



WSHA Top Priority State Rule Making

PRIORITY	RULE	AGENCY	DESCRIPTION	PRE-PROPOSAL	PROPOSAL	EXTRA MATERIALS	INTENDED ADOPTION DATE	WSHA POSITION	WSHA CONTACT
1	Certificate of Need	Department of Health	Certificate of Need- The Department of Health is opening all rules related to Certificate of Need (CN) in chapter 246-310 WAC. The Department is considering amending, creating, and repealing some or all rules to clarify, streamline, develop progressive enforcement tools, and modernize language. This review will include examining general and specific facility type need methodologies. Updates to rules will take into account incorporating national optimal approaches, providing clear and consistent guidance, and reducing litigation. As part of the rulemaking process, the department will consider the rulemaking topics in recently withdrawn Preproposals (CR-101's) as well as recent petitions regarding updates to need methodologies. WSHA is in active discussions with the Department to more clearly understand the approach and breadth in this rulemaking.	Pre-Proposal				MONITOR	David Streeter DavidS@wsha.org
1	Telemedicine for Physicians and Physician Assistants	Washington Medical commission	The commission will consider rule making to address the practice of physicians and physician assistants engaging in telemedicine with Washington patients. Possible subjects the commission may address are: What, if any requirements for licensure; recordkeeping requirements; establishing a patient-practitioner relationship; prescribing issues; and standard of care. Regulating the use of telemedicine would place the commission in an active patient safety role.	Pre-Proposal		April 19, 2021 Rulemaking Workshop Packet		MONITOR	David Streeter DavidS@wsha.org
1	Hospital Patient Discharge Information Reporting	Department of Health	DOH is considering amending existing rules and creating new rules on hospital patient discharge information reporting. The rules may prescribe new patient demographic information reported by hospitals; establish a waiver process; strengthen protections of patient health care information to align with federal law changes; clarify and add requirements for data collection and reporting; establish formalized procedures for requesting hospital patient discharge data; prescribe direct and indirect patient identifiers; update or add definitions; make technical updates and clarifications to existing rules; and establish fees for data files and analysis. In 2021, the Washington state legislature passed E2SHB 1272 (chapter 162, Laws of 2021) which requires new demographic information to be collected and waiver requirements to be established. The bill requires hospitals to report patient discharge information related to race, ethnicity, gender identity, sexual orientation, preferred language, disability status, and zip code of residence. It also requires the department to develop a waiver and grant process to assist hospitals that are certified by the Centers for Medicare and Medicaid Services (CMS) as a critical access hospital, certified by CMS as a sole community hospital, or qualifies as a medicare dependent hospital to comply with the requirements. E2SHB 1272 (chapter 162, Laws of 2021) requires the department to complete rule making by July 1, 2022. CHARS currently collects sex, zip code, and race and ethnicity per minimum office of management and budget standards as part of the UB-04 items outlined in WAC 246-455-020. The new reporting of patient demographic information required by the bill goes into effect on January 1, 2023. Rules are necessary to implement the legislation by defining the new patient demographic information and establishing waiver requirements.	Pre-Proposal				MONITOR	Zosia Stanley zosiaS@wsha.org



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1	Alien Emergency Medical Program	Health Care Authority	The agency is amending WAC 182-507-0115 to change the alien emergency medical program's scope of covered services to include testing, assessment, and treatment of conditions that pose a potential threat to public health.	Pre-Proposal	Proposal		07/28/21	MONITOR	Zosia Stanley zosias@wsha.org
1	Waiver for the Electronic Prescribing Mandate- Providers with 10 or More Prescribers	Department of Health	Prescription Monitoring Program Waiver- The Department of Health is proposing a new section in chapter 246-470 WAC to establish a waiver process and criteria for facilities, entities, offices, or provider groups with ten or more prescribers to apply for an exemption from the PMP and electronic health record (EHR) integration required by Substitute Senate Bill (SSB) 5380.	Pre-Proposal	Proposal		By January 1, 2021	MONITOR	David Streeter DavidS@wsha.org
1	Hospital Construction Review	Department of Health	Hospital Construction Review - The Department of Health (DOH) is considering amending licensing regulations to align with the 2018 federal and national construction standards, namely the Facility Guidelines Institute (FGI)'s Guidelines for Design and Construction of Hospitals and Guidelines for Design and Construction of Outpatient Facilities. According to the Pre-Proposal, adopting current standards would allow facilities to take advantage of newer construction methods. This change would also provide the opportunity to be consistent with widely-recognized standards that are vital to the health and safety of hospital patients and staff. A report detailing draft proposals in response to the initial draft of revisions to the WAC was recently released. (WAC 246-320-500 thru 600).	Pre-Proposal		Report on Draft Proposals (10.18.18)	Intended: Spring 2019	MONITOR	David Streeter DavidS@wsha.org
1	Unemployment Eligibility for Health Care Workers During a Public Health Emergency	Employment Security Department	The employment security department (ESD) is seeking to adopt rules regarding unemployment benefits eligibility for health care workers during a public health emergency to implement ESSB 5190 (2021).	Pre-Proposal				CONCERNS	Alicia Eyler aliciae@wsha.org
1	Emergency Medical Services (EMS) and Trauma Care Systems - WAC 246-976	Department of Health	Department of Health he Department of Health (DOH) is updating EMD sections to align with national standards and respond to legislative requirements by: (1) considering updates to align with current national standards; (2) making regulations more clear and concise; (3) responding to statutory requirements; and (4) streamlining initial and renewal application processes for prehospital services licenses and EMS provider certification. ((Ch. 246-976 WAC))	Pre-Proposal				MONITOR	Alicia Eyler AliciaE@wsha.org
1	Right of involuntarily detained/committed individuals to refuse antipsychotic medication	Health Care Authority	The agency intends to develop rules regarding the right of involuntarily detained/committed individuals to refuse antipsychotic medication as required by RCW 71.05.215	Pre-Proposal				MONITOR	Cara Helmer Carah@wsha.org
1	Whistleblower Complaints	Department of Health	The Department of Health (department) is considering revising sections of this chapter to implement SHB 1049 (chapter 62, Laws of 2019) and to ensure the rules are clear, up to date, and align with best practices. Rulemaking is necessary to align rule definitions and criteria with current law, which expanded whistleblower protections. These rule updates are needed to ensure consistency and enforceability.	Pre-Proposal		Draft Rules		MONITOR	Cara Helmer Carah@wsha.org



