Washington State Department of HEALTH
Pharmacy Quality Assurance Commission
PO Box 47852 Olympia, WA 98504
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Pharmacy Quality Assurance Commission
February 5, 2026 - Minutes

Convene: Hawkins DeFrance, Chair, called the meeting to order February 5, 2026, 9:05 a.m.

Commission Members:
Hawkins DeFrance, Chair
Ann Wolken, Vice Chair
Stephanie Bardin
Teri Ferreira
Patrick Gallaher
Judy Guenther (arrived at 9:30am)
William Hayes
Kenneth Kenyon
Craig Ritchie
Uyen Thorstensen

Commission Members Absent:
Jerrie Allard
Matthew Ray
Huey Yu

Staff:
Marlee O'Neill, Executive Director
Lindsay Trant-Sinclair, Deputy Director
Si Bui, Inspector Supervisor
Christopher Gerard, AAG
Rachel Sahi
Taifa "Nomi" Peaks
Joshua Munroe
Haleigh Mauldin
Julia Katz
Irina Harris
Madison Washington
Shelby Winters
Amy L Robertson

1. Call to Order, Hawkins DeFrance, Chair

1.1. Meeting Agenda Approval – February 5, 2026

MOTION: Craig Ritchie moved to approve February 5, 2026, business meeting agenda without edits. Patrick Gallaher, seconded. Motion carried, 9:0.

1.2. Meeting Minutes Approval – December 4, 2025

MOTION: Craig Ritchie moved to approve December 4, 2025, meeting minutes without edits. Ken Kenyon, seconded. Motion carried, 9:0.

2. Consent Agenda

2.1. Correspondence

2.1.1. National Precursor Log Exchange Monthly Dashboard – November and December

2.2. Ancillary Utilization Plans Approval

2.2.1. Monroe Pharmacy
2.2.2. Fred Hutchinson Cancer Center – multiple locations
2.2.3. Fred Hutchinson Cancer Center – South Lake Union
2.2.4. PetNet Solutions
2.2.5. Providence Medical Group
2.2.6. Port Gable S'Klallam Pharmacy
2.2.7. Snoqualmie Valley Health Pharmacy

2.3. Pharmacy Technician Training Program Approval

2.3.1. Cascadia Pharmacy Wallingford – multiple locations
2.3.2. Horizon Pharmacy
2.3.3. Tri Area Pharmacy
2.3.4. Dynamix Rx Labs
2.3.5. Union Avenue Compounding

MOTION: Ken Kenyon moved to approve the consent agenda except for 2.2.5. Providence Medical Group, 2.3.3. Tri Area Pharmacy, 2.3.4. Dynamix Rx Labs, and 2.3.5. Union Avenue Compounding. Teri Ferreira, seconded. Motion carried, 9:0.

2.4. Regular Agenda Items Pulled from 2.1., 2.2., or 2.3. The commission discussed items removed from the consent agenda and placed them on the regular agenda for separate discussions.

2.2.5. Providence Medical Group

MOTION: William Hayes moved to approve item 2.2.5. Providence Medical Group. Ken Kenyon, seconded. Motion carried, 9:0.

2.3.3. Tri Area Pharmacy

MOTION: William Hayes moved to approve item 2.3.3. Tri Area Pharmacy contingent upon staff working with the applicant to clarify Item C for technicians and assistants to ensure the AUP is clear that the pharmacist must offer to counsel and provide the counseling. Ken Kenyon, seconded. Motion carried, 9:0.

2.3.4. Dynamix Rx Labs

MOTION: William Hayes moved to approve item 2.3.4. Dynamix Rx Labs contingent upon updating Item A in the assistant AUP to say that assistants print prescription labels. Teri Ferreira, seconded. Motion carried, 9:0.

2.3.5. Union Avenue Compounding

MOTION: William Hayes moved to approve item 2.3.5. Union Avenue Compounding contingent upon striking the statement "this plan can be supplemented with specific duties to the community pharmacy practice." Ken Kenyon, seconded. Motion carried, 10:0.

3. Rulemaking for Expanding Types of Medication Assistance

3.1. PUBLIC HEARING

The commission held a public hearing on the rulemaking to propose amending WAC 246-945-714 related to the regulation of medication assistance provided by nonpractitioners.

The public rules hearing began at 9:31 a.m. and closed at 9:33 a.m. No written comments were received during the public comment period. No oral comments were received during the public hearing.

3.2. Approval of Comment Responses and Authorization to File CR-103 (Expanding Types of Medication Assistance)

There were no written or oral comments received.

MOTION: Ken Kenyon moved to adopt the draft rule language for WAC 246-945-714 without edits and authorized staff to file a CR-103P. Teri Ferreira, seconded. Motion carried, 10:0.

4. Presentations

4.1. Quarterly Budget Report

Blanca Flores-Martinez, Budget Analyst, presented the commission's quarterly budget report.

4.2. Healthcare Enforcement and Licensing Management System (HELMS) Demonstration

Carly McCarthy, HELMS Communications Consultant, provided an update on HELMS.

5. Panel Review – Study Plan (Panel A)

MOTION: Craig Ritchie moved to delegate the study plan review to Panel A (Patrick Gallaher, Teri Ferreira, and Judy Guenther). Ken Kenyon, seconded. Approved 10:0.

5.1. PHRM.PH.61659984

MOTION: Patrick Gallaher moved to approve the study plan. Judy Guenther, seconded. Approved 3:0.

5.2. PHRM.PH.61407402

MOTION: Patrick Gallaher moved to approve the study plan. Judy Guenther, seconded. Approved 3:0.

5.3. PHRM.PH.61082397

MOTION: Patrick Gallaher moved to approve the study plan. Judy Guenther, seconded. Approved 3:0.

5.4. PHRM.PH.70014254

MOTION: Patrick Gallaher moved to approve the study plan. Judy Guenther, seconded. Approved 3:0.

5.5. PHRM.PH.61580831

MOTION: Patrick Gallaher moved to approve the study plan. Judy Guenther, seconded. Approved 3:0.

6. Old Business

6.1. Nonresident Pharmacy Directive: List of Approved Inspection Programs

MOTION: Teri Ferreira moved to approve the draft Nonresident Pharmacy Directive: List of Approved Inspection Programs with an effective date of February 5, 2026, and with the edit of changing two approved third-party inspection programs to three approved third-party inspections programs. William Hayes, seconded. Motion carried, 10:0.

