience in the practice of ((East Asian)) acupuncture and 32
- Eastern medicine and who have been actively engaged in practice 33
- within two years of appointment. The fifth committee member must be 34
- appointed from the public at large and must have an interest in the 35
- rights of consumers of health services. 36
- 37 (2) The secretary shall appoint the committee members. Committee
- 38 members serve at the pleasure of the secretary. The secretary may

p. 8 HB 1865 appoint members of the initial committee to staggered terms of one to three years, and thereafter all terms are for three years. No member may serve more than two consecutive full terms.

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- (3) The committee shall meet as necessary, but no less often than once per year. The committee shall elect a chair and a vice chair. A majority of the members currently serving constitutes a quorum.
- (4) The committee shall advise and make recommendations to the secretary on standards for the practice of ((East Asian)) acupuncture and Eastern medicine.
- 10 (5) Committee members must be compensated in accordance with RCW 11 43.03.240, including travel expenses in carrying out his or her 12 authorized duties in accordance with RCW 43.03.050 and 43.03.060.
- 13 (6) Committee members are immune from suit in an action, civil or 14 criminal, based on the department's disciplinary proceedings or other 15 official acts performed in good faith.
- 16 **Sec. 12.** RCW 18.06.230 and 2016 c 97 s 4 are each amended to read as follows:
 - (1) Prior to providing point injection therapy services, an ((East Asian)) acupuncturist or acupuncture and Eastern medicine practitioner must obtain the education and training necessary to provide the service. ((The department shall adopt rules by July 1, 2017, to specify the education and training necessary to provide point injection therapy.))
 - (2) Any ((East Asian)) acupuncturist or acupuncture and Eastern medicine practitioner performing point injection therapy prior to June 9, 2016, must be able to demonstrate, upon request of the department of health, successful completion of education and training in point injection therapy.
- (3) Prior to administering local anesthetics, epinephrine, or medical ozone in providing point injection therapy services, an acupuncturist or acupuncture and Eastern medicine practitioner must obtain the education and training necessary to provide these substances. The department shall adopt rules by July 1, 2020, to specify the education and training necessary to administer local anesthetics, medical ozone, and epinephrine.
- NEW SECTION. Sec. 13. A new section is added to chapter 18.06 RCW to read as follows:

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The department shall adopt a rule requiring completion of continuing education for acupuncturists as a condition of license renewal.

- Sec. 14. RCW 4.24.240 and 2010 c 286 s 11 are each amended to read as follows:
- (1) (a) A person licensed by this state to provide health care or related services including, but not limited to, an ((East Asian)) acupuncturist or acupuncture and Eastern medicine practitioner, a physician, osteopathic physician, dentist, nurse, optometrist, podiatric physician and surgeon, chiropractor, physical therapist, psychologist, pharmacist, optician, physician assistant, osteopathic physician's assistant, nurse practitioner, including, in the event such person is deceased, his or her estate or personal representative;
- (b) An employee or agent of a person described in subparagraph (a) of this subsection, acting in the course and scope of his or her employment, including, in the event such employee or agent is deceased, his or her estate or personal representative; or
- (c) An entity, whether or not incorporated, facility, or institution employing one or more persons described in subparagraph (a) of this subsection, including, but not limited to, a hospital, clinic, health maintenance organization, or nursing home; or an officer, director, trustee, employee, or agent thereof acting in the course and scope of his or her employment, including in the event such officer, director, employee, or agent is deceased, his or her estate or personal representative;
- shall be immune from civil action for damages arising out of the good faith performance of their duties on such committees, where such actions are being brought by or on behalf of the person who is being evaluated.
 - (2) No member, employee, staff person, or investigator of a professional review committee shall be liable in a civil action as a result of acts or omissions made in good faith on behalf of the committee; nor shall any person be so liable for filing charges with or supplying information or testimony in good faith to any professional review committee; nor shall a member, employee, staff person, or investigator of a professional society, of a professional examining or licensing board, of a professional disciplinary board, of a governing board of any institution, or of any employer of

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- 1 professionals be so liable for good faith acts or omissions made in
- 2 full or partial reliance on recommendations or decisions of a
- 3 professional review committee or examining board.