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1	Severity Matrix for Fines Related to Psychiatric Hospital Enforcement	Department of Health	Section 3 of SHB 2426 directs the department to adopt in rule specific fine amounts in relation to the severity of noncompliance by a psychiatric hospital. A fine would only be assessed if the department determines the psychiatric hospital has previously been subject to an enforcement action for the same or similar type of violation of the same statute or rule, or has been given any previous statement of deficiency that included the same or similar type of violation of the same or similar statute or rule, or when the psychiatric hospital failed to correct noncompliance with a statute or rule by a date established or agreed to by the department.	Pre-Proposal		Draft Rules		SUPPORT WITH CONCERNS	Cara Helmer Carah@wsha.org
1	Audio-Only Telemedicine Implementation	Office of the Insurance Commissioner	RCW 48.43.735 addresses requirements for coverage of telemedicine services by health plans. Prior to enactment of ESHB 1196, RCW 48.43.735 expressly excluded audio-only telephone from the definition of "telemedicine". ESHB 1196 removes the exclusion of audio-only telemedicine from the coverage requirement, establishes several conditions for coverage of such services and amends statutory language related to telemedicine payment parity. Rules may be needed to clarify terms related to several components of the new law. Such rules will facilitate implementation of the law by ensuring that all affected entities understand their rights and obligations under the new law.	Pre-Proposal		Rule Page		MONITOR	David Streeter DavidS@wsha.org
1	Occupational Exposure to Infectious or Contagious Diseases	Department of Labor & Industries	In accordance with 2021's ESSB 5092, section 220(8), the department is initiating rule making for occupational health protections related to infectious diseases to ensure the state has general guidelines to follow in the case of an infectious disease outbreak. This would include when there is an outbreak subject to a public health emergency under a national or state declared state of emergency.	Pre-Proposal				MONITOR	David Streeter DavidS@wsha.org
1	Workers' Comp Financial Qualification Rules	Department of Labor & Industries	The purpose of this rule making is to update the rules for the financial qualification and maintenance of self-insurance certification, so that these rules are consistent with modern business practices. Existing rules will be amended, and new sections may be added. Existing rules are dated and out of alignment with industry best practices. The key objectives of the rule-making effort are to: <ul style="list-style-type: none"> •Ensure self-insured employers can accurately and timely provide workers' compensation benefits to their workers; •Protect and safeguard the insolvency trust fund; •Promote transparency for the department of labor and industries (L&I) actions when a firm is placed on financial watch; •Make the rules relevant to current financial conditions and business models; and •Create efficient and adaptable standards for employers' overall financial management. 	Pre-Proposal				MONITOR	David Streeter DavidS@wsha.org



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1	OID Remote Dispensing Sites	Pharmacy Quality Assurance Commission	SSB 6086 mandates that the commission adopt rules to establish the minimum standards for opioid use disorder (OUD) medication remote dispensing sites. Consequently, there is no alternative to adopting rules. Current rules related to storing drugs outside of a pharmacy do not adequately cover the minimum standards and exclude certain facilities from having remote dispensing sites, which does not align with the intent of the law. Furthermore, these regulations must be in rule to [be] enforceable.	Pre-Proposal				MONITOR	David Streeter DavidS@wsha.org
1	EMS Data Reporting for SUD Treatment	Department of Health	Updates to existing sections of chapter 246-976 WAC and the establishment of new sections may be needed to align existing ambulance and aid service requirements with RCW 70.168.090, as revised under SSB 5380. RCW 70.168.090 now requires licensed ambulance and aid services to report patient data electronically to the department and allow for certain data sharing for the purpose of substance abuse treatment. It is anticipated that amendments to existing EMS data rules and new sections may need to be created to ensure clear and concise data submission standards and to produce quality, usable data for improving standards of care and best practice for the benefit and safety of the public.	Pre-Proposal		Rule Page		MONITOR	David Streeter DavidS@wsha.org
1	Exempting Patients in Nursing Homes and Long-Term Acute Care Hospital from the Opioid Prescribing Rules	Washington Medical Commission	Since the rules related to ESHB 1427 became effective January 1, 2019, the commission has continued to receive comments related to long term acute care and nursing home patients. To address this issue, the commission filed an interpretive statement: "Exempting Patients in Nursing Homes and Long-Term Acute Care Hospital from the Opioid Prescribing Rules." While the interpretive statement has helped to curb the comments and concerns from prescribers, the commission feels this important exemption should be in rule.	Pre-Proposal				MONITOR	David Streeter DavidS@wsha.org
1	LTSS Eligibility	Department of Social and Health Services	The department is adding a new section in chapter 388-106 WAC describing LTSS presumptive eligibility and functional eligibility criteria for clients who are discharging from acute care hospitals or diverting from community psychiatric facilities into an in-home setting with home and community-based services.	Pre-Proposal				SUPPORT	Zosia Stanley zosiaS@wsha.org



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1	Presumptive Eligibility for Long-Term Care	Health Care Authority	The agency is creating new sections in chapters 182-513 and 182-515 WAC to create presumptive eligibility for long-term care in home when a client is discharged home from an acute care hospital or state hospital diversion. During the course of this review, the agency may identify additional related changes that are required in order to improve clarity or update policy.	Pre-Proposal				SUPPORT	Zosia Stanley zosiaS@wsha.org
1	Trauma Designation Process and Criteria	Department of Health	Since the trauma system's inception, there has not been a review of the process or criteria by which the trauma care regions and department make min/max decisions. The first established criteria have not been formalized in rule and have been used in varying degrees by trauma care regions. As the trauma system matures, trauma centers have expressed interest in applying for level I trauma designation and there is currently no process or criteria in place to objectively evaluate the need and impact of additional trauma centers.	Pre-Proposal				MONITOR	Zosia Stanley zosiaS@wsha.org
1	Charity care	Department of Health	The Department of Health will consider rulemaking to revise the state regulations pertaining to charity care (WAC 246-453) to comply with legislation passed in 2018.	Pre-Proposal		Rulemaking activity		CONCERNS	Zosia Stanley zosiaS@wsha.org
2	E-Prescribing Waiver	Department of Health Pharmacy Quality Assurance Commission	Rules are necessary to allow for a waiver from compliance with the direction given by the legislature in SSB 5380, which mandates all controlled substances be electronically communicated to pharmacies beginning January 1, 2021. The bill directed the department of health (department) to develop a waiver process which a practitioner can use if they have an economic hardship, technological limitation, or other exceptional circumstance that prevents them [from] complying with the mandate.	Pre-Proposal	Proposal		06/04/21	MONITOR	David Streeter DavidS@wsha.org
2	DDA HCBS Waiver Alignment with CMS	Department of Social and Health Services	DDA is planning to amend chapter 388-845 WAC in order to align the rules with amendments recently approved by the Centers for Medicare and Medicaid Services. The amendments affect all five of DDA's home and community-based services waivers. During the course of this review, the department may make additional changes that are necessary to improve clarity or update policy.	Pre-Proposal	Proposal		07/28/21	MONITOR	Zosia Stanley zosiaS@wsha.org
2	Medicaid State Plan Amendment- Payment Methodology for Physician, Family Planning, and Mental Health Services	Health Care Authority	HCA intends to submit SPA 21-0019 to update the methodologies for physician, mental health, and family planning services. These updates are to align with the recent 2021-2023 biennial legislative budget, which included increases to these programs.		Notice			MONITOR	Andrew Busz AndrewB@wsha.org
2	Medicaid State Plan Amendment- Nursing Facility, Adult Family Home, Individual Provider, and Agency Provider Rates	Health Care Authority	HCA in conjunction with the aging and long-term support administration in the department of social and health services (DSHS) intends to submit Medicaid SPA 21-0026 in order to increase the reimbursement rates for individual providers, agency providers, and adult family homes, and raise the nursing facility budget dial and swing bed rates.		Notice			MONITOR	Andrew Busz AndrewB@wsha.org
2	Student Health Plans	Office of the Insurance Commissioner	The commissioner is considering adopting rules to add new sections and amend existing rules necessary to implement chapter 53, Laws of 2021 (HB 1009), regarding student health plan coverage and adopting technical corrections.	Pre-Proposal		Rule Page		MONITOR	Andrew Busz AndrewB@wsha.org