6.2. Flow Chart on Modifications or Remodels

MOTION: Teri Ferreira moved to approve the draft flow chart without edits and directed staff to post the flow chart on the commission's website. Ken Kenyon, seconded. Motion carried, 10:0.

7. Rule Updates

7.1. Commission Policies, Procedures, and Guidelines Update

MOTION: William Hayes moved to authorize staff to remove the Pharmacy Application for Change of Location and Ancillary Utilization Plan Approvals policy statement and substitute it with a FAQ. Ken Kenyon, seconded. Motion carried, 10:0.

MOTION: Ken Kenyon moved to authorize staff to remove the Verification of Age by Applicant policy statement. Teri Ferreira, seconded. Motion carried, 10:0.

MOTION: Teri Ferreira moved to authorize staff to initiate rulemaking WACs 246-945-155, 246-945-162, 246-945-163, and potentially add a new WAC, on the accreditation of colleges of pharmacy and retain the policy statement until rulemaking is finalized. Patrick Gallaher, seconded. Motion carried, 10:0.

MOTION: William Hayes moved to authorize staff to retain and update the guidance document for Chart Orders and the Use of Practitioner Authorized Agent Signatures in Long-Term Care Settings. Ken Kenyon, seconded. Motion carried, 10:0.

MOTION: Teri Ferreira moved to authorize staff to retain and update the guidance document for Opioid Treatment Program – Drugs That May be Ordered, Possessed, and Used by an Opioid Treatment Program . Ken Kenyon, seconded. Motion carried, 10:0.

MOTION: Ken Kenyon moved to authorize staff to initiate rulemaking on WACs 246-945-165 and 246-945-205 on commission approved examinations and retain the policy statement until rulemaking is finalized. Teri Ferreira, seconded. Motion carried, 10:0.

MOTION: Hawkins DeFrance moved to authorize staff to withdraw the policy statement for Qualifications for Re-exam – NAPLEX and file a CR-101 for rulemaking on this topic. Patrick Gallaher, seconded. Motion carried, 10:0.

MOTION: Ken Kenyon moved to authorize staff to initiate rulemaking on WAC 246-945-503, and potentially add a new WAC, on euthanasia training program guidelines and retain the guidance document until rulemaking is finalized. Ann Wolken, seconded. Motion carried, 10:0.

MOTION: Ken Kenyon moved to authorize staff to review and update the Exception Application Guidelines policy statement. William Hayes, seconded. Motion carried, 10:0.

MOTION: Ken Kenyon moved to authorize staff to remove the guidance document for Guidelines for Investigating Diversion Cases. Teri Ferreira, seconded. Motion carried, 10:0.

MOTION: Hawkins DeFrance moved to authorize staff to remove the policy statement for Nonresident Pharmacy Report Guidelines and add information on this to the new commissioner handbook. Ken Kenyon, seconded. Motion carried, 10:0.

MOTION: Hawkins DeFrance moved to authorize staff to rescind the Use of Camera/Video in Pharmacy Inspections and Investigations directive. William Hayes, seconded. Motion carried, 10:0.

MOTION: Ken Kenyon moved to authorize staff to retain and update the guidance document for Guidance on Collaborative Drug Therapy. Teri Ferreira, seconded. Motion carried, 10:0.

MOTION: Hawkins DeFrance moved to authorize staff to retain the guidance document for Processing and Labeling of Certain Outpatient Medications for Administration and discuss it with the Center of Drug Systems, Data and Science as a possible legislative action. Patrick Gallaher, seconded. Motion carried, 10:0.

7.2. PTCB's Pharmacy Technician Certification Exam Update

MOTION: Ken Kenyon moved to approve the updated policy statement for PTCB's Pharmacy Technician Certification Exam draft without edits and directed staff to post it to the commission's website. William Hayes, seconded. Motion carried, 10:0.

7.3. 2026 Self-Inspection Worksheets

MOTION: Ken Kenyon moved to approve the changes to the self-inspection worksheets as presented directed staff to post the 2026 self-inspection worksheets to the commission's website and notify licensees through GovDelivery. Teri Ferreira, seconded. Motion carried, 10:0.

7.4. National Association of Boards of Pharmacy Task Forces and Committees

MOTION: Teri Ferreira moved to support Huey Yu applying to serve on a 2026-2027 National Association of Boards of Pharmacy task force. Patrick Gallaher, seconded. Motion carried, 10:0.

7.5. Frequently Asked Question on Prescriptions for Veterinarians

MOTION: Ken Kenyon moved to approve the FAQ on Prescriptions for Veterinarians without edits and directed staff to post it on the commission's website, notify interested parties through GovDelivery, and share it with the Veterinary Board of Governors. Teri Ferreira, seconded. Motion carried, 10:0.

8. Rule Updates

8.1. Rule Tracker Update

Joshua Munroe updated the commission on the rules tracker.

8.2. Listening Session: Alternate Distribution Models

The commission held a listening session on the alternate distribution model rulemaking project.

MOTION: Hawkins DeFrance moved to withdraw the CR-102 Rules Proposal package for the Alternative Distribution Models and continue with the rules workshop. Ken Kenyon, seconded. Motion carried, 10:0.

8.3. Rule Workshop: Tamper-Resistant Prescription Pads and Paper

MOTION: Ken Kenyon moved to approve the draft rule language without edits and tasked staff with preparing and filing a CR-102 Rules Proposal package. Teri Ferreira, seconded. Motion carried, 10:0.

8.4. Rule Workshop: Accessible Labeling Program Refinement

MOTION: Hawkins DeFrance moved to adopt the drafted version that requires accessible labeling for the 10 most common non-English languages in Washington State. Teri Ferreira, seconded. Motion carried, 10:0.

MOTION: Ken Kenyon moved to approve the remainder of the rule language contingent upon staff making edits to the definition of "oral translation" to ensure alignment with the other edits, to add an exemption to WAC 246-945-027 for public health outreach programs and directed staff to file a CR-102. Judy Guenther, seconded. Motion carried, 10:0.

8.5. Rule Workshop on Utilization of Pharmacy Ancillary Personnel

MOTION: Teri Ferreira moved to approve the draft rule language for WAC 246-945-001, WAC 246-945-315, WAC 246-945-316, WAC 246-945-317, and WAC 246-945-318 with one edit of adding "a pharmacy assistant" to WAC 246-945-316(3)(b) and authorized staff to file a CR-102 Rules Proposal package. Ann Wolken, seconded. Motion carried, 6:1; 3 abstained.