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Sec. 15. RCW 4.24.290 and 2010 c 286 s 12 are each amended to read as follows:

In any civil action for damages based on professional negligence against a hospital which is licensed by the state of Washington or against the personnel of any such hospital, or against a member of the healing arts including, but not limited to, an ((East Asian)) <u>acupuncturist or acupuncture and Eastern</u> medicine practitioner licensed under chapter 18.06 RCW, a physician licensed under chapter 18.71 RCW, an osteopathic physician licensed under chapter 18.57 RCW, a chiropractor licensed under chapter 18.25 RCW, a dentist licensed under chapter 18.32 RCW, a podiatric physician and surgeon licensed under chapter 18.22 RCW, or a nurse licensed under chapter 18.79 RCW, the plaintiff in order to prevail shall be required to prove by a preponderance of the evidence that the defendant or defendants failed to exercise that degree of skill, care, and learning possessed at that time by other persons in the same profession, and that as a proximate result of such failure the plaintiff suffered damages, but in no event shall the provisions of this section apply to an action based on the failure to obtain the informed consent of a patient.

Sec. 16. RCW 7.70.020 and 2010 c 286 s 13 are each amended to read as follows:

As used in this chapter "health care provider" means either:

- (1) A person licensed by this state to provide health care or related services including, but not limited to, an ((East Asian)) acupuncturist or acupuncture and Eastern medicine practitioner, a physician, osteopathic physician, dentist, nurse, optometrist, podiatric physician and surgeon, chiropractor, physical therapist, psychologist, pharmacist, optician, physician assistant, midwife, osteopathic physician's assistant, nurse practitioner, or physician's trained mobile intensive care paramedic, including, in the event such person is deceased, his or her estate or personal representative;
- (2) An employee or agent of a person described in part (1) above, acting in the course and scope of his employment, including, in the event such employee or agent is deceased, his or her estate or personal representative; or

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(3) An entity, whether or not incorporated, facility, or institution employing one or more persons described in part (1) above, including, but not limited to, a hospital, clinic, health maintenance organization, or nursing home; or an officer, director, employee, or agent thereof acting in the course and scope of his or her employment, including in the event such officer, director, employee, or agent is deceased, his or her estate or personal representative.

Sec. 17. RCW 18.120.020 and 2017 c 336 s 19 are each amended to 10 read as follows:

The definitions in this section apply throughout this chapter unless the context clearly requires otherwise.

- (1) "Applicant group" includes any health professional group or organization, any individual, or any other interested party which proposes that any health professional group not presently regulated be regulated or which proposes to substantially increase the scope of practice of the profession.
- (2) "Certificate" and "certification" mean a voluntary process by which a statutory regulatory entity grants recognition to an individual who (a) has met certain prerequisite qualifications specified by that regulatory entity, and (b) may assume or use "certified" in the title or designation to perform prescribed health professional tasks.
 - (3) "Grandfather clause" means a provision in a regulatory statute applicable to practitioners actively engaged in the regulated health profession prior to the effective date of the regulatory statute which exempts the practitioners from meeting the prerequisite qualifications set forth in the regulatory statute to perform prescribed occupational tasks.
 - (4) "Health professions" means and includes the following health and health-related licensed or regulated professions and occupations: Podiatric medicine and surgery under chapter 18.22 RCW; chiropractic under chapter 18.25 RCW; dental hygiene under chapter 18.29 RCW; dentistry under chapter 18.32 RCW; denturism under chapter 18.30 RCW; dental anesthesia assistants under chapter 18.350 RCW; dispensing opticians under chapter 18.34 RCW; hearing instruments under chapter 18.35 RCW; naturopaths under chapter 18.36A RCW; embalming and funeral directing under chapter 18.39 RCW; midwifery under chapter 18.50 RCW; nursing home administration under chapter 18.52 RCW;

