Link to Washington State Legislature Bill Information 2023

January 9, 2023 – First day of session. February 17, 2023 – Policy Committee Cutoff. February 24, 2023 – Fiscal Committee Cutoff. March 8, 2023 – House of Origin Cutoff. March 29, 2023 – Policy Committee Cutoff – Opposite House. April 4, 2023 – Fiscal Committee Cutoff – Opposite House.
April 12, 2023 – Opposite House Cutoff.
April 23, 2023 – Sine die. Last day allowed for regular session under state constitution. Next cutoff

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Bills That Merit Active Involvement/Input			
Bill # /Companion	Short Title	Brief Description	Committee Action (subject to change)
<u>SB 5768</u>	Protecting access to abortion medications	The stated purpose of this bill is to "promote access to affordable, high quality sexual and reproductive health care, including abortion care, without unnecessary burdens or restrictions on patients or providers." Section 2 of the bill adds a new section to chapter 72.09 RCW to allow the Department of Corrections to "acquire, receive, possess, sell, resell, deliver, dispense, distribute, and engage in any activity constituting the practice of pharmacy or wholesale distribution with respect to abortion medications." The bill contains an emergency clause and would take effect immediately upon passage.	SB 5768 Sponsors: Senators Keiser, Dhingra, Cleveland, Frame, Hunt, Kuderer, Lovelett, Nobles, Pedersen, Randall, Robinson, Stanford, Trudeau, Valdez, Wellman, and C. Wilson Introduced (Senate): 4/5/2023, referred to Senate Ways & Means Committee Public hearing (Senate): 4/10/2023 Executive session (Senate): 4/12/2023, passed through committee by majority vote.
<u>SHB 1275</u>	Athletic trainers scope-of-practice	Subsection 2(1) of the original bill amended RCW 18.250.110 to clarify current medication laws by allowing athletic trainers to purchase, store, and administer medications <u>in accordance with their pharmacological education</u> <u>and training</u> . Previous legislation inadvertently limited athletic trainers to specific over-the-counter topical medications. This language removes this unnecessary limitation. The substitute versions of both bills remove the previously proposed amendment language and creates a new section to specify in Section 2, subsection (1)(b) that athletic trainers able to purchase, store, and administer medications are those who "completed accredited training programs on pharmacology and medication administration."	SHB 1275 Sponsors: Representatives Thai, Harris, and Riccelli Introduced (Senate): 3/9/2023, referred to Senate Health & Long Term Care Committee Public hearing (Senate): 3/16/2023 Executive session (Senate): 3/21/2023, passed through committee by majority vote. Passed to Rules Committee for second reading (3/22). Placed on second reading (3/30).

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		The bill also adds language clarifying the definitions for "athlete," "athletic injury," and "athletic trainer" under RCW 18.25.010 to align with other states and national organizations.		
<u>2SSB 5536</u>	Concerning controlled substances, counterfeit substances, and legend drug possession	This bill amends sections in chapters 69.50 RCW, 9.96 RCW, 36.70A RCW, and 71.24.590, and adds new sections to chapters 69.50 RCW, 71.24 RCW, and 43.330 RCW relating to justice system and behavioral health responses for persons "experiencing circumstances" involving controlled substances, counterfeit substances, legend drugs, and drug paraphernalia. The term "knowingly" is added to actions around the aforementioned substances and language is included in the first four sections to divert criminal justice actions to behavioral treatment options. Section 10 of the bill requires the department to adopt rules by December 31, 2023 to allow substance use disorder treatment programs to establish off-site medication units (free- standing, collocated in a community setting such as a hospital, or a mobile medication unit). These units are classified as essential public facilities in Section 11. Floor amendment <u>5536-S2.E AMH ENGR H1919.E</u> was adopted on the floor of the House prior to final passage. The adopted amendment adjusts RCW 18.64.600 regarding the license of location for remote dispensing sites. The first subsection is amended to expand the purpose to "the treatment of opioid use disorder or its symptoms." The third subsection is expanded to allow dispensing technologies to be owned either by the pharmacy or the registered remote dispensing site.	SB 5536 Sponsors: Senators Robinson, Lovick, Rolfes, Mullet, Dhingra, Billig, Hasegawa, Keiser, Kuderer, Liias, Lovelett, Nobles, Randall, Stanford, Wellman, and C. Wilson. Executive action (House Appropriations): 4/4/2023, passed through committee by majority vote. Referred to Rules 2 Review. Floor vote (House): 4/11/2023, amendment adopted and engrossed bill passed through chamber by majority vote (54/41/0/3).	
<u>SSB 5389</u>	Optometry scope- of-practice	This is a scope-of-practice bill for optometry updated from last year's version (SHB 5542). The bill amends RCW 18.53.010 expanding the optometrist scope of practice to include limited, but mostly undefined, ophthalmic surgical procedures and injections. The bill also adds drug prescribing and administering rights. The expanded scope is further defined through a list of prohibited ophthalmic surgical procedures. The board must adopt rules (sole authority) to define authorized procedures, additional drug privileges and guidelines, and required education, training and testing to ensure optometrists are gualified to practice under the expanded scope.	SSB 5389 Sponsors: Senators Cleveland, Rivers, Robinson, Van De Wege, Conway, Holy, Schoesler, Wilson, L. Lovick, Randall, Wilson, C. Second executive session (House): 3/29/2023, passed through committee with amendments by majority vote. Referred to Rules 2 Review.	

