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RULE-MAKING ORDER EMERGENCY RULE ONLY

CR-103E (December 2017) (Implements RCW 34.05.350 and 34.05.360)

OFFICE OF THE CODE REVISER STATE OF WASHINGTON FILED

DATE: January 13, 2025 TIME: 5:52 AM

WSR 25-03-056

Agency: Department of Health							
Effective date of rule:							
Emergency Rules							
Immediately upon filing.							

□ Later (specify)

Any other findings required by other provisions of law as precondition to adoption or effectiveness of rule?

 \Box Yes \boxtimes No If Yes, explain:

Purpose: In accordance with Directive of the Governor 25-01, the Department of Health (department) is amending existing rules to ensure access to treatment, including abortion care, for emergency medical conditions in hospital emergency departments and protection of a pregnant person's right to exercise informed consent in prioritizing their health and safety when receiving treatment for emergency medical conditions in hospital emergency departments. These requirements are subject to applicable protections of conscience and the free exercise of religion under state and federal law.

Citation of rules affected by this order:

New: None

Repealed: None Amended: WAC 246-320-010 and WAC 246-320-281 Suspended: None

Statutory authority for adoption: RCW 70.41.030

Other authority: RCW 70.170.060, Directive of the Governor 25-01

EMERGENCY RULE

Under RCW 34.05.350 the agency for good cause finds:

☑ That immediate adoption, amendment, or repeal of a rule is necessary for the preservation of the public health, safety, or general welfare, and that observing the time requirements of notice and opportunity to comment upon adoption of a permanent rule would be contrary to the public interest.

□ That state or federal law or federal rule or a federal deadline for state receipt of federal funds requires immediate adoption of a rule.

Reasons for this finding: Immediate amendment of these rules is necessary to protect against the harms to public health, safety, and welfare that, absent independent state-law protections, would result from potentially imminent changes to federal policy that the federal government will seek to enforce to restrict hospitals' obligation and ability to provide abortion care as treatment for emergency medical conditions consistent with the standard of care and the patient's informed consent and to provide treatment that prioritizes a pregnant person's health and safety according to their informed consent. Absent this emergency rulemaking, these potential federal changes will directly threaten the health, safety, and welfare of pregnant persons in Washington state, and the delay caused by observing the time requirements of notice and opportunity to comment upon the adoption of a permanent rule would exacerbate that harm and would be contrary to the public interest.

Count by whole WAC sections only, from the WAC number through the history note. A section may be counted in more than one category. The number of sections adopted in order to comply with: Federal statute: New 0 Amended 2 Repealed 0 Federal rules or standards: New 0 Amended 0 Repealed 0 Recently enacted state statutes: New 0 Amended 0 Repealed 0 The number of sections adopted at the request of a nongovernmental entity: New 0 Amended 0 Repealed 0 The number of sections adopted on the agency's own initiative: New 0 Amended 2 Repealed 0 The number of sections adopted in order to clarify, streamline, or reform agency procedures: New 0 Amended 2 Repealed 0 The number of sections adopted using: New 0 Amended 2 Repealed 0 Pilot rule making: New 0 Amended 0 Repealed 0 Other alternative rule making:	Note: If any category is lo No descriptive text		ank, it	t will be cal	culat	ed as zero.		
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AMENDATORY SECTION (Amending WSR 15-09-108, filed 4/20/15, effective 5/21/15)

WAC 246-320-010 Definitions. For the purposes of this chapter and chapter 70.41 RCW, the following words and phrases will have the following meanings unless the context clearly indicates otherwise:

(1) "Abuse" means injury or sexual abuse of a patient indicating the health, welfare, and safety of the patient is harmed:

(a) "Physical abuse" means acts or incidents which may result in bodily injury or death.

(b) "Emotional abuse" means verbal behavior, harassment, or other actions which may result in emotional or behavioral stress or injury.

(2) "Agent," when referring to a medical order or procedure, means any power, principle, or substance, whether physical, chemical, or biological, capable of producing an effect upon the human body.

(3) "Alcoholism" means a disease, characterized by a dependency on alcoholic beverages, loss of control over the amount and circumstances of use, symptoms of tolerance, physiological or psychological withdrawal, or both, if use is reduced or discontinued, and impairment of health or disruption of social or economic functioning.

(4) "Alteration" means any change, addition, or modification to an existing hospital or a portion of an existing hospital.

"Minor alteration" means renovation that does not require an increase in capacity to structural, mechanical or electrical systems, which does not affect fire and life safety, and which does not add beds or facilities in addition to that for which the hospital is currently licensed.