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1 optometry under chapters 18.53 and 18.54 RCW; ocularists under chapter 18.55 RCW; osteopathic medicine and surgery under chapters 2 18.57 and 18.57A RCW; pharmacy under chapters 18.64 and 18.64A RCW; 3 medicine under chapters 18.71 and 18.71A RCW; emergency medicine 4 under chapter 18.73 RCW; physical therapy under chapter 18.74 RCW; 5 6 practical nurses under chapter 18.79 RCW; psychologists under chapter 18.83 RCW; registered nurses under chapter 18.79 RCW; occupational 7 therapists licensed under chapter 18.59 RCW; respiratory care 8 practitioners licensed under chapter 18.89 RCW; veterinarians and 9 10 veterinary technicians under chapter 18.92 RCW; massage therapists 11 under chapter 18.108 RCW; ((East Asian)) acupuncturists or 12 acupuncture and Eastern medicine practitioners licensed under chapter 18.06 RCW; persons registered under chapter 18.19 RCW; persons 13 licensed as mental health counselors, marriage and family therapists, 14 15 and social workers under chapter 18.225 RCW; dietitians and 16 nutritionists certified by chapter 18.138 RCW; radiologic technicians 17 under chapter 18.84 RCW; nursing assistants registered or certified under chapter 18.88A RCW; reflexologists certified under chapter 18 RCW; medical assistants-certified, medical assistants-19 18.108 hemodialysis technician, medical assistants-phlebotomist, forensic 20 21 phlebotomist, and medical assistants-registered certified registered under chapter 18.360 RCW; and licensed behavior analysts, 22 23 licensed assistant behavior analysts, and certified behavior 24 technicians under chapter 18.380 RCW.

(5) "Inspection" means the periodic examination of practitioners by a state agency in order to ascertain whether the practitioners' occupation is being carried out in a fashion consistent with the public health, safety, and welfare.

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- (6) "Legislative committees of reference" means the standing legislative committees designated by the respective rules committees of the senate and house of representatives to consider proposed legislation to regulate health professions not previously regulated.
- (7) "License," "licensing," and "licensure" mean permission to engage in a health profession which would otherwise be unlawful in the state in the absence of the permission. A license is granted to those individuals who meet prerequisite qualifications to perform prescribed health professional tasks and for the use of a particular title.

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(8) "Practitioner" means an individual who (a) has achieved knowledge and skill by practice, and (b) is actively engaged in a specified health profession.

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- (9) "Professional license" means an individual, nontransferable authorization to carry on a health activity based on qualifications which include: (a) Graduation from an accredited or approved program, and (b) acceptable performance on a qualifying examination or series of examinations.
- (10) "Public member" means an individual who is not, and never was, a member of the health profession being regulated or the spouse of a member, or an individual who does not have and never has had a material financial interest in either the rendering of the health professional service being regulated or an activity directly related to the profession being regulated.
- (11) "Registration" means the formal notification which, prior to rendering services, a practitioner shall submit to a state agency setting forth the name and address of the practitioner; the location, nature and operation of the health activity to be practiced; and, if required by the regulatory entity, a description of the service to be provided.
- (12) "Regulatory entity" means any board, commission, agency, division, or other unit or subunit of state government which regulates one or more professions, occupations, industries, businesses, or other endeavors in this state.
- 25 (13) "State agency" includes every state office, department, 26 board, commission, regulatory entity, and agency of the state, and, 27 where provided by law, programs and activities involving less than 28 the full responsibility of a state agency.
- 29 **Sec. 18.** RCW 18.130.040 and 2017 c 336 s 18 are each amended to 30 read as follows:
- 31 (1) This chapter applies only to the secretary and the boards and 32 commissions having jurisdiction in relation to the professions 33 licensed under the chapters specified in this section. This chapter 34 does not apply to any business or profession not licensed under the 35 chapters specified in this section.
- 36 (2)(a) The secretary has authority under this chapter in relation 37 to the following professions:
- 38 (i) Dispensing opticians licensed and designated apprentices 39 under chapter 18.34 RCW;