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2	Administrative Day Rate and Swing Bed Day Rate	Health Care Authority	The agency is amending WAC 182-550-4550 to provide hospitals an administrative day rate for days in which a postpartum client does not meet criteria for acute inpatient level of care but their infant is still an inpatient being observed for potential neonatal abstinence/opioid withdrawal syndrome and the primary and appropriate first line treatment for the infant is continuous care by the parent. During the course of this review, the agency may identify additional related changes that are required in order to improve clarity or update policy.	Pre-Proposal				MONITOR	Andrew Busz Andrewb@wsha.org
2	WAC 182-550-1700 Authorization and Utilization Review of Inpatient and Outpatient Hospital Services and 182-550-6250 Pregnancy—Enhanced Outpatient Benefits; Other Related Rules as Appropriate	Health Care Authority	HCA is amending these rules to update outdated references, terminology, and language to align with behavioral health integration. During the course of this review, HCA may identify additional related changes that are required in order to improve clarity or update policy.	Pre-Proposal				MONITOR	Andrew Busz Andrewb@wsha.org
2	Health Insurance Discrimination and Gender Affirming Treatment	Office of the Insurance Commissioner	The commissioner is considering adopting rules to add new sections and amend existing rules necessary to implement chapter 280, Laws of 2021 (SB 5313), regarding health insurance discrimination and gender affirming treatment.	Pre-Proposal		Rule Page		MONITOR	Andrew Busz Andrewb@wsha.org
2	Using Respectful Language	Office of the Insurance Commissioner	Chapter 275, Laws of 2020 (HB 2390) amended several statutes to reflect respectful language as identified under current law by replacing references to "handicapped persons" with references to "individuals with disabilities." Rules may be necessary to amend WAC 284-50-330 to reflect the language implemented in statute.	Pre-Proposal		Rule Page		NEUTRAL	Andrew Busz Andrewb@wsha.org Alicia Eyer aliciae@wsha.org
2	Appointment of Nonelected Members of Local Boards of Health	Washington State Board of Health	During the 2021 legislative session, the legislature passed E2SHB 1152. Among other changes, this bill made changes to the required composition of local boards of health by requiring an equal number of members who are nonelected officials. The statute specifies groups of individuals that must be represented on the local board of health. The legislation also requires the board to establish rules for the appointment process of these nonelected members of local boards of health in a manner that is fair and unbiased, and ensure to the extent possible a balanced representation of elected and nonelected persons with diversity of expertise and experience.	Pre-Proposal		Rule Page		MONITOR	Alicia Eyer aliciae@wsha.org
2	Certification of Stillbirth	Department of Health	DOH is considering amending and creating new rules in chapter 246-491 WAC to prescribe the information that displays on the certification of birth resulting in stillbirth, add the certification of birth resulting in stillbirth to existing requirements for a person to prove eligibility to obtain the certification, change the issuance process from paper to electronic, and make technical updates to align with chapter 70.58A RCW. The rules may also amend WAC 246-490-200 to remove the exclusion of fetal deaths from being registered electronically.	Pre-Proposal				MONITOR	Alicia Eyer aliciae@wsha.org



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2	Nursing Assistant Standards Update	Nursing Care Quality Assurance Commission	NCQAC identified that chapter 246-841 WAC, excluding WAC 246-841-520, 246-841-720, and 246-841-990; and chapter 246-842 WAC need to be updated to reflect best practices, eliminate redundancy, and make other necessary revisions. Legislated work by NCQAC with key interested parties in 2018-2020 confirms the identified need for updating the rules. The coronavirus disease 2019 (COVID-19) pandemic magnifies the need and urgency for changes to the rules which may eliminate barriers to career advancement for nursing assistants to help address the nursing assistant shortage in health care. Specifically NCQAC is considering: (1) Repealing chapter 246-842 WAC. Chapters 246-841 and 246-842 WAC are similar. Repealing chapter 246-842 WAC may eliminate unnecessary redundancy, which creates confusion about requirements. Any requirements that may need to be retained could be moved to chapter 246-841 WAC; (2) updating the rules overall to reflect the most current standards and practice, clarifying and updating curriculum and testing requirements for training programs, and eliminating barriers to career advancement for nursing assistants to help address the nursing assistant shortage in health care; and (3) standardizing the scope of practice for nursing assistance as allowed by law. The scope of practice for nursing assistants varies depending on the work setting. NCQAC believes standardizing the scope of practice across work settings could eliminate confusion.	Pre-Proposal				MONITOR	Alicia Eyler aliciae@wsha.org
2	Licensure for Mental Health counselors, Marriage and Family Therapists, and Social Workers (Ch. 246-809 WAC)	Department of Health	Licensure for Mental Health counselors, Marriage and Family Therapists, and Social Workers (Ch. 246-809 WAC) - The Department of Health (DOH) is considering developing new and revised requirements related to supervision of associates and the approved supervisor requirements in order to better prepare associates for independent licensure. In addition, the department is considering amending the recordkeeping, education, and continuing education requirements to strengthen the requirements and align them with current trends in practice. The department will also consider making clarifications and technical changes in other licensing standards, as needed.	Pre-Proposal				MONITOR	Alicia Eyler aliciae@wsha.org
2	WAC 388-97-0300 Notice of rights and services	Department of Social and Health Services	Federal rules regarding nursing home clinical records were amended by the Centers for Medicare and Medicaid Services (CMS) through an 1135 blanket waiver in response to the COVID-19 public health emergency. The amended federal rules are effective March 1, 2020, through the end of the national emergency declaration. The department will monitor federal nursing home communication to ensure this rule making reflects the same span of time as the suspended federal rule regarding clinical records. This will help ensure federal and state rules remain similar and provide for consistent application of clinical record rules during the investigation process.	Pre-Proposal				SUPPORT	Alicia Eyler aliciae@wsha.org Zosia Stanley zosiaS@wsha.org



