

	 Washington State Hospital Association	WSHA Top Priority State Rule Making		12/7/2021					
PRIORITY	RULE	AGENCY	DESCRIPTION	PRE-PROPOSAL	PROPOSAL	EXTRA MATERIALS	INTENDED ADOPTION DATE	WSHA POSITION	WSHA CONTACT
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.	<a href="#">Pre-Proposal</a>	<a href="#">Proposal</a>		07/28/21	MONITOR	Zosia Stanley zosias@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.	<a href="#">Pre-Proposal</a>	<a href="#">Proposal</a>	<a href="#">Rule Page</a>	10/29/21	MONITOR	David Streeter DavidS@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.	<a href="#">Pre-Proposal</a>	<a href="#">Proposal</a>	<a href="#">Draft Rules</a>	11/09/21	MONITOR	Cara Helmer Carah@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).	<a href="#">Pre-Proposal</a>		<a href="#">Report on Draft Proposals (10.18.18)</a>	Intended: Spring 2019	MONITOR	David Streeter DavidS@wsha.org
1	Payment Methods- New Hospitals	Health Care Authority	HCA plans to amend this section to include an exception to per diem rate calculations for psychiatric per diem rates. This aligns with the agency's state plan. During the course of this review, HCA may identify additional related changes that are required in order to improve clarity or update policy.	<a href="#">Pre-Proposal</a>				MONITOR	Andrew Busz Andrewb@wsha.org
1	Rebasing and Adjustments to Inpatient Rates	Health Care Authority	HCA is amending these sections to add qualifying criteria for and reflect an extension of the current rate increase for sole community hospitals. ESSB 5092, section 211(46) extends the rate increase through June of 2023. HCA also plans to implement ESSB 5092, section 215(66) to adjust rates paid for long-term civil commitments. Hospitals may now submit costs not included in their Medicare cost report to be evaluated by the agency for a potential rate increase. During the course of this review, HCA may identify additional related changes that are required in order to improve clarity or update policy.	<a href="#">Pre-Proposal</a>				MONITOR	Andrew Busz Andrewb@wsha.org

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1	Public Option Health Care Contracting	Health Care Authority	HCA is developing rules to align with the requirements of E2SSB 5377. This bill provides that if a public option plan is not available in each county during plan year 2022 or later, hospitals licensed under chapter 70.41 RCW receiving payment from one of the agency's benefit programs or its medical assistance program must contract with at least one public option plan to provide in-network services to that plan's enrollees. The bill also provides that the agency may adopt rules including levying fines and taking other actions necessary to enforce compliance when a hospital must contract with a public option plan. During the course of this review, the agency may identify additional related changes that are required in order to improve clarity or update policy.	<a href="#">Pre-Proposal</a>				MONITOR	Ashlen Strong AshlenS@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 <u>establishing waiver requirements</u> .	<a href="#">Pre-Proposal</a>				MONITOR	Ashlen Strong AshlenS@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).	<a href="#">Pre-Proposal</a>				CONCERNS	Alicia Eyer 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))	<a href="#">Pre-Proposal</a>				MONITOR	Alicia Eyer AliciaE@wsha.org