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- 1 (ii) Midwives licensed under chapter 18.50 RCW;
- 2 (iii) Ocularists licensed under chapter 18.55 RCW;
- 3 (iv) Massage therapists and businesses licensed under chapter 4 18.108 RCW;
- 5 (v) Dental hygienists licensed under chapter 18.29 RCW;
- 6 (vi) ((East Asian)) Acupuncturists or acupuncture and Eastern
 7 medicine practitioners licensed under chapter 18.06 RCW;
- 8 (vii) Radiologic technologists certified and X-ray technicians 9 registered under chapter 18.84 RCW;
- 10 (viii) Respiratory care practitioners licensed under chapter 11 18.89 RCW;
- 12 (ix) Hypnotherapists and agency affiliated counselors registered 13 and advisors and counselors certified under chapter 18.19 RCW;
- 14 (x) Persons licensed as mental health counselors, mental health counselor associates, marriage and family therapists, marriage and family therapist associates, social workers, social work associates—advanced, and social work associates—independent clinical under chapter 18.225 RCW;
- 19 (xi) Persons registered as nursing pool operators under chapter 20 18.52C RCW;
- 21 (xii) Nursing assistants registered or certified or medication 22 assistants endorsed under chapter 18.88A RCW;
- 23 (xiii) Dietitians and nutritionists certified under chapter 24 18.138 RCW;
- 25 (xiv) Chemical dependency professionals and chemical dependency 26 professional trainees certified under chapter 18.205 RCW;
- 27 (xv) Sex offender treatment providers and certified affiliate sex 28 offender treatment providers certified under chapter 18.155 RCW;
- 29 (xvi) Persons licensed and certified under chapter 18.73 RCW or 30 RCW 18.71.205;
- 31 (xvii) Orthotists and prosthetists licensed under chapter 18.200 32 RCW:
- 33 (xviii) Surgical technologists registered under chapter 18.215 34 RCW;
- 35 (xix) Recreational therapists under chapter 18.230 RCW;
- 36 (xx) Animal massage therapists certified under chapter 18.240 37 RCW;
- 38 (xxi) Athletic trainers licensed under chapter 18.250 RCW;
- 39 (xxii) Home care aides certified under chapter 18.88B RCW;
- 40 (xxiii) Genetic counselors licensed under chapter 18.290 RCW;

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- 1 (xxiv) Reflexologists certified under chapter 18.108 RCW;
- 2 (xxv) Medical assistants-certified, medical assistants-
- 3 hemodialysis technician, medical assistants-phlebotomist, forensic
- 4 phlebotomist, and medical assistants-registered certified and
- 5 registered under chapter 18.360 RCW; and
- 6 (xxvi) Behavior analysts, assistant behavior analysts, and 7 behavior technicians under chapter 18.380 RCW.
- 8 (b) The boards and commissions having authority under this 9 chapter are as follows:
- 10 (i) The podiatric medical board as established in chapter 18.22 11 RCW;
- 12 (ii) The chiropractic quality assurance commission as established 13 in chapter 18.25 RCW;
- (iii) The dental quality assurance commission as established in chapter 18.32 RCW governing licenses issued under chapter 18.32 RCW, licenses and registrations issued under chapter 18.260 RCW, and certifications issued under chapter 18.350 RCW;
- 18 (iv) The board of hearing and speech as established in chapter 19 18.35 RCW;
- 20 (v) The board of examiners for nursing home administrators as 21 established in chapter 18.52 RCW;
- (vi) The optometry board as established in chapter 18.54 RCW governing licenses issued under chapter 18.53 RCW;
- (vii) The board of osteopathic medicine and surgery as established in chapter 18.57 RCW governing licenses issued under chapters 18.57 and 18.57A RCW;
- (viii) The pharmacy quality assurance commission as established in chapter 18.64 RCW governing licenses issued under chapters 18.64 and 18.64A RCW;
- (ix) The medical quality assurance commission as established in chapter 18.71 RCW governing licenses and registrations issued under chapters 18.71 and 18.71A RCW;
- 33 (x) The board of physical therapy as established in chapter 18.74 RCW;
- 35 (xi) The board of occupational therapy practice as established in 36 chapter 18.59 RCW;
- 37 (xii) The nursing care quality assurance commission as 38 established in chapter 18.79 RCW governing licenses and registrations 39 issued under that chapter;

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- 1 (xiii) The examining board of psychology and its disciplinary 2 committee as established in chapter 18.83 RCW;
- 3 (xiv) The veterinary board of governors as established in chapter 4 18.92 RCW;
- 5 (xv) The board of naturopathy established in chapter 18.36A RCW; 6 and
- 7 (xvi) The board of denturists established in chapter 18.30 RCW.
- 8 (3) In addition to the authority to discipline license holders, 9 the disciplining authority has the authority to grant or deny 10 licenses. The disciplining authority may also grant a license subject 11 to conditions.
- 12 (4) All disciplining authorities shall adopt procedures to ensure 13 substantially consistent application of this chapter, the uniform 14 disciplinary act, among the disciplining authorities listed in 15 subsection (2) of this section.
- 16 **Sec. 19.** RCW 18.250.010 and 2016 c 41 s 22 are each amended to read as follows:
- The definitions in this section apply throughout this chapter unless the context clearly requires otherwise.

