



Washington State
Hospital Association

WSHA Top Priority State Rule Making- Completed

Calendar Year 2021

PRIORITY	RULE	AGENCY	DESCRIPTION	EFFECTIVE DATE	FINAL ORDER	EXTRA MATERIALS	WSHA CONTACT
1	Fee for Service Equivalency Language for Rural Health Clinics	Health Care Authority	The agency is amending these chapters to replace fee-for-service equivalency language with actual managed care payments language.	01/01/21	Final Order		Andrew Busz Andrewb@wsha.org
1	2021 Industrial Insurance Premium 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.	01/01/21	Final Order		David Streeter DavidS@wsha.org
1	Retired Active Pharmacist License Status	Pharmacy Quality Assurance Commission	On March 26, 2020, Governor Inslee signed Proclamation 20-32 to help increase the number of health care workers available to meet the needs of patients during the coronavirus disease 2019 (COVID-19) pandemic. This proclamation included a provision that allows a pharmacist with a retired active pharmacist license status to practice pharmacy. Specifically, the proclamation amended WAC 246-863-080(2) to allow holders of a retired active pharmacist license status to practice pharmacy while the proclamation remains in effect. However, the pharmacy quality assurance commission (commission) recently updated and consolidated all rules under its authority into one new chapter (chapter 246-945 WAC). In this rewrite process the requirements from WAC 246-863-080 and the retired active pharmacist license status no longer exist. Beginning July 1, 2020, chapter 246-945 WAC took effect and the commission no longer enforces WAC 246-863-080. This emergency rule matches the intent of the governor's proclamation by reinstating a retired active pharmacist license status allowing retired pharmacists to practice pharmacy during emergent or intermittent circumstances and assist with the COVID-19 response. This emergency rule also reinstates the process for applying for a retired active pharmacist license and establishes the criteria for returning to active status.	02/01/21	Emergency Rule		David Streeter DavidS@wsha.org
1	Psychiatric Per Diem Rates	Health Care Authority	This rule is being amended to increase psychiatric per diem rates for community hospitals that serve patients in long-term inpatient psychiatric care. During the course of this review, the agency may identify additional related changes that are required in order to improve clarity or update policy.	02/06/21	Final Order		Andrew Busz Andrewb@wsha.org



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1	Emergency Rule: COVID-19 Test Reporting	Department of Health	DOH is adopting an emergency rule to amend WAC 246-338-026 mandating reporting of test results intended to detect SARS-CoV-2 or diagnose a possible case of the coronavirus disease 2019 (COVID-19) in alignment with the federal changes published in 85 F.R. 54820. WAC 246-338-020 is amended to add language referencing the new subsection in WAC 246-338-026. These changes will allow the new reporting, inspection, and fining processes in compliance with the new federal requirements which will ensure the current Clinical Laboratory Improvement Amendments (CLIA) exempt status is not threatened and will respond to the current public health emergency created by the COVID-19 pandemic.	02/12/21	Emergency Rule		David Streeter DavidS@wsha.org
1	Residential Long Term Care Services Training	Department of Social and Health Services	The department is considering adding new sections to chapter 388-112A WAC, in response to the passage of SB [SSB] 5630 passed in 2013, in which the department shall examine whether additional specialty training categories should be created for adult family homes serving residents with other special needs, such as traumatic brain injury, skilled nursing, or bariatric care.	02/28/21	Final Order		Zosia Stanley zosiaS@wsha.org
1	Payment of office visits for clients under the Alien Emergency Medical program for COVID-19	Health Care Authority	The Health Care Authority is revising this section to allow for payment of office visits for clients under the Alien Emergency Medical (AEM) program when the visit is specifically for the assessment and treatment of the COVID-19 virus.	03/04/21	Emergency Rule		Andrew Busz Andrewb@wsha.org
1	COVID 19: Schedule II Prescriptions	Pharmacy Quality Assurance Commission	The Pharmacy Quality Assurance Commission adopted emergency rules to reduce burdens on patients and practitioners when prescribing Schedule II substances during the COVID-19 pandemic. The emergency rule amends WAC 246-945-010 and increases the duration of time a practitioner has to deliver a signed prescription when authorizing an emergency prescription of a Schedule II substance to the pharmacy from seven days to fifteen days. The emergency rule also redefines what is a "signed prescription." These emergency rules have already been in effect on WAC 246-887-020, but were refiled to correspond to the new chapter recently adopted by the commission.	03/05/21	Emergency Rule		David Streeter
1	Repealing Old Pharmacy WAC's	Pharmacy Quality Assurance Commission	The proposal repeals the chapters of rules relating to pharmacy that were replaced by chapter 246- 945 WAC	03/18/21	Final Order		David Streeter DavidS@wsha.org



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1	Emergency Rule: COVID-19 Notifiable Condition	Washington State Board of Health	The Washington state board of health has adopted a second emergency rule to continue to designate COVID-19 as a notifiable condition and extends reporting requirements for health care providers, health care facilities, laboratories, and local health jurisdictions to report race, ethnicity, and other demographic data for cases of COVID-19. The rule establishes what testing and demographic data need to be reported as well as the timing and mechanism of reporting. The rule allows for certain waivers by a local health officer. This emergency rule will continue to require specific data elements to be reported with COVID-19 test results. This rule is more closely aligned with United States Department of Health and Human Services (HHS) laboratory data reporting guidance and reflects reporting requirements that can more reasonably be collected through the current public health reporting structure. The existing emergency rule incorporates HHS guidance and also requires reporting of additional data beyond what is included in guidance, including components such as the patient's race and ethnicity using disaggregated reporting categories, the patient's primary language and emergency contact phone number, and responses to "ask on order entry" questions. This emergency rule will take effect upon the expiration of the existing emergency rule.	03/26/21	Emergency Rule		David Streeter DavidS@wsha.org
1	Emergency Rule: Retired Active Pharmacist License	Pharmacy Quality Assurance Commission	This adopted emergency rule will extend WSR 21-04-116 filed on February 1, 2021. On March 26, 2020, Governor Inslee signed Proclamation 20-32 to help increase the number of health care workers available to meet the needs of patients during the coronavirus disease 2019 (COVID-19) pandemic. This proclamation included a provision that allows a pharmacist with a retired active pharmacist license status to practice pharmacy. Specifically, the proclamation amended WAC 246-863-080(2) to allow holders of a retired active pharmacist license status to practice pharmacy while the proclamation remains in effect.	06/02/21	Emergency Rule		David Streeter DavidS@wsha.org