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1	Behavioral Health Agency Rules	Department of Health	<p>This rule-making project is phase two of a multi-phase project to overhaul the licensing and certification rules for behavioral health agencies. The first phase focused on bringing the regulations up-to-date with recent legislation and addressing areas of clean up that had been identified since the department began regulating behavioral health agencies in 2018. In phase two of this work, the areas that will be considered include:</p> <ol style="list-style-type: none"> <li>1. Supporting a behavioral health agency's ability to provide services for cooccurring mental health and substance use disorders.</li> <li>2. Improving the ability for an individual to have continuity as they transition through levels of care.</li> <li>3. Scoping rules to align more closely with the specific rule-making authority in RCW 71.24.037.</li> <li>4. Further examining specific topics identified during phase 1 such as deeming, telehealth, and applied behavioral analysis.</li> <li>5. Implementing changes made by the 2021 legislature.</li> </ol>	<a href="#">Pre-Proposal</a>				MONITOR	Brooke Evans BrookeE@wsha.org
1	Acute Care Hospital Severity Matrix	Department of Health	<p>2SHB 1148 aims to improve patient safety in acute care hospitals by improving enforcement of licensing standards. The bill directs the department to use additional enforcement tools including limited stop placements and suspension of new admissions when there is an immediate jeopardy, repeat enforcement action or rule violation, or failure to correct noncompliance with rules or statutes.</p> <p>According to section 3 of 2SHB 1148, the department may assess a civil fine of up to \$10,000 per violation, not to exceed a total fine of one million dollars when the department determines: (1) The hospital has previously been subject to an enforcement action for the same or similar type of violation of the same statute or rule; or (2) the hospital 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 (3) the hospital failed to correct noncompliance with a statute or rule by a date established or agreed to by the department.</p> <p>If the department imposes civil fines, the hospital has the right to appeal under RCW 43.70.095. The bill directs the department to adopt in rule specific fine amounts in relation to the severity of noncompliance. The department is initiating a rules project to consider implementing these new requirements.</p>	<a href="#">Pre-Proposal</a>				MONITOR	Cara Helmer Carah@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	<a href="#">Pre-Proposal</a>				MONITOR	Cara Helmer Carah@wsha.org
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.	<a href="#">Pre-Proposal</a>	<a href="#">Proposal</a>	<a href="#">Draft Rules</a>		SUPPORT WITH CONCERNS	Cara Helmer Carah@wsha.org

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1	Implementation of Hydrofluorocarbons—Emissions reduction (E2SHB 1050), chapter 315, Laws of 2021	Department of Ecology	This rule making may: <ul style="list-style-type: none"> <li>•Establish maximum global warming potential (GWP) thresholds for HFCs used in new stationary refrigeration and air conditioning equipment.</li> <li>•Establish a refrigerant management program with registration, leak detection, and reporting requirements for certain stationary refrigeration and air conditioning systems.</li> <li>•Amend product labeling and disclosure requirements.</li> <li>•Establish fees to support the refrigerant management program.</li> <li>•Update chapter 173-443 WAC to reflect other changes in the law.</li> </ul>	<a href="#">Pre-Proposal</a>				MONITOR	David Streeter DavidS@wsha.org
1	Notifiable Conditions Rules Update	Washington State Board of Health	The board will consider amending chapter 246-101 WAC, Notifiable conditions, to ensure all federally required data components continue to be reported for COVID-19 tests, support statewide COVID-19 disease surveillance, and allow the governmental public health system to identify appropriate public health interventions through the end of the COVID-19 pandemic and beyond.	<a href="#">Pre-Proposal</a>				MONITOR	David Streeter DavidS@wsha.org
1	Audio-Only Telemedicine	Health Care Authority	HCA is developing and revising rules to provide for audio-only telemedicine, in alignment with ESSB 1196. 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.	<a href="#">Pre-Proposal</a>				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.	<a href="#">Pre-Proposal</a>				MONITOR	David Streeter DavidS@wsha.org
1	OUD 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.	<a href="#">Pre-Proposal</a>				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.	<a href="#">Pre-Proposal</a>		<a href="#">Rule Page</a>		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.	<a href="#">Pre-Proposal</a>				MONITOR	David Streeter DavidS@wsha.org

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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.	<a href="#">Pre-Proposal</a>				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.	<a href="#">Pre-Proposal</a>				SUPPORT	Zosia Stanley zosias@wsha.org
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.	<a href="#">Pre-Proposal</a>				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.	<a href="#">Pre-Proposal</a>				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.	<a href="#">Pre-Proposal</a>		<a href="#">Rulemaking activity</a>		CONCERNS	Zosia Stanley zosias@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.	<a href="#">Pre-Proposal</a>	<a href="#">Proposal</a>	<a href="#">Rule Page</a>	11/10/21	MONITOR	Andrew Busz Andrewb@wsha.org
2	E2SHB 1477 Implementation: Next Day Appointments	Office of the Insurance Commissioner	The commissioner is considering adopting rules to implement E2SHB 1477 concerning access to next day appointments required in the legislation. The commissioner may also consider utilizing this rule to consolidate office of the insurance commissioner (OIC) rule making if necessary to ensure that rules related to recently enacted legislation are adopted by OIC prior to January 1, 2022. Currently, multiple provisions of OIC rules in chapters 284-43 and 284-170 WAC may need to be amended to be consistent with recent laws. These rules will facilitate implementation of recent laws by ensuring that all affected health care entities understand their rights and obligations under the recent laws.	<a href="#">Pre-Proposal</a>	<a href="#">Proposal</a>	<a href="#">Rule Page</a>	11/12/21	MONITOR	Brooke Evans BrookeE@wsha.org