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- (1) "Athlete" means a person who participates in exercise, recreation, sport, or games requiring physical strength, range-of-motion, flexibility, body awareness and control, speed, stamina, or agility, and the exercise, recreation, sports, or games are of a type conducted in association with an educational institution or professional, amateur, or recreational sports club or organization.
- (2) "Athletic injury" means an injury or condition sustained by an athlete that affects the person's participation or performance in exercise, recreation, sport, or games and the injury or condition is within the professional preparation and education of an athletic trainer.
- (3) "Athletic trainer" means a person who is licensed under this chapter. An athletic trainer can practice athletic training through the consultation, referral, or guidelines of a licensed health care provider working within their scope of practice.
- 36 (4)(a) "Athletic training" means the application of the following 37 principles and methods as provided by a licensed athletic trainer:
 - (i) Risk management and prevention of athletic injuries through preactivity screening and evaluation, educational programs, physical

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conditioning and reconditioning programs, application of commercial products, use of protective equipment, promotion of healthy behaviors, and reduction of environmental risks;

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- (ii) Recognition, evaluation, and assessment of athletic injuries by obtaining a history of the athletic injury, inspection and palpation of the injured part and associated structures, and performance of specific testing techniques related to stability and function to determine the extent of an injury;
- 9 (iii) Immediate care of athletic injuries, including emergency 10 medical situations through the application of first-aid and emergency 11 procedures and techniques for nonlife-threatening or life-threatening 12 athletic injuries;
 - (iv) Treatment, rehabilitation, and reconditioning of athletic injuries through the application of physical agents and modalities, therapeutic activities and exercise, standard reassessment techniques and procedures, commercial products, and educational programs, in accordance with guidelines established with a licensed health care provider as provided in RCW 18.250.070;
 - (v) Treatment, rehabilitation, and reconditioning of work-related injuries through the application of physical agents and modalities, therapeutic activities and exercise, standard reassessment techniques and procedures, commercial products, and educational programs, under the direct supervision of and in accordance with a plan of care for an individual worker established by a provider authorized to provide physical medicine and rehabilitation services for injured workers; and
 - (vi) Referral of an athlete to an appropriately licensed health care provider if the athletic injury requires further definitive care or the injury or condition is outside an athletic trainer's scope of practice, in accordance with RCW 18.250.070.
 - (b) "Athletic training" does not include:
 - (i) The use of spinal adjustment or manipulative mobilization of the spine and its immediate articulations;
 - (ii) Orthotic or prosthetic services with the exception of evaluation, measurement, fitting, and adjustment of temporary, prefabricated or direct-formed orthosis as defined in chapter 18.200 RCW;
- 38 (iii) The practice of occupational therapy as defined in chapter 39 18.59 RCW;

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- 1 (iv) The practice of ((East Asian)) acupuncture and Eastern 2 medicine as defined in chapter 18.06 RCW;
 - (v) Any medical diagnosis; and