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2	TB Screening Waiver	Department of Social and Health Services	The department is considering amending the following rules to identify the period of time tuberculosis testing is suspended or waived during the declared emergency of COVID-19 per Proclamation by the Governor 20-05.	Pre-Proposal				MONITOR	Alicia Eyler Zosia Stanley
2	Chapter 246-926 WAC Radiological technologists	The Department of Health	Chapter 246-926 WAC Radiological technologists - The Department of Health (department) is considering opening rules to clarify, streamline, and modernize the regulations for cardiovascular invasive specialists, radiologic technologists, radiologist assistants, and X-ray technicians. This may include repealing or adding new sections of rules, clarifying competency requirements and identifying authorized duties.	Pre-Proposal				MONITOR	Alicia Eyler AliciaE@wsha.org
2	Inpatient Psychiatric Services	Health Care Authority	The agency is amending this section to replace outdated terms such as "residential support network (RSN)" and "mental health designee," to delete references to the department of mental health, and to update language regarding authorization and certification for inpatient psychiatric care consistent with the current managed care and administrative services organization structure. During the course of this review, the agency may identify additional related changes that are required in order to improve clarity or update policy.	Pre-Proposal				MONITOR	Brooke Evans BrookeE@wsha.org
2	Removal of Community Support Benefit Exclusion for IMD	Health Care Authority	The agency is amending this rule to remove the community support services benefit exclusion for institutes for mental diseases.	Pre-Proposal				MONITOR	Brooke Evans BrookeE@wsha.org
2	Family Initiated Treatment	Health Care Authority	As required in RCW 71.34.670 for family-initiated treatment, the authority intends to adopt rules to define "appropriately trained professional person" operating within their scope of practice within Title 18 RCW for the purposes of conducting mental health and substance use disorder evaluations under RCW 71.34.600(3) and 71.34.650(1). During the course of this review, the authority may identify additional related changes that are required in order to improve clarity or update policy.	Pre-Proposal				MONITOR	Cara Helmer Carah@wsha.org
2	Chapter 246-08 WAC, Practice and Procedure	Department of Health	Department of Health (DOH) - Chapter 246-08 WAC, Practice and Procedure. DOH has opened this chapter to review its rules regarding adjudicative proceedings for declaratory orders; public record requests; agency indexes; and general agency administrative processes. The department is reviewing existing rules within the chapter to identify amendments that may be necessary as a result of changes in statutes, changes in internal operations, opportunities to streamline processes to reduce regulatory burden without compromising public health and safety, and to provide clear, concise and reasonable rules. This rulemaking excludes: WAC 246-08-390 Acquisition, security, disclosure and destruction of health information; and WAC 246- 08-400, How much can a health care provider charge for searching and duplicating health care records.	Pre-Proposal				MONITOR	Cara Helmer Carah@wsha.org



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2	2022 Industrial Insurance Rates	Department of Labor & Industries	L&I is required by law to establish and maintain a workers' compensation classification plan, and to set premium rates that are: (1) The lowest necessary to maintain actuarial solvency of the accident and medical aid funds; and (2) designed to attempt to limit fluctuations in premium rates. The plan must be consistent with recognized principles of insurance. L&I is also required by law to offer retrospective rating plans to employers as a further incentive to encourage workplace safety and prevent employee injury. Rules concerning the nonimpact to employer experience rating for claim costs incurred due to a declared public health emergency will be reviewed.	Pre-Proposal				MONITOR	David Streeter DavidS@wsha.org
2	Workers' Comp COVID-19 Relief	Department of Labor & Industries	Data shows that the COVID-19 pandemic and resulting government required shutdowns disproportionately impacted employers who reported hours in forty-two risk classes thereby reducing the options to help workers return to work. This may lead to increased claim losses for businesses in the affected classes compared to other employers. For affected retro participants who experience increased loss ratios, they may be subject to a negative bias resulting in their refunds being reduced or additional premium assessed. Conversely, the less affected retro participants may experience a positive bias whereby they may receive enhanced refunds that they would not have otherwise received but for the pandemic's adverse impact on their peers.	Pre-Proposal				SUPPORT	David Streeter DavidS@wsha.org
2	Physician Assistants	Washington Medical Commission	The commission is considering updating the PA chapter to more closely align with current industry standards, modernize regulations to align with current national industry standards and best practices, and provide clearer rules language for licensed PAs. Included in this rule-making proposal is incorporating the requirements of SHB 2378 Concerning physician assistants. The commission is considering adding new sections in accordance with SHB 2378. This bill combines the PA licensing under the Washington medical commission effective July 1, 2021, and eliminates the profession of osteopathic physician assistant. The bill instructs the commission to consult with the board of osteopathic medicine and surgery when investigating allegations of unprofessional conduct by a licensee under the supervision of an osteopathic physician. The bill also reduces administrative and regulatory burdens on PA practice by moving practice agreements from an agency-level approval process to employment level process. Employers are required to keep agreements on file. The bill requires the commission to collect and file the agreements. Changes nomenclature from "delegation" to "practice" agreement and from "supervising physician" to "participating physician" agreement.	Pre-Proposal		April 7, 2021 Rule Workshop Packet		SUPPORT	David Streeter DavidS@wsha.org



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2	De-scheduling Epidiolex	Pharmacy Quality Assurance Commission	Epidiolex is an FDA-approved cannabidiol with less than 0.3% THC, used to help treat some seizure disorders. The 2018 Agricultural Improvement Act (2018 Farm Bill) amended the Controlled Substances Act and declassified hemp products with less than 0.3% THC from Schedule I and excluded hemp from the definition of marijuana. Epidiolex remained on Schedule V until April 6, 2020, when the United States Drug Enforcement Agency (DEA) announced that it would no longer be a federally controlled substance. Following this statement and decision from the 2018 Farm Bill, the commission received a petition from stakeholders to update their rules to reflect the change. In response to the federal change, stakeholder petition, and in support of the COVID-19 pandemic response, the commission implemented emergency rules to delete Epidiolex from the list of Schedule V controlled substances on July 10, 2020, under WSR 20-15-059. This proposal is opening WAC 246-945-056 to consider making the emergency rule permanent and align Washington regulation with the federal decision.	Pre-Proposal				SUPPORT	David Streeter DavidS@wsha.org
2	Telemedicine for Osteopathic Physicians and Surgeons	Department of Health	The board will consider rulemaking to address the practice of osteopathic physicians and surgeons engaging in telemedicine with Washington State patients. Possible subjects the board may address are: licensure requirements; record keeping requirements; establishing a patient-practitioner relationship; prescribing issues; and standard of care. Regulating the use of telemedicine ensures the board continues to take an active patient safety role as technology evolves.	Pre-Proposal				SUPPORT	David Streeter DavidS@wsha.org
2	Allopathic CDTA	Washington Medical Commission	The Washington Medical Commission (commission) is considering creating new rule sections to regulate the use of collaborative drug therapy agreements (CDTA).	Pre-Proposal				MONITOR	David Streeter DavidS@wsha.org
2	Medical marijuana consultant certification	Department of Health	The department is opening this chapter of rules to consider amendments that would enhance and clarify training requirements and practice parameters of a medical marijuana certified consultant.	Pre-Proposal				MONITOR	David Streeter DavidS@wsha.org
2	New rules to implement chapter 220, Laws of 2017 (SSB 5514), Emergency department patient care information—Department of health collection—Confidentiality	Department of Health	Department of Health - DOH is considering creating new rules to implement chapter 220, Laws of 2017 (SSB 5514), Emergency department patient care information—Department of health collection—Confidentiality, by establishing reporting and data release requirements for emergency department data collection.	Pre-Proposal		RHINO rulemaking website		MONITOR	David Streeter DavidS@wsha.org
2	Long-Term Services and Supports Trust Program Implementation: Phase 3	Employment Security Department	The long-term services and supports trust program under Title 50B RCW requires rule making for implementation. Rule making is being done in distinct phases. This preproposal statement of inquiry begins phase 3 to implement portions of the program that are under the employment security department's (ESD) authority. This phase includes, but is not limited to, determinations of "qualified individual" status, audit functions, designated representatives, and other rules as necessary.	Pre-Proposal				MONITOR	David Streeter DavidS@wsha.org