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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.	<a href="#">Pre-Proposal</a>	<a href="#">Proposal</a>	<a href="#">Rule Page</a>	11/15/21	MONITOR	Andrew Busz Andrewb@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.	<a href="#">Pre-Proposal</a>	<a href="#">Proposal</a>		12/22/21	MONITOR	Zosia Stanley zosias@wsha.org
2	Reimbursement for Mental Health Diagnostic of Children	Health Care Authority	HCA is amending WAC 182-531-1400 to implement changes directed by the legislature in 2SHB 1325, section (2)(11), chapter 126, Laws of 2021. For mental health diagnostic assessment of children birth through age five, HCA is directed to reimburse providers for up to five sessions per assessment and for travel costs when a session is conducted in a home or community setting. During the course of this review, HCA may identify additional related changes that are required in order to improve clarity or update policy.	<a href="#">Pre-Proposal</a>				MONITOR	Andrew Busz Andrewb@wsha.org
2	Washington Apple Health Postpartum Coverage	Health Care Authority	The agency is amending these rules to align with SSB 5068, which extends the period of postpartum coverage through Washington apple health, and to make other updates. During the course of this review, the agency may identify additional related changes that are required to improve clarity or update policy.	<a href="#">Pre-Proposal</a>				MONITOR	Andrew Busz Andrewb@wsha.org
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.	<a href="#">Pre-Proposal</a>				MONITOR	Andrew Busz Andrewb@wsha.org
2	Medical Assistant Credentialing	Department of Health	DOH is considering rule amendments to several sections of medical assistant rules to update credentialing requirements and ensure that the rules are current and align with best practices. The department will also consider adding a new section to address telemedicine supervision.	<a href="#">Pre-Proposal</a>				MONITOR	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.	<a href="#">Pre-Proposal</a>		<a href="#">Rule Page</a>		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.	<a href="#">Pre-Proposal</a>				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.	<a href="#">Pre-Proposal</a>				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.	<a href="#">Pre-Proposal</a>				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.	<a href="#">Pre-Proposal</a>				SUPPORT	Alicia Eyler aliciae@wsha.org Zosia Stanley zosiaS@wsha.org
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.	<a href="#">Pre-Proposal</a>				MONITOR	Alicia Eyler Zosia Stanley

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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.	<a href="#">Pre-Proposal</a>				MONITOR	Alicia Eyler AliciaE@wsha.org
2	SUD Professionals and Trainees	Department of Health	The department is considering amending WAC 246-811-010, 246-811-030, 246-811-035, and 246-811-990; and creating new rule section(s) to implement recent legislation. EHB 1311 is intended to enable more people to become SUDPs by allowing creation of SUDP apprenticeships, a noncollege pathway to obtaining an SUDP credential. Amending listed sections and possibly adding additional sections to chapter 246-811 WAC will align department rules with statutory changes. Rule making to create a framework and educational standards for SUDP apprenticeships will provide clarity for licensees, apprenticeship programs, and the public. Additionally, it will allow the department to consistently uphold standards that protect patient safety.	<a href="#">Pre-Proposal</a>				MONITOR	Brooke Evans BrookeE@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.	<a href="#">Pre-Proposal</a>				MONITOR	Brooke Evans BrookeE@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.	<a href="#">Pre-Proposal</a>				MONITOR	Cara Helmer Carah@wsha.org
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.	<a href="#">Pre-Proposal</a>	<a href="#">Proposal</a>			MONITOR	David Streeter DavidS@wsha.org