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1	Psychiatric Hospital Fees	Department of Health	The department is proposing an increase to the psychiatric hospital licensing fees. This increase is needed to recover the costs of implementing SHB 2426 (chapter 115, Laws of 2020) which amended chapters 43.70 and 71.12 RCW to enhance the department's regulatory oversight for psychiatric hospitals to protect the health, safety, and well-being of patients seeking behavioral health care in these facilities. The department also made three technical edits to match department WAC style guidelines.	07/01/21	Final Order		Andrew Busz Andrewb@wsha.org
1	Workers' Comp Third Party Administrators	Department of Labor & Industries	SHB 2409 creates a new requirement that any third-party administrators hired to manage claims for a self-insured employer must be licensed by L&I. It also requires all claims administrators managing claims for self-insured employers to be certified.	07/01/21	Final Order		David Streeter DavidS@wsha.org
1	Payment of office visits for clients under the Alien Emergency Medical program for COVID-19	Health Care Authority	The Health Care Authority is revising this section to allow for payment of office visits for clients under the Alien Emergency Medical (AEM) program when the visit is specifically for the assessment and treatment of the COVID-19 virus.	07/02/21	Emergency Rule		Andrew Busz Andrewb@wsha.org



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1	COVID 19: Schedule II Prescriptions	Pharmacy Quality Assurance Commission	The Pharmacy Quality Assurance Commission adopted emergency rules to reduce burdens on patients and practitioners when prescribing Schedule II substances during the COVID-19 pandemic. The emergency rule amends WAC 246-945-010 and increases the duration of time a practitioner has to deliver a signed prescription when authorizing an emergency prescription of a Schedule II substance to the pharmacy from seven days to fifteen days. The emergency rule also redefines what is a "signed prescription." These emergency rules have already been in effect on WAC 246-887-020, but were refiled to correspond to the new chapter recently adopted by the commission.	07/02/21	Emergency Rule		David Streeter
1	Workers' Compensation Self-Insurance 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.	07/23/21	Final Order	Concise Explanatory Statement	David Streeter DavidS@wsa.org
1	Emergency Rule: COVID-19 Notifiable Condition	Washington State Board of Health	The Washington state board of health has adopted a second emergency rule to continue to designate COVID-19 as a notifiable condition and extends reporting requirements for health care providers, health care facilities, laboratories, and local health jurisdictions to report race, ethnicity, and other demographic data for cases of COVID-19. The rule establishes what testing and demographic data need to be reported as well as the timing and mechanism of reporting. The rule allows for certain waivers by a local health officer. This emergency rule will continue to require specific data elements to be reported with COVID-19 test results. This rule is more closely aligned with United States Department of Health and Human Services (HHS) laboratory data reporting guidance and reflects reporting requirements that can more reasonably be collected through the current public health reporting structure. The existing emergency rule incorporates HHS guidance and also requires reporting of additional data beyond what is included in guidance, including components such as the patient's race and ethnicity using disaggregated reporting categories, the patient's primary language and emergency contact phone number, and responses to "ask on order entry" questions. This emergency rule will take effect upon the expiration of the existing emergency rule.	07/23/21	Emergency Rule		David Streeter DavidS@wsa.org



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1	Emergency Rule: COVID-19 Reporting	Washington State Board of Health	<p>The Washington state board of health has adopted a fifth emergency rule to continue to designate novel coronavirus (SARS-CoV-2), also known as coronavirus disease 2019 (COVID-19), as a notifiable condition and extends reporting requirements for health care providers, health care facilities, laboratories, local health jurisdictions, and the department of agriculture (DOA) to report certain data with each COVID-19 test, including test results, relevant demographic details (e.g., patient's age, race, ethnicity, sex), and additional information. The rule allows for certain waivers by a local health officer. The rule establishes what testing and demographic data need to be reported as well as the timing and mechanism of reporting in accordance with P.L. 116-136, § 18115(a), the Coronavirus Aid, Relief, and Economic Security (CARES) Act. In addition to the above provisions, this emergency rule lengthens reporting time frames in which local health jurisdictions must notify the department of health (department) of COVID-19 cases, submit case investigations upon completion, and reassign cases to the department. These revisions are intended to better reflect the department's capacity to receive these data and for local health jurisdictions to transmit these data. This emergency rule will replace the current emergency rule filed as WSR 21-16-014.</p>	08/23/21	Emergency Rule		David Streeter DavidS@wsha.org
1	Medicaid State Plan Amendment: Supplemental Hospital Payments	Health Care Authority	<p>SPA 21-0035 is expected to increase the annual aggregate fee-for-service supplemental payment amounts for inpatient services. For hospitals designated as prospective payment system hospitals, the supplemental payment pool will be increased by \$1,335,000 per state fiscal year. For hospitals designated as freestanding psychiatric specialty hospitals, the supplemental payment pool will be increased by \$500,000 per state fiscal year. For hospitals designated as freestanding rehabilitation specialty hospitals, the supplemental payment pool will be increased by \$150,000 per state fiscal year.</p>	09/17/21	Notice		Andrew Busz Andrewb@wsha.org



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1	Emergency Rule: Retired Active Pharmacist License	Pharmacy Quality Assurance Commission	This adopted emergency rule will extend WSR 21-12-096 filed on June 2, 2021, without change. On March 26, 2020, Governor Inslee signed Proclamation 20-32 to help increase the number of health care workers available to meet the needs of patients during the coronavirus disease 2019 (COVID-19) pandemic. This proclamation included a provision that allows a pharmacist with a retired active pharmacist license status to practice pharmacy. Specifically, the proclamation amended WAC 246-863-080(2), which was effective at that time, to allow holders of a retired active pharmacist license status to practice pharmacy while the proclamation remains in effect.	09/30/21	Emergency Rule		David Streeter DavidS@wsha.org
1	Prescription Drug Monitoring Program	Health Care Authority	The agency intends to establish rules regarding provider use of the qualified prescription drug monitoring program, as required by Section 5042 of the SUPPORT for Patients and Communities Act (P.L. 115-271), prior to prescribing or dispensing scheduled drugs. During the course of this review, the agency may identify additional related changes in order to improve clarity of update policy.	10/01/21	Final Order		David Streeter DavidS@wsha.org
1	Emergency Rule: COVID-19 Test Reporting	Department of Health	DOH is adopting an emergency rule to amend WAC 246-338-026 mandating reporting of test results intended to detect SARS-CoV-2 or diagnose a possible case of the coronavirus disease 2019 (COVID-19) in alignment with the federal changes published in 85 F.R. 54820. WAC 246-338-020 is amended to add language referencing the new subsection in WAC 246-338-026. These changes will allow the new reporting, inspection, and fining processes in compliance with the new federal requirements which will ensure the current clinical laboratory improvement amendments (CLIA) exempt status is not threatened and will respond to the current public health emergency created by the COVID-19 pandemic. This is the fourth emergency rule for these amendments. It continues without change to the emergency rule that was filed on June 11, 2021, under WSR 21-13-045, and the prior filings on February 12, 2021, under WSR 21-05-048 and October 15, 2020, under WSR 20-21-062.	10/08/21	Emergency Rule		David Streeter DavidS@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.	10/08/21	Final Order		David Streeter DavidS@wsha.org