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2	Reinstatement or Amendment of Nursing Home Admissions Rules	Department of Social and Health Services	This rule making is necessary to establish a timeframe when the portions of the rules were suspended during the COVID-19 pandemic, and nursing homes were not required to comply with the suspended portions of the rules.	Pre-Proposal				MONITOR	Zosia Stanley zosias@wsha.org
2	Stabilization, Assessment, and Intervention Facility (SAIF) Program	Department of Social and Health Services	The developmental disabilities administration (DDA) is planning to write new rules to govern the new stabilization, assessment, and intervention facility (SAIF) program. The SAIF program was created by the 2019-2021 operating budget (ESHB 1109, section 203(j), chapter 415, Laws of 2019). During the course of this review, the department may make additional changes that are necessary to improve rule clarity or update policy.	Pre-Proposal				MONITOR	Zosia Stanley zosias@wsha.org
2	Stem Cell Therapy	Washington Medical Commission	The commission has received complaints from licensees, stakeholders, and the public about the use of stem cells. The complaints have been regarding the advertising related to stem cell therapy, practitioners using non-FDA approved stem cell therapy, as well as concerns stem cell therapy not being within a practitioner's scope of practice. Regulating the use of stem cell therapy would place the commission in an active patient safety role. Rule making would provide clarity around this emerging medical technology and procedure to help avoid potential discipline and increase patient safety. New sections being considered will potentially benefit the public's health by ensuring participating providers are informed and regulated by current national industry and best practice standards.	Pre-Proposal				MONITOR	Zosia Stanley zosias@wsha.org
2	WAC 388-97-1260 Physician services, and other related rules as may be required to identify the period of time that portions of the rule was held in suspension during the declared emergency of COVID-19 per Proclamation by the Governor 20-05.	Department of Social and Health Services	This rule making is necessary to establish a timeframe when the portions of the rules were suspended during the COVID-19 pandemic, and nursing homes were not required to comply with the suspended portions of the rules.	Pre-Proposal				MONITOR	Zosia Stanley zosias@wsha.org
2	DDA Oversight and Enforcement of Provider Practices	Department of Social and Health Services	The rule making is necessary to incorporate 2SHB 1651 (chapter 271, Laws of 2020) into rules. This passed legislation requires the department to adopt rules as necessary to provide oversight and enforcement of provider practices related to developmental disabilities administration client rights for providers licensed or certified by the department.	Pre-Proposal				MONITOR	Zosia Stanley zosias@wsha.org



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PRIORITY	RULE	AGENCY	DESCRIPTION	PRE-PROPOSAL	PROPOSAL	EXTRA MATERIALS	INTENDED ADOPTION DATE	WSHA POSITION	WSHA CONTACT
3	Allowing Master's Level Therapists to Treat Injured Workers	Department of Labor & Industries	Allowing Master's Level Therapists to Treat Injured Workers- L&I rules don't currently allow master's level therapists (MLTs) to treat injured workers. Stakeholders requested L&I change the rules and allow these providers to treat workers for accepted conditions within the providers' scope of practice. L&I decided to initiate a pilot to help determine how MLTs can best be incorporated into the workers' compensation setting. Under this pilot these current provisions related to treatment by MLTs are waived for pilot participants only. The pilot will begin on January 1, 2020 and the exceptions granted are effective throughout a four-year pilot period or as otherwise specified. Labor & Industries may pay qualified providers participating in the project to deliver appropriate behavioral and mental health interventions to workers with an open workers' compensation claim. Pilot program results, including billing patterns, submission of required documentation, and referrals for further services will be considered in developing final rule language, medical coverage decisions, and/or payment policy. L&I has determined this waiver is in the public interest and necessary to conduct this pilot project.	Pre-Proposal			12/03/19	SUPPORT	David Streeter DavidS@wsha.org
3	WAC 182-531-1675 Washington apple health—Gender affirming interventions for gender dysphoria	Health Care Authority	The agency is revising this rule to: <ul style="list-style-type: none"> •Remove the list of noncovered services and clarify that requests will be evaluated for medical necessity; •Remove barriers and unnecessary administrative processes for the client and provider; and •Streamline the authorization process. The proposed rule: <ul style="list-style-type: none"> •Provides that psychosocial evaluations shall be effective for eighteen months instead of twelve; •Allows clients to document safety concerns that have prevented them from living full time in the desired gender; and •Includes alternate requirements for clients who have not met the standard documentation requirements for surgery. Reasons Supporting Proposal: See purpose.	Pre-Proposal	Proposal		01/27/21	MONITOR	Alicia Eyler aliciae@wsha.org
3	Independent Medical Examination Specialist Availability	Department of Labor & Industries	The rule will address how to accommodate the injured worker if no approved independent medical examiner in the specialty needed is available in a reasonably convenient location as well as how telemedicine IMEs may be used.	Pre-Proposal			04/07/21	MONITOR	David Streeter DavidS@wsha.org
3	Prenatal Tests - Chapter 246-680 WAC Congenital and Heritable Disorders	Washington State Board of Health	Washington State Board of Health - Prenatal Tests - Chapter 246-680 WAC Congenital and Heritable Disorders - This rule outlines prenatal screening and diagnostic tests that are considered to be medically necessary and are required to be included in benefits packages provided by insurers, health care service contractors, and health maintenance organizations.	Pre-Proposal	Proposal	Supplemental Notice	06/09/21	SUPPORT	Alicia Eyler AliciaE@wsha.org