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			<i>Floor vote (House)</i> : 4/10/2023, passed through chamber by majority vote (81/15/0/2).
<u>2SSB 5263</u>	Psilocybin services	The substitute version of 5263 reworked much of the bill language, removing provisions related to establishing a two-year program development period; psilocybin licenses; psilocybin sessions; creating a psilocybin control and regulation account; authority of local jurisdictions to regulate psilocybin; testing, tracking, labeling, packaging, and dosing psilocybin products; and creating a social opportunity program. Sections 7 and 8 of the substitute establish other advisory workgroups along with the one already described in Section 6. Two of the boards have seats reserved for an individual with expertise in psychopharmacology, but otherwise the language remains exempting the pharmacy commission from jurisdictional responsibility. The second substitute bill further edits down the bill language to focus on the workgroups and advisory committees. The aforementioned exemption of the commission from jurisdictional responsibility remains intact.	SB 5263 Sponsors: Senators Salomon, Rivers, Saldaña, Nobles, Lovick, Lovelett, Hunt, Hasegawa, Mullet, Trudeau, Robinson, Pedersen, Wellman, Muzzall, C. Wilson, Kuderer, Keiser, Liias, Van De Wege, and Frame Executive session (House Appropriations): 4/4/2023, passed through committee with amendments by majority vote. Referred to Rules 2 Review. Placed on second reading (4/10). Floor vote (House): 4/11/2023, passed through chamber by majority vote (87/10/0/1).
<u>2SSB 5120</u>	23-hour crisis receiving centers	 This bill would establish 23-hour crisis receiving centers (CRCs) in Washington State. The purpose of CRCs is to address the mental and physical health needs of people in crisis. CRC is defined in RCW 71.24.025 per Section 1, and Section 2 describes the various roles that a CRC would fulfill, including but not limited to: Offering walk-in options and drop-off options for first responders, provide services to address mental health and substance use crisis issues, screen all individuals for suicide risk and violence risk, etc. Of interest to the commission is that CRCs are eligible to obtain an HCE license, which would have some effect on licensure management and inspection practices. The substitute version of the bill specifies that the service is only for adults and establishes record-keeping requirements for facilities to track declined 	SB 5120 Sponsors: Senators Dhingra and Wagoner Executive action (House Appropriations): 4/3/2023, passed through committee by majority vote. Referred to Rules 2 Review (4/4). Placed on second reading (4/6). Floor vote (House): 4/7/2023, passed through chamber by majority vote (97/0/0/1).