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1	COVID 19: Schedule II Prescriptions	Pharmacy Quality Assurance Commission	The Pharmacy Quality Assurance Commission adopted emergency rules to reduce burdens on patients and practitioners when prescribing Schedule II substances during the COVID-19 pandemic. The emergency rule amends WAC 246-945-010 and increases the duration of time a practitioner has to deliver a signed prescription when authorizing an emergency prescription of a Schedule II substance to the pharmacy from seven days to fifteen days.	10/25/21	Emergency Rule		David Streeter
1	Payment of office visits for clients under the Alien Emergency Medical program for COVID-19	Health Care Authority	The Health Care Authority is revising this section to allow for payment of office visits for clients under the Alien Emergency Medical (AEM) program when the visit is specifically for the assessment and treatment of the COVID-19 virus.	10/28/21	Emergency Rule		Andrew Busz Andrewb@wsha.org
1	Emergency Rule: HELSA	Department of Labor & Industries	The emergency rule maintains requirements for when there is a public health emergency for an infectious or contagious disease and as such, the requirements are applicable to COVID-19. Under the emergency rule: •Employers with more than 50 covered employees at a workplace or worksite are required to report infectious or contagious disease outbreaks to L&I; •Employees are not required to disclose any medical condition or diagnosis to their employer; •Employers, except for certain health care employers, are required to notify employees in writing of potential exposures within one business day; •Employees and contractors must be permitted to voluntarily use personal protective equipment.	12/07/21	Emergency Rule		David Streeter DavidS@wsha.org
1	Emergency Rule: COVID-19 Reporting	Washington State Board of Health	WSBOH has adopted a sixth emergency rule to continue to designate COVID-19 as a notifiable condition and extends reporting requirements for health care providers, health care facilities, laboratories, local health jurisdictions, and the department of agriculture (DOA) to report certain data with each COVID-19 test, including test results, relevant demographic details (e.g., patient's age, race, ethnicity, sex), and additional information. The rule allows for certain waivers by a local health officer. The rule establishes what testing and demographic data need to be reported as well as the timing and mechanism of reporting in accordance with Public Law 116-136, § 18115(a), the Coronavirus Aid, Relief, and Economic Security (CARES) Act.	12/21/21	Final Order		David Streeter DavidS@wsha.org



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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.	12/23/21	Final Order	Rule Page	David Streeter DavidS@wsha.org
2	Prescription Drug Utilization Management	Office of the Insurance Commissioner	Prescription Drug Utilization Management, OIC- The Legislature passed ESHB 1879 during the 2019 session. It requires health carriers and prescription drug utilization management companies, which restrict prescription drug coverage through utilization management protocols, to provide the patient and prescribing practitioner access to a clear, readily accessible and timely exception process. It also requires utilization management protocols to be evidence based and creates requirements and timelines for step therapy exception requests. The Office of the Insurance Commissioner will develop rules to establish how the notice to participating providers would be given the standard process requirements and external review options.	01/01/21	Final Order	Rule Page	Andrew Busz Andrewb@wsha.org
2	Network Access and Notice Requirements	Office of the Insurance Commissioner	Network Access and Notice Requirements, OIC- Amend existing rules and add new sections to align with Chapter 11, Laws of 2019 (ESHB 1099), requiring additional network access standards, in addition to new notices and information being provided about networks and access.	01/11/21	Final Order		Andrew Busz Andrewb@wsha.org



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2	COVID 19: Nursing Rules	Department of Health	The nursing care quality assurance commission is adopting emergency rules in response to the coronavirus disease (COVID-19). These rules apply to the specific regulatory requirements for LPNs, RNs and ARNPs. The amendments remove specific barriers that nurses face to providing care in response to COVID-19. Waiving the requirement for continuing education removes a barrier for nurses with a retired active license and will allow them to immediately begin working. Waiving the restriction that ARNPs with an inactive or expired license must complete clinical practice hours removes a barrier to rejoining the health care workforce. Allowing LPN students to practice as nursing technicians addresses the demand for more healthcare professionals in the workforce. Amending language to add clarification to the preceptor rules and simulation rules eliminates current obstacles in nursing education to address the demand for more healthcare professionals. Amending the requirements for nurse delegation to waive requirements and streamline the process will remove barriers for nurses to complete high demand duties. More health care professionals will [be] available to respond to current demands because of these changes.	01/20/21	Emergency Rule		Ashlen Strong AshlenS@wsha.org
2	DDA Client Rights	Department of Social and Health Services	The developmental disabilities administration (DDA) is planning to amend these rules to implement SSHB [2SHB] 1651 (2019), which is related to the rights of clients of the DDA. During the course of this review, the department may make additional changes that are necessary to improve clarity or update policy.	02/07/21	Final Order		Zosia Stanley zosiaS@wsha.org
2	Emergency Rule: DDA HCBS Waiver Rule Alignment with CMS	Department of Social and Health Services	Filing these amendments on an emergency basis is necessary to ensure federal compliance and maintain federal funding for the state. This is the third filing on these sections; however, the rule text in the second filing differed from the rule text in the first filing. The rule text has changed because DDA is progressing through the permanent rule-making process and feedback from stakeholders has resulted in some changes. This third filing is necessary to keep the emergency rule in place until DDA completes the permanent rule-making process. The department filed a CR-101 Preproposal statement of inquiry as WSR 20-20-100 on October 5, 2020, to begin the permanent rule-making process. In addition, under the rule development phase of permanent rule making, DDA has been circulating the text for feedback and progressing through the permanent rule-making process.	02/24/21	Emergency Rule		Zosia Stanley zosiaS@wsha.org



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2	Emergency Rule: DDA HCBS Waiver Rule	Department of Social and Health Services	The department is enacting WAC 388-845-2019 on an emergency basis to make temporary modifications to DDA home and community based services (HCBS) waivers in order to control the spread of the COVID-19 virus and meet immediate health and safety needs. This is the fourth emergency filing on WAC 388-845-2019, and the language in this fourth filing is identical to that of the third emergency filed as WSR 20-22-035. However, language in this filing and the third emergency filing differs substantively from the first and second emergency filings because DDA is progressing through the permanent rule-making process and has received feedback that has resulted in changes to rule language.	02/25/21	Emergency Rule		Zosia Stanley zosiaS@wsha.org
2	Exceptions to Rule Related to Long-Term Services and Supports Programs	Health Care Authority	The agency is amending WAC 182-503-0090 to specify the department of social and health services (DSHS) administrations responsible for processing exceptions to rule related to long-term services and supports programs. The agency is also making nonsubstantive changes for consistency with other agency rules. During the course of this review, the agency may identify additional related changes that are required in order to improve clarity or update policy.	03/01/21	Final Order		Andrew Busz Andrewb@wsha.org
2	New Behavioral Health Chapter 182-110 WAC	Health Care Authority	The agency intends to develop rules to implement the requirements of SHB 2728, which requires the health care authority (HCA) to: (1) Calculate the annual costs to operate and administer the partnership lines described in SHB 2728; (2) Calculate the proportion of clients covered by the medicaid program; and (3) Collect a proportional share of program costs from entities that are not for covered lives under contract with HCA as medicaid managed care organizations. During the course of this review, the agency may identify additional related changes that are required in order to improve clarity or update policy.	03/04/21	Final Order		Cara Helmer Carah@wsha.org
2	Emergency Rule: De-Scheduling Epidiolex	Pharmacy Quality Assurance Commission	PQAC is adopting emergency rules to remove Epidiolex from the list of Schedule V controlled substances in Washington state.	03/05/21	Emergency Rule		David Streeter DavidS@wsha.org
2	COVID-19: Medicaid Client Signature Requirement for Pharmaceuticals	Health Care Authority	The health care authority is temporarily removing the requirement to obtain a signature from the medicaid client or the client's designee upon receipt of pharmacy products dispensed and delivered directly to a client.	03/09/21	Emergency Rule		David Streeter DavidS@wsha.org