(5) "Assessment" means the:

(a) Systematic collection and review of patient-specific data;

(b) A process for obtaining appropriate and necessary information about individuals seeking entry into a health care setting or service; and

(c) Information used to match an individual with an appropriate setting or intervention. The assessment is based on the patient's diagnosis, care setting, desire for care, response to any previous treatment, consent to treatment, and education needs.

(6) "Authentication" means the process used to verify an entry is complete, accurate, and final.

(7) "Bed, bed space or bassinet" means the physical environment and equipment (both movable and stationary) designed and used for ((twenty-four)) 24 hour or more care of a patient including level 2 and 3 bassinets. This does not include stretchers, exam tables, operating tables, well baby bassinets, labor bed, and labor-delivery-recovery beds.

(8) "Child" means an individual under the age of ((eighteen)) <u>18</u> years.

(9) "Clinical evidence" means the same as original clinical evidence used in diagnosing a patient's condition or assessing a clinical course and includes, but is not limited to:

- (a) X-ray films;
- (b) Digital records;
- (c) Laboratory slides;
- (d) Tissue specimens; and
- (e) Medical photographs.

(10) "Critical care unit or service" means the specialized medical and nursing care provided to patients facing an immediate lifethreatening illness or injury. Care is provided by multidisciplinary teams of highly skilled physicians, nurses, pharmacists, or other health professionals who interpret complex therapeutic and diagnostic information and have access to sophisticated equipment.

(11) "Department" means the Washington state department of health.

(12) "Dietitian" means an individual meeting the eligibility requirements for active membership in the American Dietetic Association described in *Directory of Dietetic Programs Accredited and Approved*, *American Dietetic Association*, edition 100, 1980.

(13) "Double-checking" means verifying patient identity, agent to be administered, route, quantity, rate, time, and interval of administration by two persons.

(14) "Drugs" as defined in RCW 18.64.011(3) means:

(a) Articles recognized in the official U.S. Pharmacopoeia or the official Homeopathic Pharmacopoeia of the United States;

(b) Substances intended for use in the diagnosis, cure, mitigation, treatment, or prevention of disease in man or other animals;

(c) Substances (other than food) intended to affect the structure or any function of the body of man or other animals; or

(d) Substances intended for use as a component of any substances specified in (a), (b), or (c) of this subsection but not including devices or component parts or accessories.

(15) "Electrical receptacle outlet" means an outlet where one or more electrical receptacles are installed.

(16) "Emergency care to victims of sexual assault" means medical examinations, procedures, and services provided by a hospital emergency room to a victim of sexual assault following an alleged sexual assault.

(17) "Emergency contraception" means any health care treatment approved by the Food and Drug Administration that prevents pregnancy((τ)) including, but not limited to, administering two increased doses of certain oral contraceptive pills within ((seventy-two)) <u>72</u> hours of sexual contact.

(18) "Emergency department" means the area of a hospital where unscheduled medical or surgical care is provided to patients who need care.

(19) "Emergency room" means a space where emergency services are delivered and set apart by floor-to-ceiling partitions on all sides with proper access to an exit access and with all openings provided with doors or windows.

(20) "Emergency medical condition" means:

<u>(a) A</u> condition ((manifesting itself by acute symptoms)) of such severity (((including severe pain, symptoms of mental disorder, or symptoms of substance abuse))) that ((absent)) the absence of immediate medical attention could result in:

(((a))) <u>(i)</u> Placing the health of an individual <u>(or, with respect</u> to a pregnant person, the health of the pregnant person or their embryo or fetus) in serious jeopardy;

(((b))) <u>(ii)</u> Serious impairment to bodily functions; <u>or</u>

(((c))) <u>(iii)</u> Serious dysfunction of a bodily organ or part; or

(((d))) <u>(b)</u> With respect to a pregnant ((woman)) <u>person</u> who is having contractions:

(i) That there is inadequate time to effect a safe transfer to another hospital before delivery; or

(ii) That ((the)) transfer may pose a threat to the health or safety of the ((woman or the unborn child)) pregnant person or their embryo or fetus.

(21) "Emergency services" means health care services medically necessary to evaluate and treat a medical condition that manifests itself by the acute onset of a symptom or symptoms, including severe pain, that would lead a prudent layperson acting reasonably to believe that a health condition exists that requires immediate medical attention, and that the absence of immediate medical attention could reasonably be expected to result in serious impairment to bodily functions or serious dysfunction of an organ or part of the body, or would place the person's health, or in the case of a pregnant woman, the health of the woman or her unborn child, in serious jeopardy.

(22) "Emergency triage" means the immediate patient assessment by a registered nurse, physician, or physician assistant to determine the nature and urgency of the person's medical need for treatment.