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		admissions (making the information available to the department). SSB 5120 also requires a prescriber for the facility and the ability to dispense medications.	
<u>ESB 5022</u>	Exempting fentanyl testing equipment from the definition of drug paraphernalia.	The purpose of this bill is to remove fentanyl testing equipment from the definition of drug paraphernalia in RCW 69.50.102. The engrossed version of the bill was created following the acceptance of a floor amendment during the Senate floor debate. ESB 5022 adds a class I civil infraction penalty for the sale or purchase of drug paraphernalia, but exempts all injection syringes and testing equipment from this penalty provided they are sold or purchased in a public health or community-based HIV prevention program, or at a pharmacy.	<u>SB 5022</u> Sponsors: Senators Muzzall and Cleveland Executive session (House): 3/27/2023, passed by majority vote w/ amendments. Referred to Rules 2 Review (3/29). Placed on second reading (4/10).
<u>SHB 1678</u>	Dental therapy	The bill creates dental therapists as a new profession under Title 18 RCW. Discipline would be under the authority of the Dental Quality Assurance Commission. Approval of licensing examinations would be the responsibility of the Dental Hygiene Examining Committee. A dental therapist must practice under the supervision of a dentist and with a written practice plan contract which must be filed with the Department of Health. The bill details the scope of practice, and restricts the practice settings for dental therapists, along with requirements for supervision and a practice plan contract with a supervising dentist. The substitute version of the bill authorizes dentists exempt from licensure under the Indian Health Care Improvement Act to supervise dental therapists. The bill also modifies certain education requirements and allow practices, and removes dental therapists from the list of authorized prescribers in RCW 69.41.030.	HB 1678 Sponsors: Representatives Riccelli, Lekanoff, Stonier, Morgan, Bateman, Macri, Ormsby, Slatter, Entenman, Ramos, Peterson, Tharinger, Chopp, Ryu, Pollet, Davis, Harris, Taylor, Simmons, Kloba, and Gregerson Executive session (Senate): 3/23/2023, passed by majority vote. Referred to Rules Committee for second reading (3/24). Placed on second reading (4/4). Floor vote (Senate): 4/11/2023, passed through chamber by majority vote (30/19/0/0).
<u>2SHB 1009</u>	Military spouse employment	The Military Spouse Employment Act creates occupational flexibility for military spouses, 34 to 50 percent of whom work in fields requiring a professional license. RCW 180.340.020 is amended to streamline the process by which licensing authorities may expedite the issuance of a license to a qualified applicant who is also a military spouse.	HB 1009 Sponsors: Representatives Leavitt, Barkis, Ryu, Paul, Donaghy, Slatter, Simmons, Low, Volz, Schmidt, Christian Lekanoff, Griffey, Doglio, Robertson, Orwall, Caldier, Reeves, Bronoske, Bergquist, Shavers, Riccelli, and Ormsby

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		 Section 5 of the bill also mandates training for each board or commission member on "the culture of military spouses, the military spouse experience, and issues related to military spouse career paths." Boards and commissions are encouraged to appoint a military spouse to serve on its licensing board or commission. The bill would also create a military spouse assistance web page (Section 6), require the department to develop a campaign with local business associations and chambers of commerce to increase military spouse employment (Section 8), and allow military spouses to terminate their own employment more easily in cases of a permanent change of station for their spouse (Section 9). 	Executive action (Senate Ways & Means): 4/3/2023, passed through committee by majority vote. Passed to Rules Committee for second reading (4/4). Placed on second reading (4/5). Floor vote (Senate): 4/10/2023, passed through chamber by majority vote (49/0/0/0).	
		The substitute version added definitions for completed applications and elaborated on penalties incurred. SHB 1009 also included a date of October 1, 2023 for the bill to "take effect."		

Additional Bills to Watch (Not in PQAC Jurisdiction)			
Bill # /Companion	Short Title	Committee Action (subject to change)	
<u>2SHB 1452</u>	State Medical Reserve Corps Act	HB 1452 Sponsors: Representatives Timmons and Harris Public hearing (Senate Ways & Means): 3/23/2023 Executive action (Senate Ways & Means): 4/3/2023, passed through committee by majority vote. Passed to Rules Committee for second reading (4/4). Placed on second reading (4/11).	
<u>SHB 1547</u>	Out-of-state providers	HB 1547 Sponsors: Representatives Caldier, Christian, Volz, Eslick, Hutchins, and Graham Executive session (Senate): 3/21/2023, no action taken. Second executive session (Senate): 3/23/2023, passed by majority vote. Passed to Rules Committee for second reading (3/24).	
<u>SSB 5179</u>	Death with Dignity Act	<u>SB 5179</u> <i>Sponsors</i> : Senators Pedersen, King, Cleveland, Dhingra, Frame, Hunt, Keiser, Kuderer, Liias, Lovelett, Lovick, Mullet, Nobles, Robinson, Saldaña, Stanford, Valdez, Van De Wege, Wellman, and C. Wilson	