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2	PA's Ordering Home Health Services	Department of Health	The purpose of the proposed amendment to WAC 246-335-510(3) is to add physician assistants to the list of practitioners authorized to order home health services and to sign plans of care. This change will expand health care facilities' ability to provide appropriate care for individuals who no longer need to be in a hospital or other health care facility, while also allowing health care facility resources to be used more effectively, facilitating the response to the public health emergency created by the coronavirus disease (COVID-19) pandemic.	03/28/21	Final Order		David Streeter DavidS@wsha.org
2	Ordering of Home Health Services by nonphysician practitioners	Health Care Authority	The agency is amending WAC 182-543-0500 and WAC 182-551-2040 to allow ordering of home health services, including medical supplies, by nonphysician practitioners.	03/30/21	Emergency Rule		David Streeter DavidS@wsha.org
2	Vital Statistics Data Release	Department of Health	The Department of Health is considering creating a new chapter of rule to: prescribe the direct and indirect identifiers for birth and fetal death records; establish a formalized procedure for requesting vital records data; and establish fees for data files, analysis, and data requests.	04/01/21	Final Order		David Streeter DavidS@wsha.org
2	Emergency Rule: Nursing Home Physician Delegation	Department of Social and Health Services	The department is extending the amendment of the rules listed below to ensure nursing homes are not significantly impeded from admitting and caring for residents during the COVID-19 outbreak. These amendments will continue to align state nursing home rules with federal rules that were suspended or amended to help facilitate care during the COVID-19 pandemic. The federal rules were amended to allow physicians to delegate tasks to a physician assistant, nurse practitioner, or clinical nurse specialist. Current state rules specify physicians must perform some tasks. The amendment will permit delegation of those tasks as long as the task is within the scope of practice of the delegate, and the delegate works under the supervision of the physician.	04/21/21	Emergency Rule		Zosia Stanley zosiaS@wsha.org
2	WAC 182-530-7900 Drugs purchased under the Public Health Service Act	Health Care Authority	The agency is revising this section to clarify that as part of participation in the 340B program, providers must agree, via an annual attestation form, that all claims for Washington apple health clients in both fee-for-service and managed care are subject to their respective 340B rules. The agency is amending subsection (4) to include the medicaid fee-for-service program.	05/01/21	Final Order		Andrew Busz Andrewb@wsha.org



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2	Emergency Rule: WAC 388-97-0300 Notice of rights and services.	Department of Social and Health Services	The department is extending the amendment of the rule listed below to assure [ensure] nursing homes are not significantly impeded from admitting and caring for residents during the COVID-19 outbreak. These amendments will align state nursing home rules with federal rules that were suspended or amended to help facilitate care during the COVID-19 pandemic. The federal rules were amended to allow nursing facilities to provide clinical records to residents and resident representatives in ten working days instead of two working days. Current state rules specify clinical records be accessible to residents and their representatives for review within twenty-four hours and copies must be provided within two working days. The amendment lengthens the time nursing homes have to provide the resident access to, or copies of the requested clinical record from two to ten days. The amendment does not permit the nursing facility to deny the resident access to records.	05/05/21	Emergency Rule		Zosia Stanley zosias@wsha.org
2	CQIP for non-hospital health care entities -	The Department of Health	Department of Health - CQIP for non-hospital health care entities - Chapter 246-50 WAC, Coordinated quality improvement program (CQIP), the Department of Health will review the CQIP chapter and will consider updating the rules for clarification, streamlining, modernization, and other necessary updates for compliance with state statute.	05/21/21	Final Order		Zosia Stanley zosias@wsha.org
2	Emergency Rule: Nursing Home TB Screening	Department of Social and Health Services	The department is amending the rules listed below to assure nursing homes are not obstructed from offering the COVID-19 vaccine to residents and staff because of clinical interference from required tuberculosis (TB) testing. Current state rules specify that nursing homes administer TB testing to residents and staff within three days of employment or admission, unless the person is excluded from testing under the rules. The amendment permits the nursing home to defer TB testing if the person is in the process of receiving the COVID-19 vaccine, or if receiving the vaccine is of greater benefit and less risk than performing TB testing before administering the vaccine. The amendment does not permit the nursing facility to defer TB testing for reasons other than the COVID-19 vaccine, and requires the nursing home to complete the TB testing as soon as the COVID-19 vaccine recommendations permit. The rules also require screening for signs and symptoms of TB for those persons who are deferring TB testing.	05/25/21	Emergency Rule		Zosia Stanley zosias@wsha.org