8.6. Rule Update: Mobile Opioid Treatment Program Units

MOTION: Ann Wolken moved to approve the updated rule language for WAC 246-945-060 and WAC 246-945-250 without edits and authorized staff to continue filing the CR-102 Rules Proposal package for the Mobile OTP Units rulemaking. Teri Ferreira, seconded. Motion carried, 10:0.

8.7. RCW 49.12.430 and Pharmacy Assistants Under Age 18

MOTION: Teri Ferreira moved to authorize rulemaking to amend WAC 246-945-200 to add a requirement for competency in relevant procedures for preventing transmission of blood-borne pathogens and infectious diseases for pharmacy assistant applicants under the age of 18. Ken Kenyon, seconded. Motion carried, 10:0.

9. Legislative Updates

9.1. PQAC Bill Report

Joshua Munroe provided an overview of the bill tracking table for the 2026 state legislative session.

10. Strategic Plan

10.1. Implementation Plan Update

Marlee O'Neill updated the commission on the strategic plan implementation.

10.2. Performance Measures from Joint Operating Agreement

Julia Katz presented the progress related to the performance measures in the Joint Operating Agreement and will continue to provide updates at future business meetings.

11. Open Forum

No public comments were received.

12. Commission Member Reports

12.1. Open Discussion Related to Items or Issues Relevant to Commission Business/Pharmacy Practice

William Hayes shared that he attended an inspection with one of the commission inspectors and recommended other commissioners do the same for educational purposes.

13. Staff Reports

13.1. Executive Director – Marlee O'Neill

- Marlee O'Neill advised commissioners that registration for the NABP annual meeting in May 2026 is open. NABP has grants to assist in covering the cost. Staff recommended sending Hawkins DeFrance as voting delegate and Ann Wolken as an alternate delegate as well as up to two staff members.

MOTION: Teri Ferreira moved to send Hawkins DeFrance as the voting delegate, Ann Wolken as the alternate voting delegate, and up to two staff members to the 2026 NABP annual meeting in May 2026. Ken Kenyon, seconded. Motion carried, 10:0.

13.2. Deputy Director – Lindsay Trant-Sinclair

- Lindsay gave kudos to Haleigh, Josh, and Julia for extensive bill-tracking efforts on top of their regular duties.

13.3. Pharmacist Supervisor – Si Bui

- Si noted that the transition from ILRS to HELMS will happen at some point in March and the team is making every effort to ensure everything is ready before the transition.

13.4. Assistant Attorney General – Christopher Gerard

- Nothing to report.

14. Summary of Meeting Action Items

- **1.2 Meeting Minutes Approval** – Staff will finalize and post the minutes on the commission's website.
- **2. Consent Agenda** – Staff will convey the decision to the applicants and the Office of Customer Service.
- **3. Rulemaking for Expanding Types of Medication Assistance** – Staff will file a CR-103P.
- **4.1 Quarterly Budget Report** – PQAC staff will circle back and provide a more expanded version of the report at future meetings.
- **5. Panel Review – Study Plan (Panel A)** – Staff will convey the decisions to the credentialing team.
- **6.1 Nonresident Pharmacy Directive: List of Approved Inspection Programs** – Staff will make the discussed edits, publish it on the commission's website, and send out a GovDelivery.
- **6.2 Flow Chart on Modifications or Remodels** – Staff will publish the flow chart as well as add it to the commission's website.
- **7.1 Commission Policies, Procedures, and Guidelines Update** – Staff will follow up with the various action items for each guidance document and policy statement and bring updates back to the commission at future business meetings.
- **7.2 PTCB's Pharmacy Technician Certification Exam Update** – Staff will finalize the policy statement updates and publish it to the commission's website.
- **7.3 2026 Self-Inspection Worksheets** – Staff will finalize the worksheets, publish them to the commission's website, and send out a GovDelivery.
- **7.4 National Association of Boards of Pharmacy Task Forces and Committees** – Staff will convey commission's approval to Huey Yu.
- **7.5 Frequently Asked Question on Prescriptions for Veterinarians** – Staff will post it to the FAQ page and communicate that to the Veterinary Board of Governors.
- **8.2 Listening Session: Alternate Distribution Models** – Staff will withdraw the CR-102 and revisit the rule language at a future commission meeting.
- **8.3 Rule Workshop: Tamper-Resistant Prescription Pads and Paper** – Staff will file a CR-102.

- **8.4 Rule Workshop: Accessible Labeling Program Refinement** – Staff will make the edits to the rule language as discussed and will file a CR-102.
- **8.5 Rule Workshop on Utilization of Pharmacy Ancillary Personnel** – Staff will make the amendments as discussed and will file the CR-102.
- **8.6 Rule Update: Mobile Opioid Treatment Program Units** – Staff will proceed with the rulemaking with the language as discussed.
- **8.7 RCW 49.12.430 and Pharmacy Assistants Under Age 18** – Staff will file a CR-101 to amend WAC 246-945-200 to add a requirement for competency in relevant procedures for preventing transmission of blood-borne pathogens and infectious diseases.

3:42 p.m. Business Meeting Adjourned

2.1.1. National Precursor Log Exchange Dashboard - January and February

MONTHLY PROGRAM ADMINISTRATOR'S DASHBOARD – January

0 Logins - 0 Searches - 0 Report Queries - 0 Active Watches - 0 Active Watch Hits

NEW USERS THIS MONTH	TOP USAGE AGENCIES	TOP AGENCIES BY ACTIVE WATCHES
New Users = 0 Total Accounts = 147 Active Users = 0	TOP USERS BY USAGE	

TRANSACTION SUMMARY STATISTICS (2026)

	JAN	TOTAL
PURCHASES	83,928	**83,928**
BLOCKS	3,675	**3,675**
GRAMS SOLD	157,526	**157,526**
BOXES SOLD	85,222	**85,222**
GRAMS BLOCKED	8,708	**8,708**
BOXES BLOCKED	3,893	**3,893**
AVG GRAMS PER BOX BLOCKED	2.24	**2.24**

PHARMACY PARTICIPATION STATISTICS (Jan 2026)

Enabled Pharmacies	889
Pharmacies Submitting a Transaction	773
Pharmacies Logging in Without a Transaction	0
Inactive Pharmacies	116
Pharmacy Participation for Jan	86.95%

MONTHLY PROGRAM ADMINISTRATOR'S DASHBOARD – February

0 Logins - 0 Searches - 0 Report Queries - 0 Active Watches - 0 Active Watch Hits

NEW USERS THIS MONTH	TOP USAGE AGENCIES	TOP AGENCIES BY ACTIVE WATCHES
New Users = 0	TOP USERS BY USAGE	
Total Accounts = 147		
Active Users = 0		

