

[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)
SB 5768	Protecting access to abortion medications	<p>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.”</p> <p>The bill contains an emergency clause and would take effect immediately upon passage.</p>	<p>SB 5768 <i>Sponsors:</i> Senators Keiser, Dhingra, Cleveland, Frame, Hunt, Kuderer, Lovelett, Nobles, Pedersen, Randall, Robinson, Stanford, Trudeau, Valdez, Wellman, and C. Wilson <i>Introduced (Senate):</i> 4/5/2023, referred to Senate Ways & Means Committee <i>Public hearing (Senate):</i> 4/10/2023 <i>Executive session (Senate):</i> 4/12/2023, passed through committee by majority vote. Passed to and placed on second reading by the Rules Committee (4/13). <i>Floor vote (Senate):</i> 4/14/2023, passed through chamber by majority vote (28/18/0/3). <i>Public hearing (House Appropriations):</i> 4/18/2023 <i>Executive session (House Appropriations):</i> 4/19/2023</p>
SHB 1275	Athletic trainers scope-of-practice	<p>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 and training</u>. Previous legislation inadvertently limited athletic trainers to specific over-the-counter topical medications. This language removes this unnecessary limitation.</p>	<p>SHB 1275 <i>Sponsors:</i> Representatives Thai, Harris, and Riccelli <i>Introduced (Senate):</i> 3/9/2023, referred to Senate Health & Long Term Care Committee</p>

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		<p>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.”</p> <p>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.</p>	<p><i>Public hearing (Senate): 3/16/2023</i> <i>Executive session (Senate): 3/21/2023,</i> passed through committee by majority vote. Passed to Rules Committee for second reading (3/22). Placed on second reading (3/30). <i>Floor vote (Senate): 4/6/2023,</i> passed through chamber by majority vote (48/0/0/1). <i>Final signatures: 4/7/2023 (House Speaker), 4/8/2023 (Senate President).</i> Delivered to Governor (4/14).</p>
2SSB 5536	Concerning controlled substances, counterfeit substances, and legend drug possession	<p>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.</p> <p>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.</p> <p>Floor amendment 5536-S2.E AMH ENGR H1919.E 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.</p>	<p>SB 5536 <i>Sponsors:</i> Senators Robinson, Lovick, Rolfes, Mullet, Dhingra, Billig, Hasegawa, Keiser, Kuderer, Liias, Lovelett, Nobles, Randall, Stanford, Wellman, and C. Wilson. <i>Executive action (House Appropriations): 4/4/2023,</i> passed through committee by majority vote. Referred to Rules 2 Review. <i>Floor vote (House): 4/11/2023,</i> amendment adopted and engrossed bill passed through chamber by majority vote (54/41/0/3).</p>

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Bill # /Companion	Short Title	Brief Description	Committee Action (subject to change)
SSB 5389	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 qualified to practice under the expanded scope.	SSB 5389 <i>Sponsors:</i> Senators Cleveland, Rivers, Robinson, Van De Wege, Conway, Holy, Schoesler, Wilson, L. Lovick, Randall, Wilson, C. <i>Second executive session (House):</i> 3/29/2023, passed through committee with amendments by majority vote. Referred to Rules 2 Review. <i>Floor vote (House):</i> 4/10/2023, passed through chamber by majority vote (81/15/0/2). <i>Senate concurrence:</i> 4/18/2023, House amendments concurred by majority vote (47/1/0/1).
2SSB 5263	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 <i>Sponsors:</i> 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 <i>Floor vote (House):</i> 4/11/2023, passed through chamber by majority vote (87/10/0/1). <i>Senate concurrence:</i> 4/14/2023, House amendments concurred by majority vote (40/4/0/5). <i>Final signatures:</i> 4/18/2023 (Senate President).
2SSB 5120	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.	SB 5120 <i>Sponsors:</i> Senators Dhingra and Wagoner

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		<p>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.</p> <p>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.</p> <p>The substitute version of the bill specifies that the service is only for adults and establishes record-keeping requirements for facilities to track declined admissions (making the information available to the department). SSB 5120 also requires a prescriber for the facility and the ability to dispense medications.</p>	<p><i>Executive action (House Appropriations): 4/3/2023, passed through committee by majority vote.</i> Referred to Rules 2 Review (4/4). Placed on second reading (4/6). <i>Floor vote (House): 4/7/2023, passed through chamber by majority vote (97/0/0/1).</i> <i>Senate concurrence: 4/13/2023, Senate refuses to concur House amendments and asks House to recede from amendments.</i></p>
ESB 5022	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.	<p><u>SB 5022</u> <i>Sponsors:</i> Senators Muzzall and Cleveland <i>Executive session (House): 3/27/2023, passed by majority vote w/ amendments.</i> Referred to Rules 2 Review (3/29). Placed on second reading (4/10).</p>
SHB 1678	Dental therapy	<p>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.</p> <p>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.</p>	<p><u>HB 1678</u> <i>Sponsors:</i> Representatives Riccelli, Lekanoff, Stonier, Morgan, Bateman, Macri, Ormsby, Slatter, Entenman, Ramos, Peterson, Tharinger, Chopp, Ryu, Pollet, Davis, Harris, Taylor, Simmons, Kloba, and Gregerson <i>Executive session (Senate): 3/23/2023, passed by majority vote.</i> Referred to Rules Committee for second reading (3/24). Placed on second reading (4/4).</p>