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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.	<a href="#">Pre-Proposal</a>				SUPPORT	David Streeter DavidS@wsha.org
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.	<a href="#">Pre-Proposal</a>				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).	<a href="#">Pre-Proposal</a>				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.	<a href="#">Pre-Proposal</a>				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.	<a href="#">Pre-Proposal</a>		<a href="#">RHINO rulemaking website</a>		MONITOR	David Streeter DavidS@wsha.org
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.	<a href="#">Pre-Proposal</a>				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.	<a href="#">Pre-Proposal</a>				MONITOR	Zosia Stanley zosiaS@wsha.org

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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.	<a href="#">Pre-Proposal</a>				MONITOR	Zosia Stanley zosiaS@wsha.org
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.	<a href="#">Pre-Proposal</a>			12/03/19	SUPPORT	David Streeeter DavidS@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.	<a href="#">Pre-Proposal</a>			04/07/21	MONITOR	David Streeeter DavidS@wsha.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.	<a href="#">Pre-Proposal</a>	<a href="#">Proposal</a>		08/11/21	MONITOR	Andrew Busz Andrewb@wsha.org

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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.	<a href="#">Pre-Proposal</a>	<a href="#">Proposal</a>		11/10/21	NEUTRAL	Alicia Eyer aliciae@wsha.org
3	LPN Student Rules	Nursing Care Quality Assurance Commission	The Nursing Care Quality Assurance Commission (NCQAC) is considering amendments to nursing technician rules to provide practice opportunities to licensed practical nurse (LPN) students.	<a href="#">Pre-Proposal</a>	<a href="#">Proposal</a>		11/12/21	MONITOR	Alicia Eyer aliciae@wsha.org
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.	<a href="#">Pre-Proposal</a>	<a href="#">Proposal</a>	<a href="#">Rule Page</a>	11/15/21	NEUTRAL	Andrew Busz Andrewb@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.	<a href="#">Pre-Proposal</a>	<a href="#">Proposal</a>	<a href="#">Rule Page</a>	11/29/21	SUPPORT	Cara Helmer Carah@wsha.org

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3	Outpatient Hospital services—Conditions of Payment and Payment Methods	Health Care Authority	The agency is amending subsection (3)(c) of this rule, which states that the agency does not pay separately for certain services provided within one calendar day of an inpatient hospital admission. The agency is adding to this subsection to state that separate payments are not made for certain services provided within one calendar day of discharge. The agency also intends to remove subsections (6) and (7). These subsections reference the maximum allowable fee schedule and the hospital outpatient rate for payment of certain services. The agency is making these changes because it does not use these payment methods, but instead uses the enhanced ambulatory payment group method to determine payments, consistent with WAC 182-550-7200. During the course of this review, health care authority may identify additional related changes that are required in order to improve clarity or update policy.	<a href="#">Pre-Proposal</a>				MONITOR	Andrew Busz Andrewb@wsha.org
3	Home Health Medical Social Services	Health Care Authority	The 2021-2023 operating budget included a proviso (section 211(65), chapter 334, Laws of 2021) specifying that certain appropriated funds are provided to reimburse social workers as part of the medical assistance home health benefit. The agency is amending home health rules in chapter 182-551 WAC, subchapter II, to include medical social services within the home health program. During the course of this review, health care authority may identify additional related changes that are required in order to improve clarity or update policy.	<a href="#">Pre-Proposal</a>				MONITOR	Andrew Busz Andrewb@wsha.org
3	Inpatient Withdrawal Management Services Payment	Health Care Authority	The agency is amending WAC 182-550-4300(5) to align the rule with the Medicaid state plan, which does not have specific time limitations on inpatient withdrawal management services. During this review, the health care authority may identify additional related changes that are required to improve clarity or update policy.	<a href="#">Pre-Proposal</a>				MONITOR	Andrew Busz Andrewb@wsha.org
3	Home Care Aide "Date of Hire" Definition	Department of Health	DOH is considering amending WAC 246-980-010 to redefine "date of hire" for home care aides and to implement ESHB 1120, passed in the 2021 legislative session.	<a href="#">Pre-Proposal</a>				MONITOR	Alicia Eyler aliciae@wsha.org
3	Colon Hydrotherapist Profession	Department of Health	DOH is considering establishing a new section of rule to implement SB 5124, which establishes the colon hydrotherapist profession. The department is required to adopt rules to specify the fees, as well as to ensure clarity and consistency of fees that are standard across all professions.	<a href="#">Pre-Proposal</a>				MONITOR	Alicia Eyler aliciae@wsha.org
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.	<a href="#">Pre-Proposal</a>				NEUTRAL	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.	<a href="#">Pre-Proposal</a>				MONITOR	Alicia Eyler aliciae@wsha.org