TRANSACTION SUMMARY STATISTICS (2026)

	JAN	FEB	TOTAL
PURCHASES	83,923	81,370	**165,293**
BLOCKS	3,675	3,387	**7,062**
GRAMS SOLD	157,521	152,625	**310,146**
BOXES SOLD	85,217	82,544	**167,761**
GRAMS BLOCKED	8,708	8,434	**17,142**
BOXES BLOCKED	3,893	3,631	**7,524**
AVG GRAMS PER BOX BLOCKED	2.24	2.32	**2.28**

PHARMACY PARTICIPATION STATISTICS (Feb 2026)

Enabled Pharmacies	890
Pharmacies Submitting a Transaction	775
Pharmacies Logging in Without a Transaction	0
Inactive Pharmacies	115
Pharmacy Participation for Feb	87.08%

DISCLAIMER: This is an automated report meant to give you a quick snapshot of the NPLEx system in your state. The statistics listed in this report are only meant to be a general overview and not necessarily the exact final numbers. Prior to releasing any statistics mentioned in this report, we highly recommend that you verify the numbers with your NPLEx customer relationship manager. For questions or issues, please contact krista.mccormick@equifax.com.

PQAC RULES TRACKING - FOR COMMISSION BUSINESS MEETING

Ongoing Rulemaking

Title	Short Description	Priority	Current Filing Type	Staff Lead	Recent Actions / Next Steps
Accessible Labeling Program Refinement	Amending WACs 246-945-015, 246-945-026, 246-945-027, 246-945-028, and 246-945-029 to adjust compliance standards for the prescription drug accessible labeling program.	High	CR-101 (Standard) WSR 25-23-064, filed November 18, 2025	Josh	Recent actions: SA and SBEIS drafted Next steps: SA and SBEIS review
Medication assistance (SHB 1720) expansion	Amending WAC 246-945-714(3) to include language added to RCW 69.41.010(15) following the passage of SHB 1720	High	CR-102 (Standard) WSR 25-23-066, filed November 18, 2025	Josh	Recent actions: February 2026 public hearing Next steps: File CR-103p
Clarifying Ancillary Utilization Plans	Amend WAC 246-945-410 to clarify the pharmacy-only submission policy for Ancillary Utilization Plans approved by the commission	Medium	CR-101 (Standard) WSR 25-22-008 (Filed October 24, 2025	Josh	Recent actions: CR-102 drafted Next steps: File CR-102
Mobile OTP Unit licenses (standard)	Open WAC 246-945-060 to exempt mobile units from acquiring separate licenses if associated physical location is already licensed	Medium	CR-101 (Standard) WSR 23-18-046, filed August 30, 2023	Haleigh	Recent actions: CR-102 package under review Next steps: File CR-102

Utilization of Pharmacy Ancillary Personnel	Rulemaking to amend WACs 246-945-001, 246-945-315, 246-945-317, 246-945-320, and new sections to chapter 246-945 WAC related to pharmacy technician final product, pharmacy assistants scope-of-practice, and the use of technology	Medium	CR-101 (Standard) WSR 24-18-032, filed August 26, 2024	Haleigh	Recent actions: Rule language approved at February business meeting Next steps: Draft CR-102
Incorporations by Reference Update	Rulemaking to update the incorporations by reference in WACs 246-945-030, 246-945-032, 246-945-040, 246-945-550, 246-945-565, and 246-945-600.	Medium	CR-105 (Expedited) WSR 26-05-078, filed February 17, 2026	Haleigh	Recent actions: CR-105 filed Next steps: Public comment period ends April 20, 2026
Manufacturers and Wholesalers	Amending WACs 246-945-246 and 246-945-247, and add new sections, if necessary, to clarify the application process for physical and virtual wholesalers, manufacturers, and OTC-only wholesalers.	Medium	Not yet filed	Haleigh	Recent actions: CR-101 in review Next steps: File CR-101
Training Requirements for Pharmacy Assistants Under Age 18	Amending WAC 246-945-200 to add a competency rerquirement for pharmacy assistants under the age of 18 related to the transmission of bloodborne pathogens.	Medium	Not yet filed	Haleigh	Recent actions: Commission approved initiating rulemaking Next steps: File CR-101

Accreditation of Colleges of Pharmacy	Amending WACs 246-945-155, -162, -163, and potentially add a new section of WAC to codify the policy statement.	Medium	Not yet filed	Haleigh	Recent actions: Commission approved initiating rulemaking Next steps: File CR-101
Alternate Distribution Models (Transfer Practices for Dispensed Prescription Drugs)	Related to regulation of white bagging, brown bagging, or any other transfer of a prescription or drug for the purpose of re-dispensing or subsequent administration to a patient	High	CR-102 (Standard) WSR 23-20-115, filed October 3, 2023	Julia	Recent actions: CR-102 withdrawn Next steps: Update at April 2026 business meeting
Tamper-Resistant Prescription Pads and Papers	Adding a section in Chapter 246-945 WAC to regulate security features and processes pertainigng to tamper-resistant prescription pads and papers.	Medium	CR-101 (Standard) WSR 25-21-079, filed October 15, 2025	Julia	Recent actions: CR-102 authorized at February 2026 business meeting Next steps: File CR-102
Pharmacy Personnel Examinations and Approval Process	Amending WACs 246-945-165 and 246-945-205 related to updating approved examinations for pharmacist and pharmacist technician applicants and the study plan approval process for pharmacists attempting approved examinations 4 or more times.	Medium	Not yet filed	Julia	Recent actions: Rulemaking authorized at February 2026 business meeting Next steps: File CR-101

Euthanasia Training Program Guidelines	Amending WACs 246-945-254 and 246-945-503 and potentially adding a section in Chapter 246-945 WAC to establish guidelines for euthanasia training programs.	Medium	Not yet filed	Julia	Recent actions: Rulemaking authorized at February 2026 business meeting Next steps: File CR-101
Implementing FDA MOU	Rulemaking needed to implement the FDA MOU should the commission choose to sign the MOU. This rulemaking would add a new section related to the regulation of the distribution of human compounded products.	On Hold	Not yet filed	Josh	On hold

Commission SBAR Communication

Agenda Item/Title: 3.3.1 Commission Discussion of UMPJE

Date SBAR Communication Prepared: February 27, 2026

Reviewer: T. Nomi Peaks

Link to Action Plan:

☒ **Action** ☐ **Information** ☐ **Follow-up** ☒ **Discussion**

Acronyms:

NABP: National Association of Boards of Pharmacy

MPJE: Multistate Pharmacy Jurisprudence Examination

UMPJE: Uniform Multistate Pharmacy Jurisprudence Examination

Situation:

NABP has been working with state boards of pharmacy to develop a new version of the MPJE. This new version is the national, UMPJE. The UMPJE ensures competency "and provides a streamlined pathway to license portability."[1] States can elect whether to adopt the UMPJE depending on their regulatory frameworks. NABP will continue to assist a state in administering the MPJE if it elects not to adopt the UMPJE.