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		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.	<i>Floor vote (Senate): 4/11/2023, passed through chamber by majority vote (30/19/0/0).</i> <i>Final signatures: 4/14/2023 (House Speaker), 4/18/2023 (Senate President)</i>
2SHB 1009	Military spouse employment	<p>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.</p> <p>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.</p> <p>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).</p> <p>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.”</p>	<p>HB 1009 <i>Sponsors:</i> 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 <i>Executive action (Senate Ways & Means): 4/3/2023, passed through committee by majority vote.</i> Passed to Rules Committee for second reading (4/4). Placed on second reading (4/5). <i>Floor vote (Senate): 4/10/2023, passed through chamber by majority vote (49/0/0/0).</i> <i>House concurrence: 4/13/2023, Senate amendments concurred by majority vote (97/0/0/1).</i> <i>Final signatures: 4/14/2023 (House Speaker), 4/18/2023 (Senate President). Delivered to Governor (4/18).</i></p>

Additional Bills to Watch (Not in PQAC Jurisdiction)			
Bill # /Companion	Short Title		Committee Action (subject to change)
2SHB 1452	State Medical Reserve Corps Act	HB 1452	<i>Sponsors:</i> Representatives Timmons and Harris <i>Public hearing (Senate Ways & Means): 3/23/2023</i>

Additional Bills to Watch (Not in PQAC Jurisdiction)		
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		<i>Executive action (Senate Ways & Means):</i> 4/3/2023, passed through committee by majority vote . Passed to Rules Committee for second reading (4/4). Placed on second reading (4/11). <i>Floor vote (Senate):</i> 4/12/2023, passed through chamber by majority vote (48/0/0/1) . <i>Final signatures:</i> 4/14/2023 (House Speaker), 4/17/2023 (Senate President). Delivered to Governor (4/18).
SSB 5179	Death with Dignity Act	SB 5179 <i>Sponsors:</i> Senators Pedersen, King, Cleveland, Dhingra, Frame, Hunt, Keiser, Kuderer, Lias, Lovelett, Lovick, Mullet, Nobles, Robinson, Saldaña, Stanford, Valdez, Van De Wege, Wellman, and C. Wilson <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)
E2SSB 5367	Regulation of products with THC	SB 5367 <i>Sponsors:</i> Senators Robinson, Schoesler, Conway, Dozier, Keiser, Saldaña, and Wellman, by request of the Liquor and Cannabis Board <i>Executive action (House Appropriations):</i> 4/3/2023, passed through committee by majority vote . Referred to Rules 2 Review (4/4). Placed on second reading (4/6). <i>Floor vote (House):</i> 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) . <i>Senate concurrence:</i> 4/17/2023, House amendments concurred by majority vote (47/1/0/1) .

Dead/dormant Bills (relevant if needed to pass the budget)		
Bill # /Companion	Short Title	Bill Summary
HB 1006	Expanding access to drug testing equipment.	Division tracked/non-jurisdictional
HB 1041	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.

Dead/dormant Bills (relevant if needed to pass the budget)		
Bill # /Companion	Short Title	Bill Summary
		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.
HB 1269	Prescription drug affordability board	Division tracked/non-jurisdictional
HB 1434	Uniform Facilities Enforcement Framework	Companion bill to SB 5271
HB 1546	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.
SHB 1547	Out-of-state providers	Division tracked/non-jurisdictional
HB 1665	Pharmacist scope-of-practice and drug therapy	<p>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.</p> <p>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.</p> <p>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.</p>
SB 5035	Amending drug possession classifications.	Division tracked / non-jurisdictional

Dead/dormant Bills (relevant if needed to pass the budget)		
Bill # /Companion	Short Title	Bill Summary
SSB 5271	Uniform Facilities Enforcement Framework	<p>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:</p> <ul style="list-style-type: none"> • 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 process of issuing a statement of deficiencies and a facilities’ plan of correction fail to ensure the violation does not occur again. <p>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.</p>
SSB 5308	Athletic trainers scope-of-practice	Companion bill to SHB 1275
SB 5411	Naturopaths scope-of-practice	<p>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.</p> <p>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.</p>
SB 5467	Treatment for possession of certain counterfeit drugs or controlled substances	Division tracked / non-jurisdictional

Dead/dormant Bills (relevant if needed to pass the budget)		
Bill # /Companion	Short Title	Bill Summary
SSB 5481	Uniform Telemedicine Act	<p>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.</p> <p>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).</p>
SB 5624	Substance use recovery services advisory committee recommendations	<p>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:</p> <ul style="list-style-type: none"> • 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. <p>Explicitly adds OTPs to the list of essential public facilities</p>
SB 5685	Creating the profession of dental therapy	<p>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.</p>