- 4 (vi) Prescribing legend drugs or controlled substances, or 5 surgery.
 - (5) "Committee" means the athletic training advisory committee.
 - (6) "Department" means the department of health.
 - (7) "Licensed health care provider" means a physician, physician assistant, osteopathic physician, osteopathic physician assistant, advanced registered nurse practitioner, naturopath, physical therapist, chiropractor, dentist, massage therapist, acupuncturist, occupational therapist, or podiatric physician and surgeon.
- 13 (8) "Secretary" means the secretary of health or the secretary's designee.
- **Sec. 20.** RCW 41.05.074 and 2015 c 251 s 1 are each amended to 16 read as follows:
 - (1) A health plan offered to public employees and their covered dependents under this chapter that imposes different prior authorization standards and criteria for a covered service among tiers of contracting providers of the same licensed profession in the same health plan shall inform an enrollee which tier an individual provider or group of providers is in by posting the information on its web site in a manner accessible to both enrollees and providers.
 - (2) The health plan may not require prior authorization for an evaluation and management visit or an initial treatment visit with a contracting provider in a new episode of chiropractic, physical therapy, occupational therapy, ((East Asian)) acupuncture and Eastern medicine, massage therapy, or speech and hearing therapies. Notwithstanding RCW 48.43.515(5) this section may not be interpreted to limit the ability of a health plan to require a referral or prescription for the therapies listed in this section.
 - (3) The health care authority shall post on its web site and provide upon the request of a covered person or contracting provider any prior authorization standards, criteria, or information the health plan uses for medical necessity decisions.
 - (4) A health care provider with whom the administrator of the health plan consults regarding a decision to deny, limit, or terminate a person's covered health care services must hold a license, certification, or registration, in good standing and must be

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- in the same or related health field as the health care provider being reviewed or of a specialty whose practice entails the same or similar covered health care service.
- (5) The health plan may not require a provider to provide a discount from usual and customary rates for health care services not covered under the health plan, policy, or other agreement, to which the provider is a party.
 - (6) For purposes of this section:

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- 9 (a) "New episode of care" means treatment for a new or recurrent 10 condition for which the enrollee has not been treated by the provider 11 within the previous ninety days and is not currently undergoing any 12 active treatment.
- 13 (b) "Contracting provider" does not include providers employed 14 within an integrated delivery system operated by a carrier licensed 15 under chapter 48.44 or 48.46 RCW.
 - Sec. 21. RCW 43.70.110 and 2015 c 77 s 1 are each amended to read as follows:
 - (1) The secretary shall charge fees to the licensee for obtaining a license. Physicians regulated pursuant to chapter 18.71 RCW who reside and practice in Washington and obtain or renew a retired active license are exempt from such fees. After June 30, 1995, municipal corporations providing emergency medical care and transportation services pursuant to chapter 18.73 RCW shall be exempt from such fees, provided that such other emergency services shall only be charged for their pro rata share of the cost of licensure and inspection, if appropriate. The secretary may waive the fees when, in the discretion of the secretary, the fees would not be in the best interest of public health and safety, or when the fees would be to the financial disadvantage of the state.
 - (2) Except as provided in subsection (3) of this section, fees charged shall be based on, but shall not exceed, the cost to the department for the licensure of the activity or class of activities and may include costs of necessary inspection.
 - (3) License fees shall include amounts in addition to the cost of licensure activities in the following circumstances:
- 36 (a) For registered nurses and licensed practical nurses licensed 37 under chapter 18.79 RCW, support of a central nursing resource center 38 as provided in RCW 18.79.202;

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(b) For all health care providers licensed under RCW 18.130.040, the cost of regulatory activities for retired volunteer medical worker licensees as provided in RCW 18.130.360; and

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- (c) For physicians licensed under chapter 18.71 RCW, physician 4 assistants licensed under chapter 18.71A RCW, osteopathic physicians 5 6 licensed under chapter 18.57 RCW, osteopathic physicians' assistants licensed under chapter 18.57A RCW, naturopaths licensed under chapter 7 18.36A RCW, podiatrists licensed under chapter 18.22 8 chiropractors licensed under chapter 18.25 RCW, psychologists 9 licensed under chapter 18.83 RCW, registered nurses and licensed 10 practical nurses licensed under chapter 18.79 RCW, optometrists 11 licensed under chapter 18.53 RCW, mental health counselors licensed 12 under chapter 18.225 RCW, massage therapists licensed under chapter 13 18.108 RCW, advanced social workers licensed under chapter 18.225 14 RCW, independent clinical social workers and independent clinical 15 16 social worker associates licensed under chapter 18.225 RCW, midwives 17 licensed under chapter 18.50 RCW, marriage and family therapists and marriage and family therapist associates licensed under chapter 18 19 18.225 RCW, occupational therapists and occupational therapy assistants licensed under chapter 18.59 RCW, dietitians and 20 nutritionists certified under chapter 18.138 RCW, speech-language 21 pathologists licensed under chapter 18.35 RCW, and ((East Asian)) 22 acupuncturists or acupuncture and Eastern medicine practitioners 23 licensed under chapter 18.06 RCW, the license fees shall include up 24 25 to an additional twenty-five dollars to be transferred by the department to the University of Washington for the purposes of RCW 26 27 43.70.112.
- 28 (4) Department of health advisory committees may review fees 29 established by the secretary for licenses and comment upon the 30 appropriateness of the level of such fees.
 - Sec. 22. RCW 48.43.016 and 2018 c 193 s 1 are each amended to read as follows:
 - (1) A health carrier that imposes different prior authorization standards and criteria for a covered service among tiers of contracting providers of the same licensed profession in the same health plan shall inform an enrollee which tier an individual provider or group of providers is in by posting the information on its web site in a manner accessible to both enrollees and providers.