The commission needs to determine whether the UMPJE meets the statutory requirements in RCW 18.64.080 and if so, whether it wants to adopt the UMPJE or maintain the WA MPJE. The commission also needs to determine if it will permit early testing.

Background:

Washington State

An applicant for a pharmacist license in Washington state must satisfactorily pass the "necessary examinations approved by the commission" (RCW 18.64.080(1)(e)). The commission has identified " a pharmacy licensure examination and jurisprudence examination. . ." as the necessary examinations (WAC 246-945-165(1)). More specifically, the commission has identified the NAPLEX as the pharmacy licensure examination, and the MPJE as the jurisprudence examination (Commission Approved Examinations 2/5/26).

[1] Understanding the Uniform MPJE for Pharmacy Licensure | MPJE

In addition, if an individual applies for a pharmacist license in Washington, but holds a pharmacist license in any other state, territory or possession of the United States, then the individual must successfully pass an examination "in the laws relating to the practice of pharmacy" (RCW 18.64.080(5)). The commission has identified the MPJE as the examination fulfilling this requirement (WAC 246-945-170, Commission Approved Examinations 2/5/26).

A score of 75 or higher is required to successfully pass the NAPLEX and MPJE (WAC 246-945-165(2)). Staff have confirmed the commission will not need to change the passing score if it adopts the UMPJE.

Uniform MPJE

The UMPJE will "assess knowledge of concepts and general principles of state law that are universal to all jurisdictions" (Understanding the Uniform MPJE for Pharmacy Licensure | MPJE).

The UMPJE

- Will cover applicable federal law
- Will focus on assessing knowledge of uniform pharmacy laws and regulations that are applicable across most states
- Is expected to launch in June 2026
- Is designed to address the need to allow pharmacists to practice in multiple participating jurisdictions

The Uniform-MPJE-Content-Outline provides additional information on the UMPJE.

Early Testing Option

NABP is adding the option for students to take the UMPJE or MPJE prior to graduation, between their P3 and P4 years in pharmacy school.

Assessment:

The commission can consider whether the UMPJE should replace the MPJE as an approved examination for those individuals applying for a pharmacist license as an initial applicant under RCW 18.64.080(1)(e) (. . . satisfactorily passed the necessary examinations approved by the commission . . "), or as an out-of-state pharmacist applicant under RCW 18.64.080(5) (". . . examination . . . in the laws relating to the practice of pharmacy").

The commission also needs to determine if it will allow for early testing.

Recommendation:

The commission has several options to consider.

- The commission may maintain the MPJE as the approved jurisprudence examination and require pharmacy school graduates to take the exam after their graduation dates as is the current process.
- The commission may maintain the MPJE as the approved jurisprudence examination but allow students to take it early (between their P3 and P4 years in pharmacy school).
- The commission may adopt the UMPJE as the approved jurisprudence examination and require pharmacy school graduates to take the exam after their graduation dates.
- The commission may adopt the UMPJE and allow students to take it early (between their P3 and P4 years in pharmacy school).
- If the commission elects to adopt the UMPJE, the commission can also develop a Plus Module that would be a review of pharmacy laws and rules specific to Washington. There are different ways the commission could do this, but one option is an on-demand course for applicants to complete.
- The commission could choose to approve both the MPJE and the UMPJE, but there are significant logistical challenges to this approach.

If the commission elects something other than maintaining the MPJE and its current process, staff recommend the commission issue a policy statement that outlines its decision while rulemaking is in progress.

Follow-up Action:
The commission staff will proceed as directed and communicate the decision to NABP.

Washington State Department of Health

Pharmacy Quality Assurance Commission

To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email doh.information@doh.wa.gov.

Guidance Document

Title:	Opioid Treatment Program – Drugs that May Be Ordered, Possessed, and Used By an Opioid Treatment Program
Document Number:	G008
References:	RCW 71.24.590, RCW 18.64.450, WAC 246-945-245
Contact:	Marlee B. O'Neill, Executive Director Pharmacy Quality Assurance Commission
Phone:	360.236.4946
Email:	WSPQAC@doh.wa.gov
Effective Date:	April 2, 2026
Supersedes:	DOH 690-329
Approved By:	Hawkins DeFrance, PharmD Chair, Pharmacy Quality Assurance Commission

The Pharmacy Commission (Commission) and the Department of Health (DOH) frequently receive questions regarding the ability of Opioid Treatment Programs (OTPs) to order, possess, dispense, and administer medications.

All health care professionals and facilities must have statutory authority to order, possess, dispense, or administer legend drugs, including controlled substances. Typically, this statutory authority is found in chapter 69.41 RCW for legend drugs and chapter 69.50 RCW for controlled substances.

An OTP licensed by DOH "[e]ngages in the treatment of opioid use disorder with medications approved by the United States food and drug administration [(FDA)] for the treatment of opioid use disorder and reversal of opioid overdose, including methadone; and [p]rovides a comprehensive range of medical and rehabilitative services" (RCW 71.24.590(8)). Further, RCW 71.24.590(4) permits an OTP to order, possess, dispense, and administer medications "approved by the [FDA] for the treatment of":

- opioid use disorder,
- alcohol use disorder,
- tobacco use disorder, and
- reversal of opioid overdose.

RCW 71.24.590(5) also allows OTPs to "…accept, possess, and administer patient-owned medications." These would be medications previously prescribed, dispensed and delivered to the patient, and then brought to the OTP for secure storage and administration to the patient for which they were prescribed. This would allow for observed administration of patient owned medications that have significant public health impacts, such as hepatitis and tuberculosis medications.

An OTP must obtain additional licensure as required by DOH or the Commission in order to possess any legend drugs, including controlled substances, other than those listed RCW 71.24.590(4). This might include a health care entity license (chapter 18.64 RCW and chapter 246-945 WAC). If an OTP does not elect to obtain an additional facility license, an OTP may have additional drugs ordered, possessed, and used by an appropriately licensed individual practitioner. This individual practitioner would be responsible for the ordering, security, use, and distribution of these drugs.