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PRIORITY	RULE	AGENCY	DESCRIPTION	PRE-PROPOSAL	PROPOSAL	EXTRA MATERIALS	INTENDED ADOPTION DATE	WSHA POSITION	WSHA CONTACT
3	Ambulance Quality Assurance Fee	Health Care Authority	Rules are necessary to provide for a quality assurance fee for specified providers of emergency ambulance to be added to the base funding from all other sources supporting additional medicaid payments to nonpublic and nonfederal providers. Additionally, a section is being added for a dedicated fund established by the treasury as the ambulance transport fund. During the course of this review, the agency may identify additional related changes that are required in order to improve clarity or update policy.	Pre-Proposal	Proposal		07/07/21	MONITOR	Andrew Busz Andrewb@wsha.org
3	Pharmacy Licensing Fees	Pharmacy Quality Assurance Commission	The Department of Health in consultation with the commission, is considering creating a new section in the chapter of rule to move existing licensing fees collected by the commission into the new consolidated chapter created by the commission. The department, in consultation with the commission, will also consider changes to renewal cycles, and restructuring the fees for drug researchers as requested by stakeholders during public comment of the pharmacy chapter rewrite.	Pre-Proposal	Proposal		07/14/21	MONITOR	David Streeter DavidS@wsha.org
3	Long-Term Services and Supports Program Implementation: Phase 2	Employment Security Department	This begins phase 2 to implement portions of the program that are under ESD's authority. This phase includes, but is not limited to, premium collection, collective bargaining agreement exemptions, election of coverage by self-employed individuals, refunds, cadence of reporting and payments, appeals, and other rules as necessary.	Pre-Proposal	Proposal		07/15/21	MONITOR	David Streeter DavidS@wsha.org
3	WAC 182-550 Housekeeping Updates	Health Care Authority	HCA is amending these sections to fix outdated behavioral health references and terminology, to update references to correct state agencies, and other minor housekeeping changes.	N/A	Proposal		07/20/21	MONITOR	Brooke Evans BrookeE@wsha.org
3	L&I Outpatient Hospital Payment Policy	Department of Labor & Industries	The two rules L&I is considering amending are in conflict with each other because the underlying federal regulations by the Centers for Medicare and Medicaid Services changed on January 1, 2017, creating the conflict between the two listed rules. Amending and aligning the conflicting rules would eliminate any confusion regarding L&I's outpatient hospital payment policy.	Pre-Proposal	Proposal		08/31/21	MONITOR	Andrew Busz Andrewb@wsha.org
3	DDA Assessment	Developmental Disability Administration	DDA is planning to amend chapter 388-828 WAC to implement the consumer-directed employment program and align with changes being made to modernize the comprehensive assessment reporting evaluation (CARE) system. During the course of this review, the department may make additional changes that are necessary to improve clarity or update policy.	Pre-Proposal	Proposal		09/11/21	MONITOR	Zosia Stanley zosiaS@wsha.org
3	Posting of Citations and Notices	Department of Labor & Industries	The purpose of this rule making is to change the length of time that a citation and notice needs to be posted on an employee safety bulletin board; this includes any correspondence related to an employee complaint. The department of labor and industries (L&I) is proposing to change the amount of time a citation and notice is posted from three working days to seven working days, and add language clarifying that weekends and holidays are not included in the posting time period. L&I is also proposing to add language giving the employer the option to use electronic means to supplement the safety bulletin board for those employees that don't work where the physical board is located, such as those who telework. Please see below for the proposed amendments.	Pre-Proposal	Proposal		09/21/21	NEUTRAL	David Streeter DavidS@wsha.org



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PRIORITY	RULE	AGENCY	DESCRIPTION	PRE-PROPOSAL	PROPOSAL	EXTRA MATERIALS	INTENDED ADOPTION DATE	WSHA POSITION	WSHA CONTACT
3	Captive Insurance	Office of the Insurance Commissioner	The act relating to captive insurance (2SSB 5315) has become effective as law (chapter 281, Laws of 2021). This law establishes statutory framework for Washington-based private entities and public institutions of higher education to manage their risks through captive insurers, which will require proper regulation and taxation by the office of the insurance commissioner (OIC). This law also authorizes OIC rule making to incorporate the statutory framework and requirements for captive insurance into WAC, along with implementation processes, clarifications, and regulatory guidance. The commissioner will consider rule making related to determining eligibility of captive insurers, registering and renewing eligible captive insurers, enforcement, and collecting associated taxes, registration fees, and annual renewal fees from captive insurers that are licensed by their domicile jurisdictions and insure Washington-based entities. This law does not make Washington a captive domicile state.	Pre-Proposal		Rule Page		MONITOR	Andrew Busz Andrewb@wsa.org
3	Medicaid SPA: Sole Community Hospital Rates	Health Care Authority	The health care authority (HCA) intends to file SPA 21-0016 to implement ESSB 5092 recently passed by the Washington state legislature. ESSB 5092 directs HCA to implement changes to payments to hospitals meeting the following criteria: (a) Must be certified by the Centers for Medicare and Medicaid Services as Sole Community Hospitals as of January 1, 2013; (b) Must have had less than one hundred fifty acute care licensed beds in fiscal year 2011; (c) Must have a level III adult trauma service designation from the department of health as of January 1, 2014; (d) Must be owned and operated by the state or a political subdivision; and (e) Must accept single bed certification patients according to RCW 71.05.745. Rates must be increased to one hundred fifty percent of the hospital's fee-for-service rates. HCA must discontinue this rate increase after June 30, 2023, and return to the payment levels and methodology for these hospitals that were in place as of January 1, 2018.	Notice				MONITOR	Andrew Busz Andrewb@wsa.org
3	RCL Demonstration Project	Department of Social and Health Services	This rule making will ensure that RCL eligibility aligns with the federal Money Follows the Person (MFP) demonstration eligibility criteria. The Consolidated Appropriations Act of 2021, Section 204 outlines an extension of MFP rebalancing demonstration and changes the institutional residency period requirement, striking the ninety day institutionalized eligibility period and inserting a sixty day institutionalization period. In addition, MFP demonstration eligibility includes all settings identified as home and community-based settings. RCL is the name of Washington state's MFP demonstration.	Pre-Proposal				MONITOR	Andrew Busz Andrewb@wsa.org



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PRIORITY	RULE	AGENCY	DESCRIPTION	PRE-PROPOSAL	PROPOSAL	EXTRA MATERIALS	INTENDED ADOPTION DATE	WSHA POSITION	WSHA CONTACT
3	RN Staffing Levels in Nursing Homes	Department of Social and Health Services	This rule making is necessary to implement ESHB 1120 (chapter 203, Laws of 2021). The amendments to WAC 388-97-1080 will reestablish requirements for registered nurse (RN) staffing levels in nursing homes, and the exception process for the RN standard. The amendments to WAC 388-97-1090 will reestablish requirements for direct care staffing, as well as associated oversight activities and penalties for noncompliance. These rules were held in suspension during the COVID-19 pandemic, in accordance with Governor's Proclamation 20-18.	Pre-Proposal				NEUTRAL	Alicia Eyler aliciae@wsha.org
3	Ordering Home Health Services by Non-Physician Practitioners Update	Health Care Authority	HCA is amending these rules to change occurrences of "ordering physician" to "authorized practitioner" to align with amendments in chapters 182-543 and 182-551 WAC recently made in WSR 21-12-051. During the course of this review, HCA may identify additional related changes that are required in order to improve clarity or update policy.	Pre-Proposal				MONITOR	Alicia Eyler aliciae@wsha.org
3	Chapter 246-928 WAC, Respiratory Care Practitioners,	Department of Health	SHB 1383 (chapter 114, Laws of 2021) makes several amendments to the respiratory care practitioner profession, including changing the profession's scope of practice and required qualifications and giving the department authority to create regulations on training requirements and hospital protocols for particular medical procedures. The department will also consider updates and housekeeping changes to clarify and streamline chapter 246-928 WAC.	Pre-Proposal				MONITOR	Alicia Eyler aliciae@wsha.org
3	COFA Medicaid Eligibility	Health Care Authority	The agency is amending this section to align with the Consolidated Appropriations Act, 2021 (Sec. 208) which restored eligibility for Medicaid benefits for individuals from the Republic of Palau, the Republic of the Marshall Islands, and the Federated States of Micronesia.	Pre-Proposal				NEUTRAL	Alicia Eyler aliciae@wsha.org
3	Physician and Physician Assistant Practice Deficiencies	Washington Medical Commission	The commission is considering creating two new rule sections that will establish a clinical assistance program to resolve practice deficiencies that may not rise to the level of a license sanction or revocation through a plan of education, training, and/or supervision for allopathic physicians and physician assistants. The commission will consider amending other related rules as needed.	Pre-Proposal		Workshop Packet		MONITOR	Alicia Eyler aliciae@wsha.org
3	Applied Behavioral Analysis Licensing	Department of Health	Since chapter 246-805 WAC became effective in 2017, the department has acquired several years of experience regulating these professions. After consultation with the applied behavioral analysis advisory committee, the department is taking the opportunity to consider updates for a variety of issues. Updates may be needed to clarify requirements as well as possible alignment with current best practices and national standards. Rules may be needed to create a temporary license as allowed by RCW 18.380.080, as well as consider establishing a corresponding temporary license fee. Fees for duplicate licenses or license verification may need to be reduced to align with similar department fees for other professions. The department may update terms, references, and citations as needed, and will consider repealing requirements for AIDS training per recently passed legislation (ESHB 1551; chapter 76, Laws of 2020).	Pre-Proposal				MONITOR	Alicia Eyler aliciae@wsha.org