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- (2) A health carrier may not require prior authorization for an initial evaluation and management visit and up to six consecutive treatment visits with a contracting provider in a new episode of care of chiropractic, physical therapy, occupational therapy, ((East Asian)) acupuncture and Eastern medicine, massage therapy, or speech and hearing therapies that meet the standards of medical necessity and are subject to quantitative treatment limits of the health plan. Notwithstanding RCW 48.43.515(5) this section may not be interpreted to limit the ability of a health plan to require a referral or prescription for the therapies listed in this section.
- (3) A health carrier shall post on its web site and provide upon the request of a covered person or contracting provider any prior authorization standards, criteria, or information the carrier uses for medical necessity decisions.
- (4) A health care provider with whom a health carrier consults regarding a decision to deny, limit, or terminate a person's covered health care services must hold a license, certification, or registration, in good standing and must be in the same or related health field as the health care provider being reviewed or of a specialty whose practice entails the same or similar covered health care service.
- (5) A health carrier may not require a provider to provide a discount from usual and customary rates for health care services not covered under a health plan, policy, or other agreement, to which the provider is a party.
 - (6) For purposes of this section:

- (a) "New episode of care" means treatment for a new or recurrent condition for which the enrollee has not been treated by the provider within the previous ninety days and is not currently undergoing any active treatment.
- 31 (b) "Contracting provider" does not include providers employed 32 within an integrated delivery system operated by a carrier licensed 33 under chapter 48.44 or 48.46 RCW.
- **Sec. 23.** RCW 69.41.010 and 2016 c 148 s 10 and 2016 c 97 s 2 are 35 each reenacted and amended to read as follows:
- As used in this chapter, the following terms have the meanings indicated unless the context clearly requires otherwise:

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- 1 (1) "Administer" means the direct application of a legend drug 2 whether by injection, inhalation, ingestion, or any other means, to 3 the body of a patient or research subject by:
 - (a) A practitioner; or

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- 5 (b) The patient or research subject at the direction of the 6 practitioner.
 - (2) "Commission" means the pharmacy quality assurance commission.
- 8 (3) "Community-based care settings" include: Community
 9 residential programs for persons with developmental disabilities,
 10 certified by the department of social and health services under
 11 chapter 71A.12 RCW; adult family homes licensed under chapter 70.128
 12 RCW; and assisted living facilities licensed under chapter 18.20 RCW.
 13 Community-based care settings do not include acute care or skilled
 14 nursing facilities.
- 15 (4) "Deliver" or "delivery" means the actual, constructive, or 16 attempted transfer from one person to another of a legend drug, 17 whether or not there is an agency relationship.
 - (5) "Department" means the department of health.
 - (6) "Dispense" means the interpretation of a prescription or order for a legend drug and, pursuant to that prescription or order, the proper selection, measuring, compounding, labeling, or packaging necessary to prepare that prescription or order for delivery.
 - (7) "Dispenser" means a practitioner who dispenses.
 - (8) "Distribute" means to deliver other than by administering or dispensing a legend drug.
 - (9) "Distributor" means a person who distributes.
- 27 (10) "Drug" means:
 - (a) Substances recognized as drugs in the official United States pharmacopoeia, official homeopathic pharmacopoeia of the United States, or official national formulary, or any supplement to any of them;
- 32 (b) Substances intended for use in the diagnosis, cure, 33 mitigation, treatment, or prevention of disease in human beings or 34 animals;
- 35 (c) Substances (other than food, minerals or vitamins) intended 36 to affect the structure or any function of the body of human beings 37 or animals; and
- 38 (d) Substances intended for use as a component of any article 39 specified in (a), (b), or (c) of this subsection. It does not include 40 devices or their components, parts, or accessories.