Washington State Department of Health

Pharmacy Quality Assurance Commission

To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email doh.information@doh.wa.gov.

Guidance Document

Title:	Chart Orders and Signature Use of a Practitioner's Authorized Agent in Long-Term Care Facilities and Hospice Programs
Document Number:	G009
References:	RCW 18.64.011, RCW 18.64.550, RCW 69.41.041 RCW 69.41.055, RCW 69.50.308 and WAC 246-945-010
Contact:	Marlee B. O'Neill, Executive Director Pharmacy Quality Assurance Commission
Phone:	360.236.4946
Email:	WSPQAC@doh.wa.gov
Effective Date:	
Supersedes:	PQAC 51
Approved By:	Hawkins DeFrance, PharmD Chair, Pharmacy Quality Assurance Commission

Use of Chart Orders in Long-Term Care Facilities and Hospice Programs

The Pharmacy Quality Assurance Commission (commission) interprets applicable law as allowing any pharmacy to dispense non-controlled legend drugs to a resident of a long-term care facility or hospice program pursuant to a chart order (RCW 18.64.011, RCW 18.64.550 and RCW 69.41.041). In contrast, the commission interprets applicable law as not permitting any pharmacy to dispense controlled substances to a resident of a long-term care facility or hospice program pursuant to a chart order.

As required by RCW 18.64.550(1) and WAC 246-945-010(5), a chart order will be considered a prescription if it contains:

1. The full name of the patient;
2. The date of issuance;
3. The name, strength, and dosage form of the drug prescribed;
4. Directions for use; and

5. An authorized signature (for further guidance on authorized signatures please refer to the section below titled “Authorized Signatures for Chart Orders”).

A chart order can be communicated telephonically, electronically or via facsimile, and may be communicated by a practitioner’s authorized agent (RCW 18.64.550, RCW 69.41.041 and RCW 69.41.055). The practitioner’s authorized agent must be a licensed nurse, pharmacist, or physician practicing in a long-term care facility or hospice program (RCW 18.64.550(2)).

Authorized Signatures for Chart Orders

RCW 18.64.550 and RCW 69.41.055(2) allow for a practitioner’s authorized agent in a long-term care facility or hospice program to sign a written or electronic chart order for non-controlled legend drugs on behalf of a prescribing practitioner.

As noted above, the practitioner’s authorized agent must be a licensed nurse, pharmacist, or physician practicing in a long-term care facility or hospice program (RCW 18.64.550(2)). The written or electronic signature of a practitioner’s authorized agent cannot be used for any other type of order or prescription for non-controlled legend drugs and can never be used for orders or prescriptions for controlled substances.

Based on the above, the following signature requirements apply to written and electronic chart orders:

1. For written orders, the order must contain
    a. the prescribing practitioner’s signature, or
    b. the signature of the practitioner’s authorized agent, and include the name of the prescribing practitioner
2. For electronic or digital orders, the order must contain:
    a. The prescribing practitioner’s electronic or digital signature, or
    b. The electronic or digital signature of the practitioner’s authorized agent, including the name of the prescribing practitioner. (i.e. Shawn Carter, RN on behalf of Christopher Wallace, MD).

Legislative Ideas – PQAC

*Approved at the June 2025 business meeting

MODERNIZING PHARMACEUTICAL FIRMS

Multiple amendments in chapter 18.64 RCW

Definitions

- Amend definition of manufacturer for the purposes of DSCSA
- Add virtual entities to definitions of manufacturer and wholesaler
- Amending the definition of wholesaler to include minimal use exemption

Licensure.Types

- Add licensure type for 3PLs
- Add licensure type for repackager (separate from manufacturer)
- Add licensure type for out-of-state manufacturers
- Add licensure type for sterile compounding

REMOVING LICENSURE BARRIERS FOR PHARMACY PERSONNEL

Multiple amendments in chapters 18.64 and 18.64A RCW

Examinations

- Move exam requirements in RCW 18.64.080 to rule to allow for more flexibility
- Remove the study plan approval by the commission in the event of three failures

Ancillary.Personnel.and.Facilities

- Remove requirement to submit ancillary utilization plans (AUPs) to the commission, but require policies and procedures be in place prior to utilization of ancillary personnel

OTHER

Retailer.Responsibilities

- Repeal RCW 70.115.050 **Retail sale of hypodermic syringes, needles—Duty of retailer** to remove a regulatory burden on retailers
    - On the sale at retail of any hypodermic syringe, hypodermic needle, or any device adapted for the use of drugs by injection, the retailer shall satisfy himself or herself that the device will be used for the legal use intended.

PETITION FOR ADOPTION, AMENDMENT, OR REPEAL OF A STATE ADMINISTRATIVE RULE

Print Form

In accordance with RCW 34.05.330, the Office of Financial Management (OFM) created this form for individuals or groups who wish to petition a state agency or institution of higher education to adopt, amend, or repeal an administrative rule. You may use this form to submit your request. You also may contact agencies using other formats, such as a letter or email.

The agency or institution will give full consideration to your petition and will respond to you within 60 days of receiving your petition. For more information on the rule petition process, see Chapter 82-05 of the Washington Administrative Code (WAC) at http://apps.leg.wa.gov/wac/default.aspx?cite=82-05.

CONTACT INFORMATION *(please type or print)*

Petitioner's Name: Jenny Arnold & Jeff Harrell

Name of Organization: Washington State Pharmacy Association Members & Cascadia Pharmacy Group

Mailing Address: [redacted]

City: Renton State: WW Zip Code: 98057

Telephone: [redacted] Email: [redacted]

COMPLETING AND SENDING PETITION FORM

- Check all of the boxes that apply.
- Provide relevant examples.
- Include suggested language for a rule, if possible.
- Attach additional pages, if needed.
- Send your petition to the agency with authority to adopt or administer the rule. Here is a list of agencies and their rules coordinators: http://www.leg.wa.gov/CodeReviser/Documents/RClist.htm.

INFORMATION ON RULE PETITION

Agency responsible for adopting or administering the rule: _____

☐ **1. NEW RULE - I am requesting the agency to adopt a new rule.**

☐ The subject (or purpose) of this rule is: _____

☐ The rule is needed because: _____

☐ The new rule would affect the following people or groups: _____

☒ **2. AMEND RULE - I am requesting the agency to change an existing rule.**

List rule number (WAC), if known: WAC 246-945-230 3ci

☒ I am requesting the following change: Clarify asset sale requirements vs stock sale requirements

☒ This change is needed because: Washington is the only state that requires a new state license with a stock purchase and that triggers a new DEA license- which puts undue burden and expense on independent pharamcies and risks loss of access to care and pharmacy deserts.