(23) "Family" means individuals designated by a patient who need not be relatives.

(24) "General hospital" means a hospital that provides general acute care services, including emergency services.

(25) "Governing authority/body" means the person or persons responsible for establishing the purposes and policies of the hospital.

(26) "High-risk infant" means an infant, regardless of age, whose existence is compromised, prenatal, natal, or postnatal factors needing special medical or nursing care.

(27) "Hospital" means any institution, place, building, or agency providing accommodations, facilities, and services over a continuous period of ((twenty-four)) <u>24</u> hours or more, for observation, diagnosis, or care of two or more individuals not related to the operator who are suffering from illness, injury, deformity, or abnormality, or from any other condition for which obstetrical, medical, or surgical services would be appropriate for care or diagnosis. "Hospital" as used in this chapter does not include:

(a) Hospice care centers which come within the scope of chapter 70.127 RCW;

(b) Hotels, or similar places, furnishing only food and lodging, or simply domiciliary care;

(c) Clinics or physicians' offices, where patients are not regularly kept as bed patients for ((twenty-four)) <u>24</u> hours or more;

(d) Nursing homes, as defined in and which come within the scope of chapter 18.51 RCW;

(e) Birthing centers, which come within the scope of chapter 18.46 RCW;

(f) Psychiatric or alcoholism hospitals, which come within the scope of chapter 71.12 RCW; nor

(g) Any other hospital or institution specifically intended for use in the diagnosis and care of those suffering from mental illness, mental retardation, convulsive disorders, or other abnormal mental conditions.

Furthermore, nothing in this chapter will be construed as authorizing the supervision, regulation, or control of the remedial care or treatment of residents or patients in any hospital conducted for those who rely primarily upon treatment by prayer or spiritual means in accordance with the creed or tenets of any well-recognized church or religious denominations.

(28) "Individualized treatment plan" means a written and/or electronically recorded statement of care planned for a patient based upon assessment of the patient's developmental, biological, psychological, and social strengths and problems, and including:

(a) Treatment goals, with stipulated time frames;

(b) Specific services to be utilized;

(c) Designation of individuals responsible for specific service to be provided;

(d) Discharge criteria with estimated time frames; and

(e) Participation of the patient and the patient's designee as appropriate.

(29) "Infant" means an individual not more than ((twelve)) <u>12</u> months old.

(30) "Invasive procedure" means a procedure involving puncture or incision of the skin or insertion of an instrument or foreign material into the body including, but not limited to, percutaneous aspirations, biopsies, cardiac and vascular catheterizations, endoscopies, angioplasties, and implantations. Excluded are venipuncture and intravenous therapy.

(31) "Licensed practical nurse" means an individual licensed under provisions of chapter 18.79 RCW.

(32) "Maintenance" means the work of keeping something in safe, workable, or suitable condition.

(33) "Medical equipment" means equipment used in a patient care environment to support patient treatment and diagnosis.

(34) "Medical staff" means physicians and other practitioners appointed by the governing authority.

(35) "Medication" means any substance, other than food or devices, intended for use in diagnosing, curing, mitigating, treating, or preventing disease.

(36) "Multidisciplinary treatment team" means a group of individuals from various disciplines and clinical services who assess, plan, implement, and evaluate treatment for patients.

(37) "Neglect" means mistreatment or maltreatment; a disregard of consequences or magnitude constituting a clear and present danger to an individual patient's health, welfare, and safety.

(a) "Physical neglect" means physical or material deprivation, such as lack of medical care, lack of supervision, inadequate food, clothing, or cleanliness.

(b) "Emotional neglect" means acts such as rejection, lack of stimulation, or other acts which may result in emotional or behavioral problems, physical manifestations, and disorders.

(38) "Neonate" means a newly born infant under ((twenty-eight)) <u>28</u> days of age.

(39) "Neonatologist" means a pediatrician who is board certified in neonatal-perinatal medicine or board eligible in neonatal-perinatal medicine, provided the period of eligibility does not exceed three years, as defined and described in *Directory of Residency Training Programs* by the Accreditation Council for Graduate Medical Education, American Medical Association, 1998 or the *American Osteopathic Association Yearbook and Directory*, 1998.

(40) "New construction" means any of the following:

(a) New facilities to be licensed as a hospital;

(b) Renovation; or

(c) Alteration.

(41) "Nonambulatory" means an individual physically or mentally unable to walk or traverse a normal path to safety without the physical assistance of another. (42) "Nursing personnel" means registered nurses, licensed practical nurses, and unlicensed assistive nursing personnel providing direct patient care.