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		<i>Floor vote (House)</i> : 3/24/2023, passed through chamber by majority vote (53/43/0/2) . <i>Executive signatures</i> : President of the Senate (3/29), Speaker of the House (3/29). Delivered to the Governor (3/31). <i>Signed by Governor</i> : 4/6/2023 (effective date: 7/23/2023)		
<u>E2SSB 5367</u>	Regulation of products with THC	<u>SB 5367</u> Sponsors: Senators Robinson, Schoesler, Conway, Dozier, Keiser, Saldaña, and Wellman, by request of the Liquor and Cannabis Board Executive action (House Appropriations): 4/3/2023, passed through committee by majority vote. Referred to Rules 2 Review (4/4). Placed on second reading (4/6). Floor vote (House): 4/7/2023, majority votes to pass (93/3/0/2). Third reading reconsidered and majority votes to pass on reconsidered vote (90/6/0/2).		

Dead/dormant	Dead/dormant Bills (relevant if needed to pass the budget)		
Bill # /Companion	Short Title	Bill Summary	
<u>HB 1006</u>	Expanding access to drug testing equipment.	Division tracked/non-jurisdictional	
<u>HB 1041</u>	Prescriptive authority of psychologists.	Due to an identified "lack of prescribers comfortable with prescribing psychiatric medications to support the behavioral health needs of the state," this bill authorizes successfully credentialed psychologists to prescribe psychotropic medications.	
		Section 2 of the bill revises and adds numerous definitions to the RCW 18.83.010 to accommodate the proposed action while Sections 3 and 4 create and grant prescriptive authority to credentialed psychologists in statute.	
		Of note to the commission is Section 6(6) which requires the examining board of psychology to transmit a list of prescribing psychologists and update or modify the list as necessary going forward.	
<u>HB 1269</u>	Prescription drug affordability board	Division tracked/non-jurisdictional	
<u>HB 1434</u>	Uniform Facilities Enforcement Framework	Companion bill to SB 5271	

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<u>HB 1546</u>	Good Faith Pain Act	This bill establishes protections for various health care professions "acting in good faith" in prescribing or dispensing opioid drugs "for legitimate medical purposes in the course of professional practice." The covered professions include pharmacists, dentists, physicians, physician assistants, advanced registered nurse practitioners, podiatric physicians and surgeons, and osteopathic physicians and surgeons.	
<u>HB 1665</u>	Pharmacist scope- of-practice and drug therapy	This bill amends RCW 18.64.011 and adds a new section to chapter 18.64 RCW expanding the scope-of-practice for licensed pharmacists to initiate treatment for certain health conditions without the need for a collaborative drug therapy agreement (CDTA) or other written protocol and order and interpret CLIA-waived tests without a drug therapy and diagnosis.	
		Section 1 of the bill amends RCW 18.64.011(28) to expand the definition for "Practice of pharmacy" to include the responsibility for "ordering, administering, reviewing, or interpreting" tests for certain health conditions approved by the FDA and waived under CLIA without a CDTA or a drug therapy and diagnosis. The definition is further expanded to allow pharmacists to initiate or modify drug therapy for certain health conditions without a CDTA. Drug therapy must be initiated or modified in accordance with written guidelines, protocols, or a CDTA if the health condition being treated is <i>not</i> described in Section 2 of the bill.	
		Section 2 defines a health condition as "typically a short-term health condition that is generally managed with noncontrolled drug therapies, minimal treatment, or self-care." Pharmacists may use any waiver-qualifying test—per Medicare and Medicaid guidelines—to guide clinical decision making and may delegate the administering of those tests in Section 2 to an intern or pharmacy technician acting under their supervision.	
<u>SB 5035</u>	Amending drug possession classifications.	Division tracked / non-jurisdictional	
<u>SSB 5271</u>	Uniform Facilities Enforcement Framework	This legislation extends the enforcement tools enacted in 2020 and 2021 for psychiatric and acute care hospitals to all facilities the department regulates. Our current enforcement options for most facilities are limited to denying, suspending, or revoking a license. This bill adds:	
		• Immediate enforcement tools, such as stop placement, limited stop placement, limited stop service, and reasonable conditions, to address violations that constitute immediate jeopardy, including when a facility refuses to comply with an investigation. Immediate jeopardy is defined as a situation in which the facility has placed patients in its care at risk for serious injury, serious impairment, or death.	
		• Intermediate tools to address repeat violations to bring facilities into compliance with regulations. These tools, including reasonable conditions and civil fines, are intended to be used after the department's initial informal	