☒ The effect of this rule change will be: Ensuring a stock purchase pharmacy will be able to maintain current licenses and continue with current contracts will facilitate an environment that will not disrupt patients access to care particularly for rural pharmacies and enable rural pharmacies to stay open.

☒ The rule is not clearly or simply stated: This rule as written currently does not differentiate a stock vs an asset sale and puts undue financial burden on independent pharmacies while also jeopardizing patient access to care due to complexities with contracting and delays with new licensure.

☐ **3. REPEAL RULE - I am requesting the agency to eliminate an existing rule.**

List rule number (WAC), if known: _____

(Check one or more boxes)

☐ It does not do what it was intended to do.

☐ It is no longer needed because: _____

☐ It imposes unreasonable costs: _____

☐ The agency has no authority to make this rule: _____

☐ It is applied differently to public and private parties: _____

☐ It conflicts with another federal, state, or local law or rule. List conflicting law or rule, if known: _____

☐ It duplicates another federal, state or local law or rule. List duplicate law or rule, if known: _____

☐ Other (please explain): _____

Washington State Department of Health

Commission SBAR Communication

Agenda Item/Title: **Pharmacy Changes of Ownership**

SBAR Originally Presented on July 17, 2020

Date SBAR Communication Prepared: June 16, 2020

Reviewer: Lauren Lyles-Stolz, ED

Link to Action Plan:

X Action ☐ **Information** ☐ **Follow-up** ☐ **Report only**

Situation: (Briefly describe the current situation. Give a clear, succinct overview of pertinent issues)

The DOH team supporting the commission is looking for guidance on whether a stock purchase involving more than 50% of the shares in a pharmacy corporation triggers the commission's "Change of Ownership" process.

Background: (Briefly state the pertinent history):

The owner of a pharmacy is required to immediately notify the commission and pay the original license fee whenever there is a change of ownership. (RCW 18.64.043(3), WAC 246-945-230(3)(c) and WAC 246-907-040(2)). A failure to comply with applicable laws and rules can subject a pharmacy to a finding of a deficiency in an inspection or enforcement action (WAC 246-945-005 and RCW 18.64.165).

Pharmacy statutes and rules do not define the phrase "change of ownership". However, the pharmacy commission's new rules chapter and fee rule explain that a "change of ownership" includes changes in business or organizational structure such as a change from sole proprietorship to a corporation, or a change of more than fifty percent ownership in a corporation (WAC 246-945-230(3)(c) and WAC 246-907-040(2)). This is not an exhaustive list but does provide some examples of when the commission will consider a "change of ownership" to have occurred.

A stock purchase involves a person purchasing a business's stock. A purchase of the majority of stock in a business generally results in the transfer of the ownership of the business entity itself, and the entity will continue to own the same assets and have the same liabilities. This is because the shares in a corporation represent proprietary interests in the corporation (RCW 23B.01.400(37)) and an individual or entity who purchases more than 50% of the shares in a corporation would now have a controlling interest in the corporation (RCW 23B.01.400(4)).

The credentialing team with DOH has historically only considered a change in UBI number as triggering the "change of ownership" process. The "Unified Business Identifier" (UBI) number is a nine-digit unique identifier issued to each business that operates within Washington State by the Department of Revenue (DOR). DOH has confirmed with DOR that a sale of the majority of shares in a corporation would not necessarily result in a change to the business's UBI number.

Assessment: (Summarize the facts and give your best assessment. What is going on? Use your best judgment)

It appears very likely that a stock purchase involving more than 50% of the shares in a pharmacy corporation triggers the pharmacy commission's "Change of Ownership" process based on the applicable laws and rules. This is because a purchase of more than 50% of the shares in a pharmacy involves a change of more than fifty percent ownership in a corporation (WAC 246-945-230(3)(c) and WAC 246-907-040(2)).

Commission SBAR Communication

Recommendation: (What actions are you asking the commission to take? What do you want to happen next?

The DOH team recommends the commission find that a stock purchase involving more than 50% of the shares in a pharmacy corporation triggers the commission's "Change of Ownership" process based on the applicable laws and rules.

To implement this decision the pharmacy commission could direct the DOH team to do one, or more, of the following:

1. Publish this FAQ to the listserv and website:

   Updated July 2021:

   Does an individual's (or businesses') acquisition of more than 50% of the shares in a pharmacy corporation trigger the commission's "change of ownership" process?

   Yes, according to statute and rule, pharmacies should immediately notify the commission and comply with the commission's "change of ownership" process if an individual or business acquires more than 50% of the shares in a pharmacy corporation, such as through a stock sale [see RCW 18.64.043(3), WAC 246-945-230(3)(c) and WAC 246-907-040(2)].

2. Ask the DOH team to communicate this decision internally to the credentialing team, inspectors, and investigators that directly support the commission.

Commission SBAR Communication

Agenda Item/Title: 6.3. Rulemaking Request: Updating WAC 246-945-043

Date SBAR Communication Prepared: March 13, 2026

Reviewer: Julia Katz

Link to Action Plan:

☒ **Action** ☐ **Information** ☐ **Follow-up** ☐ **Report only**

Situation:

Commission staff identified outdated references in WAC 246-945-043. The manufacturer names identified in WAC 246-945-043(2), WAC 246-945-043(5), and WAC 246-945-043(6) are no longer accurate.

Background:

Commission staff identified outdated references in WAC 246-945-043. Specifically, the manufacturer names for most of the designated nonnarcotic stimulant drugs have changed since the section of WAC was last updated in July 2020 as part of the commission's rule rewrite.

Assessment:

Rulemaking is necessary to update WAC 246-945-043.

Recommendation:

Commission staff recommend the commission initiate rulemaking to update WAC 246-945-043 and authorize staff to file a CR-101 Rule Inquiry at the April 2, 2026 business meeting.

Follow-up Action:

If authorized, commission staff will file a CR-101 Rule Inquiry package and the task will be added to the commission's rulemaking tracker.

Commission SBAR Communication

Agenda Item/Title: 6.4. Alternate Distribution Models Rulemaking Update

Date SBAR Communication Prepared: March 16, 2026

Reviewer: Julia Katz

Link to Action Plan:

☒ **Action** ☐ **Information** ☐ **Follow-up** ☐ **Report only**

Situation:

Engrossed Substitute Senate Bill (ESSB) 5998 is the session law relating to the 2026-2027 supplemental budget, and was delivered to Governor Feguson on March 13, 2026. A subsection of ESSB 5998 provides direction to the commission regarding the Alternate Distribution Models rulemaking project.