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3	Sexual Assault Kit Tracking System	Washington State Patrol	The proposed changes will provide clean up and clarification to the existing language to ensure the rules reference and comply with current laws in the state of Washington.	Pre-Proposal				SUPPORT	Alicia Eyler aliciae@wsha.org
3	Apple Health Income Eligibility	Health Care Authority	In response to the current public health emergency surrounding the outbreak of the Coronavirus disease (COVID-19), along with the Governor of Washington's emergency proclamations related to COVID-19, HCA is creating these new rules to identify income that HCA does not count when determining Apple Health eligibility.	Pre-Proposal				MONITOR	Alicia Eyler aliciae@wsha.org
3	Integrating International Medical School Graduates	Washington Medical Commission	SB 6551 permits the commission to issue limited licenses to IMG. The bill also directs the commission to establish requirements for an exceptional qualification waiver in rule as well as establish requirements for a time-limited clinical experience license for IMG applicants. Establishing these requirements would reduce barriers for IMG applicants obtaining residency positions in Washington.	Pre-Proposal				MONITOR	Alicia Eyler aliciae@wsha.org
3	HIV/AIDS Legal Changes	Washington State Board of Health	During the 2020 legislative session, the legislature passed ESHB 1551, modernizing the control of certain communicable diseases (chapter 76, Laws of 2020). This bill modernizes the state's control of communicable disease laws by ending statutory HIV/AIDS exceptionalism, reducing HIV-related stigma, defelonizing HIV exposure, and removing barriers to HIV testing. The new law took effect June 11, 2020. The board is undertaking rule making to consider possible revisions to chapters 246-100 and 246-101 WAC to assure consistency with the bill's requirements and protect public health and safety. Revisions may include, but are not limited to, establishing reporting requirements and procedures for investigations for sexually transmitted diseases; specifying behavior that endangers the public health; defining specimens that can be obtained and tests that can be administered for sexually transmitted diseases, blood-borne pathogens, and other infections; determining categories of employment that are at risk of substantial exposure to a blood-borne pathogen; and defining what constitutes an exposure that presents a possible risk of transmission of a blood-borne pathogen.	Pre-Proposal				NEUTRAL	Alicia Eyler aliciae@wsha.org
3	Nursing scope of practice standards - WAC 246-840-300 ARNP scope of practice and WAC 246-840-700 through 246-840-710 pertaining to nursing practice standards, and other related sections in chapter 246-840 WAC	Nursing Care Quality Assurance Commission	Nursing scope of practice standards - WAC 246-840-300 ARNP scope of practice and WAC 246-840-700 through 246-840-710 pertaining to nursing practice standards, and other related sections in chapter 246-840 WAC, the nursing care quality assurance commission (commission) is considering amending sections of the scope of practice and practice standard rules to improve clarity.	Pre-Proposal				MONITOR	Alicia Eyler AliciaE@wsha.org
3	Health Care Sharing Ministries	Office of the Insurance Commissioner	The commissioner is considering adopting rules relating to the exemption for health care sharing ministries (HCSM) found in RCW 48.43.009 and the sale of HCSM plans by licensed producers.	Pre-Proposal		Rule Page		SUPPORT	Cara Helmer Carah@wsha.org



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3	Adjudicative Proceedings	Health Care Authority	The agency is considering amending procedural rules applicable to adjudicative proceedings to permit the use of electronic means to file and serve documents and conduct and attend hearings. During this review, the health care authority may identify additional related changes that are required to improve clarity or update policy.	Pre-Proposal				MONITOR	Cara Helmer Carah@wsha.org
3	Prehearing Conferences	Health Care Authority	The agency is amending WAC 182-526-0195 to change subsection (4) to specify that the administrative law judge has discretion to grant or deny an agency request for a prehearing conference. During this review, the health care authority may identify additional related changes that are required to improve clarity or update policy.	Pre-Proposal				MONITOR	Cara Helmer Carah@wsha.org
3	WAC 182-559 Foundational Community Supports Program	Health Care Authority	The agency is amending these rules to correct outdated WAC citations and to make other clarifying changes. During the course of this review, the agency may identify additional related changes that are required in order to improve clarity or update policy.	Pre-Proposal				MONITOR	Cara Helmer Carah@wsha.org
3	PFML Updates: Expanded "Family Member" Definition and Pandemic Assistance Grants	Employment Security Department	E2SHB 1073 was passed into law during the 2021 legislative session. The bill provides expanded qualifying periods for those whose employment was affected by the COVID-19 pandemic and provides a small business assistance grant for employers whose employees take paid family or medical leave under the expanded qualifying periods. Rules are being considered regarding small business grant eligibility, what information is required when applying for benefits, and application backdating requirements to align with the new law.	Pre-Proposal	Proposal	Rule Page		NEUTRAL	David Streeter DavidS@wsha.org
3	Definition of "Case Progress" in Workers' Comp Rules	Department of Labor & Industries	ESSB 6440, 2020 legislative session, amended requirements by identifying the reasons IMEs could be used. One requirement, "case progress," in RCW 51.36.070 is not clearly defined. Rule making allows the department of labor and industries to define the term and/or criteria. Rule making may also provide consequences for IMEs that were requested or occurred outside what is allowed by statute or rule.	Pre-Proposal				MONITOR	David Streeter DavidS@wsha.org
3	Retired Active Pharmacist License	Pharmacy Quality Assurance Commission	PQAC is considering adding a new section to the chapter to allow retired pharmacists to apply for a retired active pharmacist license status and practice pharmacy under certain conditions. The commission may also amend other sections in chapter 246-945 WAC to correspond to the new section.	Pre-Proposal				SUPPORT	David Streeter DavidS@wsha.org
3	De Minimis Data Reporting	Health Care Authority	The health care authority (HCA) is adding a definition of de minimis to the section to specify a minimum reporting threshold below which a data supplier is not required to submit data. During the course of this review, HCA may identify additional related changes that are required in order to improve clarity or update policy.	Pre-Proposal				MONITOR	David Streeter DavidS@wsha.org
3	Suicide Prevention Training for Mental Health Counselors	Department of Health	ESHB 2411 requires the department to create minimum standards for new, advanced six-hour suicide prevention trainings. Part 14 of chapter 246-12 WAC contains minimum standards for the current suicide prevention trainings; amending and adopting new sections of rule in Part 14 will allow the department to permanently adopt minimum standards for the new trainings, while collocating the new section with existing rule on similar trainings.	Pre-Proposal				MONITOR	David Streeter DavidS@wsha.org