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- (11) "Electronic communication of prescription information" means the transmission of a prescription or refill authorization for a drug of a practitioner using computer systems. The term does not include a prescription or refill authorization transmitted verbally by telephone nor a facsimile manually signed by the practitioner.
- (12) "In-home care settings" include an individual's place of temporary and permanent residence, but does not include acute care or skilled nursing facilities, and does not include community-based care settings.
- (13) "Legend drugs" means any drugs which are required by state law or regulation of the pharmacy quality assurance commission to be dispensed on prescription only or are restricted to use by practitioners only.
- (14) "Legible prescription" means a prescription or medication order issued by a practitioner that is capable of being read and understood by the pharmacist filling the prescription or the nurse or other practitioner implementing the medication order. A prescription must be hand printed, typewritten, or electronically generated.
- (15) "Medication assistance" means assistance rendered by a nonpractitioner to an individual residing in a community-based care setting or in-home care setting to facilitate the individual's self-administration of a legend drug or controlled substance. It includes reminding or coaching the individual, handing the medication container to the individual, opening the individual's medication container, using an enabler, or placing the medication in the individual's hand, and such other means of medication assistance as defined by rule adopted by the department. A nonpractitioner may help in the preparation of legend drugs or controlled substances for self-administration where a practitioner has determined and communicated orally or by written direction that such medication preparation assistance is necessary and appropriate. Medication assistance shall not include assistance with intravenous medications or injectable medications, except prefilled insulin syringes.
- (16) "Person" means individual, corporation, government or governmental subdivision or agency, business trust, estate, trust, partnership or association, or any other legal entity.
 - (17) "Practitioner" means:

(a) A physician under chapter 18.71 RCW, an osteopathic physician or an osteopathic physician and surgeon under chapter 18.57 RCW, a dentist under chapter 18.32 RCW, a podiatric physician and surgeon

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- under chapter 18.22 RCW, an ((East Asian)) acupuncturist or 1 <u>acupuncture</u> and <u>Eastern</u> medicine practitioner to the extent 2 authorized under chapter 18.06 RCW and the rules adopted under RCW 3 18.06.010(1)(j), a veterinarian under chapter 18.92 RCW, a registered 4 nurse, advanced registered nurse practitioner, or licensed practical 5 6 nurse under chapter 18.79 RCW, an optometrist under chapter 18.53 RCW who is certified by the optometry board under RCW 18.53.010, an 7 osteopathic physician assistant under chapter 18.57A RCW, a physician 8 assistant under chapter 18.71A RCW, a naturopath licensed under 9 chapter 18.36A RCW, a pharmacist under chapter 18.64 RCW, or, when 10 11 acting under the required supervision of a dentist licensed under 12 chapter 18.32 RCW, a dental hygienist licensed under chapter 18.29 13 RCW;
- 14 (b) A pharmacy, hospital, or other institution licensed, 15 registered, or otherwise permitted to distribute, dispense, conduct 16 research with respect to, or to administer a legend drug in the 17 course of professional practice or research in this state; and
- 18 (c) A physician licensed to practice medicine and surgery or a 19 physician licensed to practice osteopathic medicine and surgery in 20 any state, or province of Canada, which shares a common border with 21 the state of Washington.
- 22 (18) "Secretary" means the secretary of health or the secretary's designee.
- NEW SECTION. Sec. 24. The following acts or parts of acts are each repealed:
- 26 (1) RCW 18.06.070 (Approval of applications—Examination fee) and 27 1991 c 3 s 9 & 1985 c 326 s 7;
- 28 (2) RCW 18.06.180 (Application of chapter to previously 29 registered acupuncture assistants) and 1991 c 3 s 17 & 1985 c 326 s 30 18; and
- 31 (3) RCW 18.06.005 (Intent—2010 c 286) and 2010 c 286 s 1.

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