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2	Emergency Rule: DDA HCBS Waiver	Department of Social and Health Services	The department is enacting WAC 388-845-2019 on an emergency basis to make temporary modifications to the developmental disabilities administration's (DDA) home and community-based services (HCBS) waivers in order to control the spread of the COVID-19 virus and to meet immediate health and safety needs. This is the fifth filing on WAC 388-845-2019; however, language in this filing differs substantively from the fourth because the Centers for Medicare and Medicaid Services (CMS) approved additional Appendix K waiver amendments. This emergency cancels and supersedes the CR-103E filed as WSR 21-06-036.	05/26/21	Emergency Rule		Zosia Stanley zosias@wsha.org
2	CMS SUD Waiver	Health Care Authority	The agency is creating a new section within this chapter to meet the Centers for Medicare and Medicaid Services (CMS) milestone requirement 3 regarding the agency's Section 1115 Substance Use Disorder (SUD) Waiver Implementation Plan. Milestone 3 requires the adoption of rules reflecting the requirement that residential treatment facilities offer medication assisted treatment access on-site or facilitate off-site access.	06/03/21	Final Order		Cara Helmer Carah@wsha.org
2	182-51, 182-70, and 182-526 WAC Hearings and Appeals	Health Care Authority	Revisions to these sections are necessary due to the revisions the health care authority (HCA) is making to WAC 182-526-0005 Purpose and scope, which HCA filed a CR-101 under WSR 20-11-072 on May 20, 2020. Consistency is needed between chapters 182-51, 182-70, and 182-526 WAC regarding hearings and appeals. During the course of this review, the agency may identify additional related changes that are required in order to improve clarity or update policy.	06/12/21	Final Order		Andrew Busz Andrewb@wsha.org
2	Emergency Rule: DDA HCBS Waiver Rule Alignment with CMS	Department of Social and Health Services	Filing these amendments on an emergency basis is necessary to ensure federal compliance and maintain federal funding for the state. This is the fourth filing on these sections and the text is identical to that in the third filing. (The rule text in the second filing differed from the rule text in the first filing.) This fourth filing is necessary to keep the emergency rule in place until DDA completes the permanent rule-making process. (DDA is currently at the public hearing phase of the permanent rule-making process. The public rules hearing is scheduled for July 27, 2021.)	06/23/21	Emergency Rule		Zosia Stanley zosias@wsha.org
2	Ordering Home Health Services by Non-Physician Practitioners	Health Care Authority	The agency is amending WAC 182-543-0500 and 182-551-2040 to allow ordering of home health services, including medical supplies, by certain nonphysician practitioners. During the course of this review, the agency may identify additional related changes that are required in order to improve clarity or update policy.	06/26/21	Final Order	Supplemental Notice	David Streeter DavidS@wsha.org



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PRIORITY	RULE	AGENCY	DESCRIPTION	EFFECTIVE DATE	FINAL ORDER	EXTRA MATERIALS	WSHA CONTACT
2	Medicaid State Plan Amendment- Fee Schedule Effective Date Updates	Health Care Authority	<p>HCA intends to submit medicaid SPA 21-0024 to update the fee schedule effective dates for several medicaid programs and services. This is a regular, budget neutral update to keep rates and billing codes in alignment with the coding and coverage changes from the Centers for Medicare and Medicaid Services, the state, and other sources. These changes are routine and do not reflect significant changes to policy or payment. SPA 21-0024 addresses the fee schedule effective dates for the following (please note that other fee schedules may be identified for update subsequent to this notice):</p> <ul style="list-style-type: none"> •Ambulatory surgery centers. •Outpatient services. •Applied behavior analysis services. •Conversion factors. <p>SPA 21-0024 is expected to have no effect on the annual aggregate expenditures/payments for the services listed above. These changes are routine and do not reflect significant changes to policy or payment.</p>	07/01/21	Notice		Andrew Busz Andrewb@wsha.org
2	WAC 388-71-0100 What are the statutory references for WAC 388-71-0100 through 388-71-01281? through 388-71-01281 To whom does the department report a final substantiated finding against a nursing assistant employed in a nursing facility or skilled nursing facility?	Department of Social and Health Services	<p>Because adult protective services (APS) is now a separate division within the aging and long-term support administration, rules will be recodified to a new rule chapter; in response to Crosswhite v. DSHS, 389 P.3d 731, 197 Wn. App. 539 (2017), a definition of "willful" will be added; to memorialize the process, rules will be updated to include the petition process for nursing assistants; and other changes in grammar, structure, and consistency may be made.</p>	07/01/21	Final Order		Zosia Stanley zosiaS@wsha.org



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PRIORITY	RULE	AGENCY	DESCRIPTION	EFFECTIVE DATE	FINAL ORDER	EXTRA MATERIALS	WSHA CONTACT
2	Emergency Rule: Medication Assistance	Pharmacy Quality Assurance Commission	<p>PQAC and DOH are filing jointly to reinstate medication assistance rules as permitted under chapter 69.41 RCW. Specifically, this rule establishes criteria for medication assistance in community-based and in-home care settings in accordance with chapter 69.41 RCW. The definition for medication assistance provided in RCW 69.41.010(15) states: "Medication assistance" means assistance rendered by a nonpractitioner to an individual residing in a community-based care setting or in-home care setting to facilitate the individual's self-administration of a legend drug or controlled substance. It includes reminding or coaching the individual, handing the medication container to the individual, opening the individual's medication container, using an enabler, or placing the medication in the individual's hand, and such other means of medication assistance as defined by rule adopted by the department ...</p> <p>These emergency rules provide further definitions for terms used within this definition such as "enabler" and establish those "other means of medication assistance as defined by rule adopted by the department."</p> <p>These rules help impacted individuals retain their independence and live in the least restrictive setting, such as their own home, longer by providing means and guidance for medication assistance. Also, with the direction provided in RCW 69.41.010(15), the rules are being filed under the joint authority of the commission and the department. The commission's new chapter 246-945 WAC became effective in July 2020. The old rules, including the former rules on medication assistance (chapter 246-888 WAC), were repealed in March 2021. The commission's repeal of chapter 246-888 WAC has resulted in unintended disruptions for medication assistance in the community-based and in-home care settings permitted under chapter 69.41 RCW. Emergency rule making is necessary to immediately restore medication assistance regulations to preserve patient</p>	07/20/21	Emergency Rule		David Streeter DavidS@wsha.org



PRIORITY	RULE	AGENCY	DESCRIPTION	EFFECTIVE DATE	FINAL ORDER	EXTRA MATERIALS	WSHA CONTACT
2	TB Screening Waiver	Department of Social and Health Services	<p>The department is extending the emergency rules ... to assure [ensure] long-term care programs are not significantly impeded during the hiring process due to inability to access the tuberculosis (TB) testing required as a part of the hiring process. This will help to increase the number of long-term care workers necessary to provide essential services to some of Washington's most vulnerable adults during the outbreak of COVID-19. The situation continues that currently clinics providing TB testing are short of staff and have limited availability throughout the state. These clinics are unable to provide the TB testing required as a part of the hiring process in many long-term care programs. This circumstance is expected to exacerbate demand for long-term care workers when the pandemic has already significantly reduced the availability of long-term care workers in the state.</p>	07/21/21	Emergency Rule		Zosia Stanley zosiaS@wsha.org
2	Emergency Rule: Nursing Home Physician Delegation	Department of Social and Health Services	<p>The department is extending the amendment of the rules listed below to ensure nursing homes are not significantly impeded from admitting and caring for residents during the COVID-19 outbreak. These amendments will continue to align state nursing home rules with federal rules that were suspended or amended to help facilitate care during the COVID-19 pandemic. The federal rules were amended to allow physicians to delegate tasks to a physician assistant, nurse practitioner, or clinical nurse specialist. Current state rules specify physicians must perform some tasks. The amendment will permit delegation of those tasks as long as the task is within the scope of practice of the delegate, and the delegate works under the supervision of the physician.</p>	08/17/21	Emergency Rule		Zosia Stanley zosiaS@wsha.org