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3	Nursing Home TB Rules	Department of Social and Health Services	The department is considering amending WAC 388-97-1380 Tuberculosis—Testing required, 388-97-1580 Tuberculosis—Reporting—Required; and other related rules as may be necessary to ensure nursing homes are not obstructed from offering the COVID-19 vaccine to residents and staff because of clinical interference from required tuberculosis (TB) testing.	Pre-Proposal				MONITOR	Zosia Stanley zosias@wsha.org
3	Nursing Home Admissions Rules Suspensions	Department of Social and Health Services	The department of social and health services (DSHS), aging and long-term support administration, is considering amending WAC 388-97-0120 Individual transfer and discharge rights and procedures, 388-97-0920 Participation in resident and family groups, 388-97-1000 Resident assessment, 388-97-1020 Comprehensive plan of care, 388-97-1915 PASRR requirements prior to admission of new residents, 388-97-1975 PASRR requirements after admission of a resident, and other related rules as may be required to identify the period of time portions of these rules were suspended or waived during the declared emergency of COVID-19 per Proclamation by the Governor 20-05 and extensions thereto.	Pre-Proposal				MONITOR	Zosia Stanley zosias@wsha.org
4	PFML Rule Clarity	Employment Security Department	The paid family and medical leave (PFML) program (Title 50A RCW) requires updating existing rules and promulgating new rules to ensure clarity and make necessary changes based on programmatic needs. This preproposal statement of inquiry includes, but is not limited to, adding definitions of "illegal acts" and "successor," updating the definition of "health care provider," clarifying references to "hours worked," for the purposes of job protection and program consistency, clarification regarding small business grants, and adding information regarding closed hearings and appeal withdrawals.	Pre-Proposal	Proposal		02/16/21	MONITOR	David Streeter DavidS@wsha.org
4	TANF/SFA Time Limit Extensions	Department of Social and Health Services	Amendments are planned to address impacts of legislative changes and emergency conditions on TANF/SFA time limit extension policy.	Pre-Proposal	Proposal		05/26/21	MONITOR	Alicia Eyler aliciae@wsha.org
4	Board of Industrial Insurance Appeals Practice and Procedure	Board of Industrial Insurance Appeals	BIIA is proposing a number of updates to Chapter 236-12 WAC	N/A	Proposal		07/08/21	NEUTRAL	David Streeter DavidS@wsha.org
4	WAC 246-915-085 Continuing competency, physical therapists and physical therapist assistants.	Department of Health	The Board of Physical Therapy is considering general updates, revisions, and housekeeping amendments.	Pre-Proposal	Proposal		08/02/21	MONITOR	Alicia Eyler aliciae@wsha.org
4	Companion Home Providers' Daily Rate	Department of Social and Health Services	DDA is considering amending this rule to update companion home providers' daily rate. DDA is also considering adding new sections of rule to chapter 388-829C WAC that establish requirements for positive behavior support plans. During the course of this review, DDA may make additional changes that are necessary to improve clarity or update policy.	Pre-Proposal				MONITOR	Andrew Busz Andrewb@wsha.org



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4	Oral Health Connections Pilot Project	Health Care Authority	The agency is amending these rules to extend the program through December 31, 2023, or until pilot funds are completely dispersed, whichever comes first. Additionally, age limits and dual eligibility exclusions are being removed. The enhanced rate will now include an additional periodic exam and adult prophylaxis as well as one fluoride varnish application, and one silver diamine fluoride treatment. During the course of this review, the health care authority may identify additional related changes that are required in order to improve clarity or update policy.	Pre-Proposal				MONITOR	Alicia Eyer aliciae@wsha.org
4	SSN for Family Planning Program	Health Care Authority	The agency is amending WAC 182-503-0515 to add a new subsection (6)(f) to name the family planning only program described in WAC 182-532-510 as an additional program for which a Social Security number is not required. The agency has determined this rule amendment is necessary because the agency is expanding family planning only program services to all Washington residents, including those who do not have a Social Security number. During the course of this review, the agency may identify additional related changes that are required in order to improve clarity or update policy.	Pre-Proposal				NEUTRAL	Alicia Eyer aliciae@wsha.org
4	Definition of "Minimal Sedation" in WAC 246-853-650	Department of Health	In response to a rule petition, the board is considering updates and amendments to WAC 246-853-650. The petition requested the definition of "minimal sedation" include demand flow nitrous oxide systems with a fixed 50/50 mix of oxygen and nitrous oxide. This change will be considered. In review of the rule, the board has determined other general updates may also be needed. All amendments to the rule will ensure providers are regulated by current best practice standards in office-based analgesia and anesthesia administration.	Pre-Proposal				MONITOR	Alicia Eyer aliciae@wsha.org
4	Midwife Licensure	Department of Health	The department is considering revisions to several sections of the midwifery chapter in order to modernize and reduce barriers in the rules.	Pre-Proposal				MONITOR	Alicia Eyer aliciae@wsha.org
4	Workers' Comp Reporting and Recordkeeping	Department of Labor & Industries	2022 Classification and reporting rule making: Classification development's goal is to implement clear rule writing to ensure staff and customers can easily understand and apply the workers' compensation insurance classification and reporting rules. Classification development studied some subclassifications for potential reduction in numbers; and reviewed classification and reporting rules for improvement and clarification. The purpose of this rule making is not to make substantive changes to how employers are classified and amendments will not impact employer rates. As part of this rule making, the department of labor and industries (L&I) also intends to review these chapters for need, clarity, and consistency to make changes where possible to reduce the regulatory burden on employers insured with the State Fund.	Pre-Proposal				SUPPORT	David Streeter DavidS@wsha.org



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4	Wildfire Smoke	Department of Labor & Industries	The agency recognizes the hazard of wildfire smoke exposure is increasing every year and is now potentially presenting important health risks to all outdoor workers including those in construction and agriculture. Labor and industries has received a petition for rule making on this topic as well. California has adopted rules for workplace safety and health rules regarding wildfire smoke.	Pre-Proposal				MONITOR	David Streefer DavidS@wsha.org
4	WAC 182-60-027 Patient decision aid review advisory panel	Health Care Authority	HCA is amending WAC 182-60-027 to add patient representative to the list of panel members. Patient representatives add value to HCA's patient decision aid review advisory panels. After conducting several rounds of certification and recertification, HCA has determined that two years is too short of a time frame between the initial certification of a patient decision aid and its recertification. Therefore, HCA is amending WAC 182-60-040 to change the length of time for certification of patient decision aids from two years to four years. During the course of this review, the agency may identify additional related changes that are required in order to improve clarity or update policy.	Pre-Proposal				MONITOR	Zosia Stanley zosiaS@wsha.org