Background:

The commission approved withdrawing the CR-102 Rule Proposal on Alternate Distribution Models at the February business meeting. This allowed the commission additional time to draft rule language since the withdrawal returned the rulemaking to the CR-101 Rule Inquiry step. The CR-102 Notice of Withdrawal took effect on February 17, 2026.

ESSB 5998, as passed by the legislature, includes a subsection that provides notice to the commission on how to proceed with its Alternate Distribution Models rulemaking project.

Specifically, ESSB 5998 at section 225(37) states:

> During the 2025-2027 fiscal biennium, the pharmacy quality assurance commission shall not implement any new or amended rules pertaining to alternative distribution models until legislative direction and authority has been granted, and the rules and a final cost estimate have been presented to the legislature, and the legislature has formally funded implementation of the rules through the omnibus appropriations act or by statute.

ESSB 5998 is anticipated to be signed into law ahead of the commission's April business meeting.

Assessment:

Assuming the Governor signs ESSB 5998 into law with Section 225(37) as written, the commission may consider withdrawing the rulemaking's CR-101. The commission may re-evaluate the need and interest for rulemaking on the topic in the future.

Recommendation:

Commission staff recommend the commission withdraw the CR-101 Rule Proposal package on Alternate Distribution Models.

Follow-up Action:

If authorized, commission staff will file a Notice of Withdrawal for the CR-101 Rule Inquiry package on Alternate Distribution Models.

BEFORE THE WASHINGTON STATE PHARMACY QUALITY ASSURANCE COMMISSION (PQAC)

In the Matter of the Petition of
Bill Osmunson, DDS, MPH
Washington Action for Safe Water

PETITION FOR RULEMAKING AND FORMAL AGENCY DETERMINATION

REGARDING THE CLASSIFICATION OF FLUORIDE COMPOUNDS UNDER RCW 69.38.010

I. PETITIONER

Bill Osmunson, DDS, MPH
Washington Action for Safe Water
10300 181st Ave SE, Issaquah, WA 98027

Billosmunson3@gmail.com

II. STATUTORY BASIS FOR PETITION

This petition is submitted pursuant to **RCW 34.05.330**, requesting a formal agency determination regarding the interpretation and application of **RCW 69.38.010(4)**.

RCW 69.38.010(4) defines "poison" to include:

"any other substance designated by the commission which, when introduced into the human body in quantities of sixty grains or less, causes violent sickness or death."

(60 grains is 3,889 mg. Probable Toxic Dose: 5 mg fluoride/kg body weight)

III. RELIEF REQUESTED

Petitioner respectfully requests that the Commission:

1. **Formally determine** whether fluoride compounds, including but not limited to sodium fluoride and fluorosilicic acid, meet the criteria described in RCW 69.38.010(4);
2. **Clarify whether such compounds have been designated** as "poisons" under the statute;

3. If not designated, **explain the Commission's interpretation** of RCW 69.38.010(4), including:
    - whether designation is discretionary or mandatory;
    - the criteria used to evaluate substances;
    - and how substances with well-documented acute toxicity are treated under the statute;
4. If the Commission determines that fluoride compounds meet the statutory criteria, **initiate rulemaking or other appropriate action** consistent with RCW 34.05.330.

IV. FACTUAL AND SCIENTIFIC BASIS

Fluoride compounds are widely recognized in toxicology as biologically active substances with **well-established dose-dependent adverse effects**, including the potential for serious systemic toxicity under certain exposure conditions.

This characterization is reflected across multiple authoritative sources, including:

- The **National Institutes of Health (NIH), Office of Dietary Supplements**, which identifies fluoride as a substance capable of producing adverse health effects at elevated intake levels, probable toxic dose of 5 mg/kg body weight;
- The **Agency for Toxic Substances and Disease Registry (ATSDR)**, which classifies fluoride and related compounds as substances with recognized toxicological profiles requiring careful exposure assessment, probable toxic dose (PTD): 5 mg fluoride/kg body weight;
- Standard clinical toxicology references, which describe acute fluoride exposure as capable of producing significant gastrointestinal and systemic effects;
- Occupational safety and public health authorities, including federal agencies, which recognize fluoride compounds as hazardous substances under specific exposure conditions.
- Whitford G. Fluoride Toicology and Health Effects. 1996, In: Fejerskov O. EkstrandJ, Fluoride in Denistry 2nd Ed. (PTD): 5 mg fluoride/kg body weight

These sources consistently establish that fluoride is not biologically inert and that its effects are **dose-dependent**, with adverse outcomes documented within ranges relevant to the statutory framework.

V. STATUTORY INTERPRETATION ISSUE

RCW 69.38.010(4) establishes a **dose-based criterion**, focusing on whether a substance is capable of causing serious harm when introduced into the human body within a specified quantity range.

The statute does not distinguish based on intended use, route of administration, or regulatory context, but instead applies to the intrinsic toxicological properties of a substance at defined quantities.

This raises a central question:

How does the Commission interpret and apply RCW 69.38.010(4) to substances with well-documented capacity to cause serious adverse health effects within the statutory quantity range?

VI. NEED FOR FORMAL AGENCY DETERMINATION

A formal determination is necessary because:

- The statute expressly assigns designation authority to the Commission;
- The application of this provision to fluoride compounds has not been clearly articulated;
- The issue involves the intersection of statutory language and established toxicological evidence.

Absent clarification, uncertainty remains regarding how the Commission evaluates substances under RCW 69.38.010(4).

VII. REQUEST FOR WRITTEN RESPONSE

Pursuant to **RCW 34.05.330**, Petitioner respectfully requests a written response stating:

- whether the petition is granted or denied; and
- the basis for the Commission's decision.

VIII. CONCLUSION

This petition seeks a **clear and reasoned interpretation of statutory language**, applied to a substance with well-documented biological and toxicological effects.

Such clarification is necessary to ensure consistent and transparent administration of Washington law.

Appendix B – Prior Board Correspondence (2009)

Petitioner previously sought clarification from the former Board of Pharmacy on a related question; however, the response did not directly address the statutory interpretation presented here (see Appendix B).

Respectfully submitted,

Bill Osmunson, DDS, MPH
Washington Action for Safe Water

Sent Date: March 25, 2026