(43) "Operating room (OR)" means a room intended for invasive and noninvasive surgical procedures.

(44) "Patient" means an individual receiving (or having received) preventive, diagnostic, therapeutic, rehabilitative, maintenance, or palliative health services.

(a) "Inpatient" means services that require admission to a hospital for (($\frac{1}{1}$ hours)) 24 hours or more.

(b) "Outpatient" means services that do not require admission to a hospital for ((twenty-four)) <u>24</u> hours or more.

(45) "Patient care areas" means all areas of the hospital where direct patient care is delivered and where patient diagnostic or treatment procedures are performed.

(46) "Patient care unit or area" means a physical space of the hospital including rooms or areas containing beds or bed spaces, with available support ancillary, administrative, and services for patient.

(47) "Person" means any individual, firm, partnership, corporation, company, association, or joint stock association, and the legal successor thereof.

(48) "Pharmacist" means an individual licensed by the pharmacy quality assurance commission under chapter 18.64 RCW.

(49) "Pharmacy" means every place properly licensed by the pharmacy quality assurance commission where the practice of pharmacy is conducted.

(50) "Physician" means an individual licensed under chapter 18.71 RCW, Physicians, chapter 18.22 RCW, Podiatric medicine and surgery, or chapter 18.57 RCW, Osteopathy—Osteopathic medicine and surgery.

(51) "Prescription" means an order for drugs or devices issued by a practitioner authorized by law or rule in the state of Washington for a legitimate medical purpose.

(52) "Procedure" means a particular course of action to relieve pain, diagnose, cure, improve, or treat a patient's condition.

(53) "Protocols" and "standing order" mean written or electronically recorded descriptions of actions and interventions for implementation by designated hospital staff under defined circumstances under hospital policy and procedure.

(54) "Psychiatric service" means the treatment of patients pertinent to a psychiatric diagnosis.

(55) "Recovery unit" means a physical area for the segregation, concentration, and close or continuous nursing observation of patients for less than ((twenty-four)) 24 hours immediately following anesthesia, obstetrical delivery, surgery, or other diagnostic or treatment procedures.

(56) "Registered nurse" means an individual licensed under chapter 18.79 RCW.

(57) "Restraint" means any method used to prevent or limit free body movement including, but not limited to, involuntary confinement, a physical or mechanical device, or a drug given not required to treat a patient's symptoms.

(58) "Room" means a space set apart by floor-to-ceiling partitions on all sides with proper access to a corridor and with all openings provided with doors or windows. (59) "Seclusion" means the involuntary confinement of a patient in a room or area where the patient is physically prevented from leaving.

(60) "Seclusion room" means a secure room designed and organized for temporary placement, care, and observation of one patient with minimal sensory stimuli, maximum security and protection, and visual and auditory observation by authorized personnel and staff. Doors of seclusion rooms have staff-controlled locks.

(61) "Sexual assault" means one or more of the following:

(a) Rape or rape of a child;

(b) Assault with intent to commit rape or rape of a child;

(c) Incest or indecent liberties;

(d) Child molestation;

(e) Sexual misconduct with a minor;

(f) Custodial sexual misconduct;

(g) Crimes with a sexual motivation; or

(h) An attempt to commit any of the items in (a) through (g) of this subsection.

(62) "Severe pain" means a level of pain reported by a patient of 8 or higher based on a 10 point scale with 1 being the least and 10 being the most pain.

(63) "Specialty hospital" means a subclass of hospital that is primarily or exclusively engaged in the care and treatment of one of the following categories:

(a) Patients with a cardiac condition;

(b) Patients with an orthopedic condition;

(c) Patients receiving a surgical procedure; and

(d) Any other specialized category of services that the secretary of health and human services designates as a specialty hospital.

(64) "Staff" means paid employees, leased or contracted persons, students, and volunteers.

(65) "Surgical procedure" means any manual or operative procedure performed upon the body of a living human being for the purpose of preserving health, diagnosing or curing disease, repairing injury, correcting deformity or defect, prolonging life or relieving suffering, and involving any of the following:

(a) Incision, excision, or curettage of tissue;

(b) Suture or repair of tissue including a closed as well as an open reduction of a fracture;

(c) Extraction of tissue including the premature extraction of the products of conception from the uterus; or

(d) An endoscopic examination.

(66) "Surrogate decision-maker" means an individual appointed to act on behalf of another when an individual is without capacity as defined in RCW 7.70.065 or has given permission.

(67) "Transfer agreement" means a written agreement providing an effective process for the transfer of a patient requiring emergency services to a general hospital providing emergency services and for continuity of care for that patient.