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PRIORITY	RULE	AGENCY	DESCRIPTION	EFFECTIVE DATE	FINAL ORDER	EXTRA MATERIALS	WSHA CONTACT
2	Emergency Rule: WAC 388-97-0300 Notice of rights and services.	Department of Social and Health Services	The department is extending the amendment of the rule listed below to assure [ensure] nursing homes are not significantly impeded from admitting and caring for residents during the COVID-19 outbreak. These amendments will align state nursing home rules with federal rules that were suspended or amended to help facilitate care during the COVID-19 pandemic. The federal rules were amended to allow nursing facilities to provide clinical records to residents and resident representatives in ten working days instead of two working days. Current state rules specify clinical records be accessible to residents and their representatives for review within twenty-four hours and copies must be provided within two working days. The amendment lengthens the time nursing homes have to provide the resident access to, or copies of the requested clinical record from two to ten days. The amendment does not permit the nursing facility to deny the resident access to records.	08/31/21	Emergency Rule		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.	09/11/21	Final Order		David Streeter DavidS@wsha.org
2	Emergency Rule: NAC and NAR Training Requiements	Nursing Care Quality Assurance Commission	NCQAC is continuing the adoption of emergency rules as the permanent rule-making process continues. The rules in chapter 246-841 WAC provide regulatory requirements for NACs and NARs. These amendments allow additional pathways to comply with current standards. This is the fifth emergency rule and it continues the emergency rule that was filed on May 20, 2021, under WSR 21-12-011, without change. Prior filings were June 26, 2020, WSR 20-14-066; October 23, 2020, WSR 20-22-023; and January 20, 2021, WSR 21-04-004. Transition from emergency to permanent rules were approved by the commission and a notice of intent to begin rule making was filed on February 8, 2021, under WSR 21-05-021. Permanent rule language development is ongoing.	09/17/21	Emergency Rule		Ashlen Strong AshlenS@wsha.org



PRIORITY	RULE	AGENCY	DESCRIPTION	EFFECTIVE DATE	FINAL ORDER	EXTRA MATERIALS	WSHA CONTACT
2	Emergency Rule: NT, LPN, RN, and ARNP Credential and License Requirements	Nursing Care Quality Assurance Commission	<p>NCQAC is continuing the adoption of emergency rules in response to the coronavirus disease 2019 (COVID-19). This is the sixth emergency rule for these amendments and differs from the emergency rule that was filed on May 20, 2021, under WSR 21-12-012. This emergency rule does not include WAC 246-840-125 Retired active credential. Continuing competency rules, effective June 12, 2021, reduced the required education hours and replace [replaced] the emergency provisions in WAC 246-840-125. This emergency rule does not include WAC 246-840-534 Use of simulation for clinical experiences in LPN, RN, or RN to BSN nursing education programs located in Washington state. In-person training for clinical experience provides the desired academic model to assure patient safety and is required in the original rule language. This emergency rule does add clarifying language to WAC 246-840-533 regarding documentation in the nurse technician student's file explaining the reason employment is substituted for traditional clinical experiences. Changes to WAC 246-840-010 were approved by the commission on March 3, 2021, for inclusion in a CR-102. Changes to WAC 246-840-365, 246-840-367, 246-840-533 and 246-840-930 were approved by the commission on May 14, 2021, for inclusion in a CR-101.</p> <p>This emergency rule retains the amendments adopted as WSR 20-10-014, 20-14-065, 20-22-024, 21-04-005, and 21-12-012 with the exceptions stated above. The rules in chapter 246-840 WAC are the licensing requirements for LPNs, RNs, and ARNPs. The emergency rules amend training program options, delegation requirements, and remove additional continuing education hours for specific ARNP credentials. Additionally, the rules waive the requirements for an ARNP to submit evidence of completing continuing education in order to return to active status when holding an inactive license or when returning to active status from expired</p>	09/17/21	Emergency Rule		Ashlen Strong AshlenS@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	<p>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.</p>	09/26/21	Final Order		Andrew Busz Andrewb@wsha.org



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PRIORITY	RULE	AGENCY	DESCRIPTION	EFFECTIVE DATE	FINAL ORDER	EXTRA MATERIALS	WSHA CONTACT
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.	09/26/21	Final Order		Cara Helmer Carah@wsha.org
2	Emergency Rule: Behavioral Health Provider Rate Increases	Health Care Authority	The 2021-2023 operating budget (ESSB 5092, section 211 (34)-(36)), included a proviso directing health care authority (HCA) to provide rate increases for behavioral health services, primary care services, and family planning services. In response, HCA is amending WAC 182-531-0150 Payment methodology for physician-related services—General and billing modifiers, to indicate that HCA may increase rates to maintain and increase access to health care services as directed by the legislature.	10/01/21	Emergency Rule		Andrew Busz Andrewb@wsha.org
2	Medicaid State Plan Amendment: October 2021 Fee Schedule Effective Date Updates	Health Care Authority	HCA intends to submit Medicaid SPA 21-0034 to update the fee schedule effective dates for several Medicaid programs and services. This is a regular, budget neutral update to keep rates and billing codes in alignment with the coding and coverage changes from the Centers for Medicare and Medicaid Services, the state, and other sources. These changes are routine and do not reflect significant changes to policy or payment. SPA 21-0034 addresses the fee schedule effective dates for the following (please note that other fee schedules may be identified for update subsequent to this notice): <ul style="list-style-type: none"> •Ambulatory surgery centers. •Outpatient hospital services. •Transportation. •Air ambulance. SPA 21-0034 is expected to have no effect on the annual aggregate expenditures/payments for the services listed above. These changes are routine and do not reflect significant changes to policy or payment.	10/01/21	Notice		Andrew Busz Andrewb@wsha.org



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2	Medicaid State Plan Amendment: Medicare Cost Reports	Health Care Authority	HCA intends to submit Medicaid SPA 21-0029 regarding Medicare cost reports. This SPA clarifies that HCA may, but is not required to, audit the cost report data used for rate setting. The SPA also clarifies that any HCA division with audit authority will audit hospital billings, as well as other financial and statistical records, and rebase the Medicaid payment system on a periodic basis. SPA 21-0029 is expected to have no effect on the annual aggregate expenditures, reimbursements, or payments for any programs or services; this SPA is for administrative purposes only.	10/01/21	Notice		Andrew Busz Andrewb@wsha.org
2	Medicaid State Plan Amendment: Psychiatric Long-Term Civil Commitment	Health Care Authority	HCA intends to submit Medicaid SPA 21-0030 regarding payment for services provided for psychiatric long-term civil commitments. Under this SPA, Medicare and Medicaid pay for specific "allowed" services at specific "allowed" payment rates; these rates may differ. HCA will pay up to the higher allowed payment for services provided for psychiatric long-term civil commitments when the claim is for an allowed service(s) and paid for by both Medicare and Medicaid. The total Medicare and Medicaid payments cannot exceed HCA's Medicaid payment rate, using the per diem method that would have applied if the claim had been paid by Medicaid alone. The change is expected to increase average expenditures per claim of \$39,000. HCA is making this change to better account for the increased costs for long-term psychiatric care. SPA 21-0030 is expected to increase the annual aggregate expenditures/reimbursement/payment for long-term inpatient psychiatric services by \$1,437,543 annually.	10/01/21	Notice		Andrew Busz Andrewb@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.	10/21/21	Final Order		Zosia Stanley zosias@wsha.org
2	Emergency Rule: De-Scheduling Epidiolex	Pharmacy Quality Assurance Commission	PQAC is adopting emergency rules to remove Epidiolex from the list of Schedule V controlled substances in Washington state.	10/29/21	Emergency Rule		David Streeter DavidS@wsha.org