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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.	<a href="#">Pre-Proposal</a>		<a href="#">Workshop Packet</a>		MONITOR	Alicia Eyler aliciae@wsaha.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).	<a href="#">Pre-Proposal</a>				MONITOR	Alicia Eyler aliciae@wsaha.org
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.	<a href="#">Pre-Proposal</a>				SUPPORT	Alicia Eyler aliciae@wsaha.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.	<a href="#">Pre-Proposal</a>				MONITOR	Alicia Eyler aliciae@wsaha.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.	<a href="#">Pre-Proposal</a>				MONITOR	Alicia Eyler AliciaE@wsaha.org
3	Behavioral Health Certified Peer Counselor	Health Care Authority	HCA intends to adopt rules to define the process of becoming a behavioral health certified peer counselor. During the course of this review, the authority may identify additional related changes that are required in order to improve clarity or update policy.	<a href="#">Pre-Proposal</a>				MONITOR	Brooke Evans BrookeE@wsaha.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.	<a href="#">Pre-Proposal</a>				MONITOR	Cara Helmer Carah@wsaha.org

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3	Home Health Hospice Supervision via Telemedicine	Department of Health	DOH will consider amending requirements for how in-home services agencies perform supervisory visits. This may include permanently adopting some measures used throughout the coronavirus disease 2019 (COVID-19) pandemic, such as expanding the definition of "telemedicine," removing the requirement that supervisory visits must occur during an on-site visit, and other regulatory flexibilities as appropriate. Additionally, the department will consider whether amendments are necessary to align with ESHB 1196 (chapter 157, Laws of 2021), audio-only telemedicine legislation that was passed during the 2021 legislative session.	<a href="#">Pre-Proposal</a>				MONITOR	David Streeter DavidS@wsha.org
3	Self-Insured Pension Discount Rate	Department of Labor & Industries	The pension discount rate (PDR) is the interest rate used to account for the time value of money when evaluating the present value of future pension payments. The purpose of this rule making is to lower the PDR to better align with the rate of return for long term treasuries for self-insured and state fund pensions.	<a href="#">Pre-Proposal</a>	<a href="#">Proposal</a>			MONITOR	David Streeter DavidS@wsha.org
3	Verification of Underlying Health Conditions for Unemployment Claims	Employment Security Department	ESSB 5061 (2021) provides, among other things, good cause to leave work when during a public health emergency, the claimant was unable to perform their work for the employer from the claimant's home; the claimant is able and available to perform, and can actively seek suitable work which can be performed for an employer from the claimant's home; and the claimant or another individual residing with the claimant is at higher risk of severe illness or death from the disease that is the subject of the public health emergency because the higher risk individual has an underlying health condition, verified as required by the department by rule, that is identified as a risk factor of a disease that is the subject of a public health emergency. ESSB 5061, section 10, chapter 2, Laws of 2021 (codified at RCW 50.20.050 (b)(xii)(C)(II)). ESSB 5061 (2021) also provides that during the weeks of a public health emergency, an unemployed individual may meet the availability requirements of RCW 50.20.010 (1)(c) if they are able and available to perform, and actively seeking, suitable work which can be performed for an employer from the individual's home; and if the unemployed individual or another individual residing with the unemployed individual is at higher risk of severe illness or death from the disease that is the subject of the public health emergency because the higher risk individual has an underlying condition, verified as required by the department by rule, that is identified as a risk factor for the disease that is the subject of the public health emergency. Section 8, chapter 2, Laws of 2021 (codified at RCW 50.20.010 (4)(b)(ii)). The rule making will detail how the department will verify underlying health conditions for purposes of RCW 50.20.010 (4)(b)(ii) and 50.20.050 (2)(b)(xii)(C)(II).	<a href="#">Pre-Proposal</a>				MONITOR	David Streeter DavidS@wsha.org
3	Independent Medical Exam Appeals	Department of Labor & Industries	ESSB 6440, 2020 legislative session, limited the reasons IMEs could be used. One reason is to resolve an appeal, but there was no indication of when or under what circumstances such an IME would be appropriate. The changes affect employers who purchase workers' compensation coverage from the department (state fund) as well as self-insurers by limiting IMEs. Rule making allows the department of labor and industries to define criteria and/or determine limitations for these IMEs.	<a href="#">Pre-Proposal</a>				CONCERNS	David Streeter DavidS@wsha.org