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		process of issuing a statement of deficiencies and a facilities' plan of correction fail to ensure the violation does not occur again.
		The legislation also ensures the authority to issue cease and desist orders and injunctions for unlicensed operation of a facility is consistent for all facilities the department regulates.
<u>SSB 5308</u>	Athletic trainers scope-of-practice	Companion bill to SHB 1275
<u>SB 5411</u>	Naturopaths scope-of-practice	The bill expands the prescriptive authority for naturopathic physicians to include all legend drugs and controlled substances in schedule II, III, IV, and V of the uniformed controlled substances act. Licensees who desire to prescribe these medications must complete education and training requirements established by the Board of Naturopathy and register with the prescription monitoring program. The bill also updates other drug statutes by adding naturopathic physicians.
		The bill changes the references of "naturopaths" to "naturopathic physicians". It permits a naturopath to sign and attest to any certificates, cards, forms, or other required documentation that a physician may sign, so long as it is within the naturopathic physician's scope of practice. These changes support increasing primary care service availability.
<u>SB 5467</u>	Treatment for possession of certain counterfeit drugs or controlled substances	Division tracked / non-jurisdictional
<u>SSB 5481</u>	Uniform Telemedicine Act	This bill proposes the creation of a new section or sections of statute for the purpose of allowing health care practitioners to provide telemedicine services to patients. Providers using telemedicine services must comply with health care practices regulated by state and federal law and in compliance with professional practice standards applicable to the health care practitioner.
		SB 5481 also allows for the registration of out-of-state health care practitioners by relevant disciplining authorities listed under RCW 18.130.040. Out-of-state practitioners must complete a form provided by the disciplining authority to register under the proposed statutory language. Section 7 of the bill establishes qualifying requirements such as active license status, five years without any disciplinary action taken, and registration fees. Following sections outline the conditions by which disciplinary actions may be taken (Section 8), reporting requirements by the practitioner to the disciplinary authority (Section 9), and venue restrictions for practitioners providing telemedicine services (Section 10).

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<u>SB 5624</u>	Substance use recovery services advisory committee recommendations	 SB 5624 focuses on the Substance Use and Recovery Services Advisory Committee (SURSAC) and the language of the bill proposes implementing committee recommendations such as: Decriminalization of possession of a personal amount of counterfeit substance, controlled substance, or legend drug for persons 21+ Provides legal advocacy for parents affected by behavioral health issues in dependency and child custody cases. Funds, promotes and establishes training for recovery residences Establishes health engagement hubs HCA must provide grants to supportive programs that help persons with SUD with employment. Establishes a statewide directory of recovery services Intends to fund crisis stabilization units, mobile crisis response, recovery navigator programs, and law enforcement assisted diversion. Establishes a HCA workgroup to streamline SUD treatment intakes/ assessments with goal to broaden workforce capable of conducting intakes. Establishes a safe-supply workgroup with members appointed by the governor. 	
<u>SB 5685</u>	Creating the profession of dental therapy	The bill creates dental therapists as a new profession under Title 18 RCW. Discipline would be under the authority of the Dental Quality Assurance Commission. Approval of licensing examinations would be the responsibility of the Dental Hygiene Examining Committee. A dental therapist must practice under the supervision of a dentist and with a written practice plan contract which must be filed with the Department of Health.	