(68) "Treatment" means the care and management of a patient to combat, improve, or prevent a disease, disorder, or injury, and may be:

(a) Pharmacologic, surgical, or supportive;

(b) Specific for a disorder; or

(c) Symptomatic to relieve symptoms without effecting a cure.

(69) "Unlicensed assistive personnel (UAP)" means individuals trained to function in an assistive role to nurses in the provision of

patient care, as delegated by and under the supervision of the registered nurse. Typical activities performed by unlicensed assistive personnel include, but are not limited to: Taking vital signs; bathing, feeding, or dressing patients; assisting patient with transfer, ambulation, or toileting. Definition includes: Nursing assistants; orderlies; patient care technicians/assistants; and graduate nurses (not yet licensed) who have completed unit orientation. Definition excludes: Unit secretaries or clerks; monitor technicians; therapy assistants; student nurses fulfilling educational requirements; and sitters who are not providing typical UAP activities.

(70) "Victim of sexual assault" means a person is alleged to have been sexually assaulted and who presents as a patient.

(71) "Vulnerable adult" means, as defined in chapter 74.34 RCW, a person ((sixty)) 60 years of age or older who lacks the functional, physical, or mental ability to care for him or herself; an adult with a developmental disability under RCW 71A.10.020; an adult with a legal guardian under chapter 11.88 RCW; an adult living in a long-term care facility (an adult family home, assisted living facility or nursing home); an adult living in their own or a family's home receiving services from an agency or contracted individual provider; or an adult self-directing their care under RCW 74.39.050. For the purposes of requesting background checks pursuant to RCW 43.43.832, it shall also include adults of any age who lack the functional, mental, or physical ability to care for themselves. For the purposes of this chapter, it shall also include hospitalized adults.

(72) "Well-being" means free from actual or potential harm, abuse, neglect, unintended injury, death, serious disability or illness.

AMENDATORY SECTION (Amending WSR 09-07-050, filed 3/11/09, effective 4/11/09)

WAC 246-320-281 Emergency services. The purpose of this section is to guide the management and care of patients receiving emergency services. Hospitals are not required to provide these services in order to be licensed.

If providing emergency services, hospitals must:

(1) Adopt and implement policies and procedures, consistent with RCW 70.170.060, for every patient presenting to the emergency department with an emergency medical condition to include:

Transfer of a patient with an emergency medical condition or who is in active labor, in such circumstances and as promptly as dictated by the standard of care, based on:

(a) Patient request;

(b) Inability to treat the patient due to facility capability;

(c) Staff availability or bed availability; and

(d) The ability of the receiving hospital to accept and care for the patient;

(2) Maintain the capacity to perform emergency triage and medical screening exam ((twenty-four)) 24 hours per day;

(3) Define the qualifications and oversight of staff delivering emergency care services;

(4) Use hospital policies and procedures which define standards of care;

(5) Assure at least one registered nurse skilled and trained in emergency care services on duty and in the hospital at all times, who is:

(a) Immediately available to provide care; and

(b) Trained and current in advanced cardiac life support;

(6) Post names and telephone numbers of medical and other staff on call;

(7) Assure communication with agencies and health care providers as indicated by patient condition; ((and))

(8) Assure emergency equipment, supplies, and services necessary to meet the needs of presenting patients are immediately available;

(9) Comply with 42 U.S.C. Sec. 1395dd and its implementing regulations, provided that, for purposes of this subsection, "emergency medical condition" shall have the meaning provided in WAC 246-320-010(20) and "unborn child" shall mean "embryo or fetus" where those terms are used in 42 U.S.C. Sec. 1395dd and its implementing regulations. Hospitals must comply with any requirements of this chapter or any other law that provide greater access to care or are otherwise more favorable to patients than the requirements of 42 U.S.C. Sec. 1395dd and its implementing regulations; and

(10) Provide treatment to a pregnant person who comes to the hospital with an emergency medical condition that is consistent with the applicable standard of care for such condition or, if authorized by law, transfer the patient to another hospital capable of providing the treatment, in accordance with the patient's informed consent. If termination of the pregnancy is the treatment that is consistent with the applicable standard of care, the hospital must provide such treatment in accordance with and as promptly as dictated by the standard of care or, if authorized by law, transfer the patient to another hospital capable of providing the treatment, in accordance with the patient's informed consent. Neither the continuation of the pregnancy nor the health of any embryo or fetus shall be a basis for withholding care from the pregnant person, and neither the continuation of the pregnancy nor the health of any embryo or fetus shall be prioritized over the health or safety of the pregnant person absent the pregnant person's informed consent.