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PRIORITY	RULE	AGENCY	DESCRIPTION	EFFECTIVE DATE	FINAL ORDER	EXTRA MATERIALS	WSHA CONTACT
2	Medicaid State Plan Amendment: "Rooming In" Newborns Exposed to Substances	Health Care Authority	<p>HCA intends to submit medicaid SPA 21-0032 in order to obtain medicaid funds to reimburse birthing hospitals to support the "rooming in" of the birth parent with their newborn following an in-utero exposure to substances that may lead to physiologic dependence, until the newborn is recovered from neonatal abstinence syndrome (NAS) or neonatal opioid withdrawal syndrome (NOWS) and/or is otherwise ready to be medically discharged. The intent is to provide a newborn administrative day rate or daily reimbursement to help offset the cost of providing the postpartum parent with room and board and limited additional services that are centered on the care and well-being of the newborn.</p> <p>This SPA reflects HCA's response to SSB 5380 which directed HCA to make recommendations on ways to improve the care of birth parents with opioid use disorder and their newborns. Substantial research indicates that keeping the birth parent with the newborn during the exposed newborn's period of observation and potential withdrawal of neonatal NAS/NOWS as the first-line, nonmedication treatment is associated with better outcomes for both the birth parent and the newborn.</p>	11/01/21	Notice		Andrew Busz Andrewb@wsha.org
2	Medicaid State Plan Amendment: Birthing Hospitals	Health Care Authority	<p>HCA intends to submit medicaid SPA 21-0032 in order to obtain medicaid funds to reimburse birthing hospitals to support the "rooming in" of the birth parent with their newborn following an in-utero exposure to substances that may lead to physiologic dependence, until the newborn is recovered from neonatal abstinence syndrome (NAS) or neonatal opioid withdrawal syndrome (NOWS) and/or is otherwise ready to be medically discharged. The intent is to provide a newborn administrative day rate or daily reimbursement to help offset the cost of providing the postpartum parent with room and board and limited additional services that are centered on the care and well-being of the newborn.</p>	11/01/21	Notice		Andrew Busz Andrewb@wsha.org



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PRIORITY	RULE	AGENCY	DESCRIPTION	EFFECTIVE DATE	FINAL ORDER	EXTRA MATERIALS	WSHA CONTACT
2	Emergency Rule: Medication Assistance	Pharmacy Quality Assurance Commission	<p>PQAC and DOH are filing jointly to reinstate medication assistance rules as permitted under chapter 69.41 RCW. Specifically, this rule establishes criteria for medication assistance in community-based and in-home care settings in accordance with chapter 69.41 RCW. The definition for medication assistance provided in RCW 69.41.010(15) states: "Medication assistance" means assistance rendered by a nonpractitioner to an individual residing in a community-based care setting or in-home care setting to facilitate the individual's self-administration of a legend drug or controlled substance. It includes reminding or coaching the individual, handing the medication container to the individual, opening the individual's medication container, using an enabler, or placing the medication in the individual's hand, and such other means of medication assistance as defined by rule adopted by the department ...</p> <p>These emergency rules provide further definitions for terms used within this definition such as "enabler" and establish those "other means of medication assistance as defined by rule adopted by the department."</p> <p>These rules help impacted individuals retain their independence and live in the least restrictive setting, such as their own home, longer by providing means and guidance for medication assistance. Also, with the direction provided in RCW 69.41.010(15), the rules are being filed under the joint authority of the commission and the department. The commission's new chapter 246-945 WAC became effective in July 2020. The old rules, including the former rules on medication assistance (chapter 246-888 WAC), were repealed in March 2021. The commission's repeal of chapter 246-888 WAC has resulted in unintended disruptions for medication assistance in the community-based and in-home care settings permitted under chapter 69.41 RCW. Emergency rule making is necessary to immediately restore medication assistance regulations to preserve patient</p>	11/17/21	Emergency Rule		David Streeter DavidS@wsha.org



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PRIORITY	RULE	AGENCY	DESCRIPTION	EFFECTIVE DATE	FINAL ORDER	EXTRA MATERIALS	WSHA CONTACT
2	TB Screening Waiver	Department of Social and Health Services	The department is extending the emergency rules ... to assure [ensure] long-term care programs are not significantly impeded during the hiring process due to inability to access the tuberculosis (TB) testing required as a part of the hiring process. This will help to increase the number of long-term care workers necessary to provide essential services to some of Washington's most vulnerable adults during the outbreak of COVID-19. The situation continues that currently clinics providing TB testing are short of staff and have limited availability throughout the state. These clinics are unable to provide the TB testing required as a part of the hiring process in many long-term care programs. This circumstance is expected to exacerbate demand for long-term care workers when the pandemic has already significantly reduced the availability of long-term care workers in the state.	11/18/21	Emergency Rule		Zosia Stanley zosiaS@wsha.org
2	Expedited Rule: Repeal of Health Care Assistant WACs	Department of Health	In support of ESSB 6237, the department is proposing repealing chapter 246-826 WAC, Health care assistants. ESSB 6237 created the medical assistant professions under chapter 18.360 RCW and repealed chapter 18.135 RCW, Health care assistants. Without the statute, the health care assistants profession rules are not enforceable and chapter 246-826 WAC must be repealed. ESSB 6237 established medical assistants as a profession to consolidate certification requirements and provide more comprehensive, versatile medical services to the public. To prevent statutory redundancy, the legislature repealed the health care assistants laws and eliminated the profession. Repealing chapter 246-826 WAC is necessary because the profession no longer exists under statutory authority meaning the rules cannot be enforced.	11/23/21	Expedited Rule		Ashlen Strong AshlenS@wsha.org