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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.	<a href="#">Pre-Proposal</a>				MONITOR	David Streater 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.	<a href="#">Pre-Proposal</a>				SUPPORT	David Streater 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.	<a href="#">Pre-Proposal</a>				MONITOR	David Streater DavidS@wsha.org
3	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 is regarding Phase 3 to implement portions of the program that are under the employment security department's (ESD) authority. This phase may include, but is not limited to, audit functions, and other rules as necessary.	<a href="#">Pre-Proposal</a>				MONITOR	David Streater DavidS@wsha.org
3	Nursing Home Inspections	Department of Social and Health Services	This rule making is necessary to implement ESHB 1120 (chapter 203, Laws of 2021). The additions or amendments to chapter 388-97 WAC will reestablish inspection (survey) timelines and identify the period of time that inspections were held in suspension during the COVID-19 pandemic, in accordance with Governor's Proclamation 20-18.	<a href="#">Pre-Proposal</a>				MONITOR	Zosia Stanley zosias@wsha.org
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.	<a href="#">Pre-Proposal</a>				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.	<a href="#">Pre-Proposal</a>				MONITOR	Zosia Stanley zosias@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.	<a href="#">Pre-Proposal</a>	<a href="#">Proposal</a>		08/02/21	MONITOR	Alicia Eyler aliciae@wsha.org

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4	Medicaid State Plan Amendment (SPA)-Community First Choice.	Health Care Authority	HCA in conjunction with the aging and long-term support administration (AL TSA) in the department of social and health services (DSHS) intend to submit Medicaid SPA 22-0001 in order to reflect the following changes to the community first choice program: <ul style="list-style-type: none"> <li>•Increase the payment limit for community first choice community transition services from \$850.00 to a maximum of \$2,500.00 per discharge for items and services.</li> <li>•Remove the DVD option for providing caregiver management training. SPA 22-0001 will have no effect on provider payments. The SPA reflects the higher costs of setting up an independent living apartment from an institutional care setting. This community transition service includes items and services involved in setting up a client to live independently in the community, including first month's rent and security deposit.</li> </ul>		<a href="#">Notice</a>			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.	<a href="#">Pre-Proposal</a>	<a href="#">Proposal</a>	<a href="#">Supplemental Notice</a>	04/14/21	MONITOR	David Streeter DavidS@wsha.org
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.	<a href="#">Pre-Proposal</a>				MONITOR	Alicia Eyler 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.	<a href="#">Pre-Proposal</a>				MONITOR	Alicia Eyler 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.	<a href="#">Pre-Proposal</a>				MONITOR	Alicia Eyler aliciae@wsha.org

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4	Ambient Heat Exposure Standards	Department of Labor & Industries	L&I received a June 28, 2021, petition for rule making requesting changes to L&I's rules to include more specific requirements to prevent heat-related illness. The petition for rule making was accepted recognizing the need to reexamine the current rules, especially in light of information suggesting the occurrence of heat illnesses below the current trigger temperatures and the increasing temperatures experienced in our state since the rule was first established. In addition, L&I also adopted emergency rules on July 9, 2021, to address extreme high heat procedures with requirements for preventative cool-down rest with specific amounts of shade and mandatory cool-down rest periods at 100 degrees Fahrenheit.	<a href="#">Pre-Proposal</a>				NEUTRAL	David Streeter DavidS@wsha.org
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.	<a href="#">Pre-Proposal</a>				MONITOR	David Streeter DavidS@wsha.org