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PRIORITY	RULE	AGENCY	DESCRIPTION	EFFECTIVE DATE	FINAL ORDER	EXTRA MATERIALS	WSHA CONTACT
2	COVID-19: Nursing Home Rules	Department of Social and Health Services	The department is extending the amendment of the rules listed below to assure [ensure] nursing homes are not significantly impeded from admitting and caring for residents during the COVID-19 outbreak. These amendments will continue to align state nursing home rules with federal rules that were suspended or amended to help facilitate care during the COVID-19 pandemic. The federal rules were amended to allow physicians to delegate tasks to a physician assistant, nurse practitioner, or clinical nurse specialist. Current state rules specify physicians must perform some tasks. The amendment will permit delegation of those tasks as long as the task is within the scope of practice of the delegate, and the delegate works under the supervision of the physician.	12/08/21	Emergency Rule		Zosia Stanley zosiaS@wsha.org
2	Emergency Rule: Nursing Home Transfers and Discharge	Department of Social and Health Services	The department is amending WAC 388-97-0140 and 388-97-0120 to waive and suspend the requirement for nursing homes to suspend certain transfers and discharges pending the outcome of a resident appeal of the nursing home transfer or discharge decision. The COVID-19 pandemic continues to require more rapid transfers and discharges than the rule permits. This emergency rule waives the requirement for nursing homes to suspend certain transfers and discharges pending the outcome of a resident appeal hearing, and improves resident safety by allowing faster grouping of COVID-19 positive residents in one facility, or grouping asymptomatic residents together. This helps expedite infection control processes, and maximizes the availability of nursing home beds. This amendment will align with federal rules. This WSR cancels and supersedes the emergency filed as WSR 21-24-069.	12/09/21	Emergency Rule		Zosia Stanley zosiaS@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.	12/11/21	Final Order		Cara Helmer Carah@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.	12/23/21	Final Order	Rule Page	Andrew Busz Andrewb@wsha.org



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2	Emergency Rule: State and Federal COVID-19 Compliance	Department of Health	Emergency rule to clarify that licensed facilities must comply with state and federal statutes, rules, lawful orders, and other legal requirements, including lawful orders issued to prevent the spread of COVID-19. This emergency rule establishes that all health care facilities licensed by the department of health must comply with state and federal statutes, administrative rules, lawful orders, and other legal requirements relating to the operation of the facility and the control or prevention of the spread of COVID-19, including orders issued by the governor, by the secretary of health, by a local board of health, and by a local health officer.	12/23/21	Emergency Rule		Zosia Stanley zosiaS@wsha.org
3	Confidential communications	Office of the Insurance Commissioner	With the passing of SB 5889, the Commissioner is considering rulemaking to update Chapter 284 WACs to unite with the new law. At this time the Commissioner is considering amending the following WACs: WAC 284-43-2000(6)(c)(i) and (ii) to address if a protected individual completes the nondisclosure form; WAC 284-43-2050(12), (13) and (20) to address if a protected individual completes the nondisclosure form; WAC 284-43-3070(1) Notice is mailed to enrollee so this also needs to be addressed; WAC 284-43-4040 Notice is mailed to the enrollee [(1) and (6)] so this needs to be addressed; WAC 284-43-7100 Need to consider the access to the protected individual's nondisclosure form in (1) and the notification in (3) when a protected individual completes the nondisclosure form; WAC 284-04-510 May need to unite this WAC with new law; WAC 284-170-421(5) amend to address when a protected individual completes the nondisclosure form.	01/02/21	Final Order	Rule Page	Cara Helmer Carah@wsha.org
3	Sales and Use Tax Exemption Update	Department of Revenue	The department is amending WAC 458-20-168 to incorporate 2020 legislation ESB 5402. The legislation codifies terms relating to sales and use tax exemptions in RCW 82.08.808, 82.12.808, 82.08.02807, and 82.12.02749.	01/09/21	Final Order		Andrew Busz Andrewb@wsha.org
3	Mitigating inequity in the health insurance market	Office of the Insurance Commissioner	Amending existing rules and add new sections necessary to implement HB 2554, chapter 283, Laws of 2020, concerning mandatory benefits, notices and fees related to mandatory benefits.	01/18/21	Final Order	Rule Page	Andrew Busz Andrewb@wsha.org
3	Percutaneous coronary intervention (PCI) Services Concurrent Review Cycles	Department of Health	The department of health (department) is adopting an emergency rule to extend deadlines for PCI services concurrent review cycle. This existing rule sets the deadlines for each step of the concurrent review process based on identified need for PCI services in Washington state. The amendments in this emergency rule are necessary due to the coronavirus disease 2019 (COVID-19) pandemic response.	01/19/21	Emergency Rule		David Streeter DavidS@wsha.org



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PRIORITY	RULE	AGENCY	DESCRIPTION	EFFECTIVE DATE	FINAL ORDER	EXTRA MATERIALS	WSHA CONTACT
3	COVID-19: NAC/NAR Training Requirements	Department of Health	These rules apply to specific training requirements for NAC and NAR. The amendments will allow the commission to survey online classes approved by the commission, assist with demonstration of skills in a lab prior to clinical training, allow program directors to award clinical hours for NAR work, and provide instructions for documenting these work hours. More health care professionals will become available to respond to current demands because of these changes.	01/20/21	Emergency Rule		Ashlen Strong AshlenS@wsha.org
3	COVID-19: NAC/NAR Training Requirements	Department of Health	These rules apply to specific training requirements for NAC and NAR. The amendments will allow the commission to survey online classes approved by the commission, assist with demonstration of skills in a lab prior to clinical training, allow program directors to award clinical hours for NAR work, and provide instructions for documenting these work hours. More health care professionals will become available to respond to current demands because of these changes.	01/20/21	Emergency Rule		Ashlen Strong AshlenS@wsha.org
3	PA's Ordering Home Health Services	Department of Health	The Department of Health is adopting an emergency rule to amend WAC 246-335-510(3) to include physician assistants in the list of practitioners authorized to order home health services and to sign plans of care to match federal and state regulation changes due to the coronavirus disease (COVID-19) pandemic.	01/28/21	Emergency Rule		David Streeter DavidS@wsha.org
3	PNA Allowance	Health Care Authority	The agency is amending these rules to increase the personal needs allowance from \$70.00 to \$71.12 effective January 1, 2021. Funding is approved for this increase which affects those receiving long-term services and supports in medical institutions and alternate living facilities. During the course of this review, the agency may identify additional related changes that are required in order to improve clarity or update policy.	02/06/21	Final Order		Andrew Busz Andrewb@wsha.org
3	Medicaid Client Prescription Signature	Health Care Authority	The agency intends to remove the requirement to obtain a signature from the Medicaid client or the client's designee upon receipt of pharmacy products dispensed and delivered directly to a client; other related rules as appropriate.	03/14/21	Final Order		David Streeter DavidS@wsha.org
3	Emergency Rule: Electronic Document Filing	Department of Health	This emergency rule amends the procedural rules applicable to adjudicative proceedings conducted by the Department of Health and health professions boards and commissions in order to facilitate filing and serving documents during the restrictions put in place by the governor in response to the pandemic.	03/24/21	Emergency Rule		David Streeter DavidS@wsha.org



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3	Chemical Dependency Professional	Health Care Authority	The agency is amending this rule to replace "Chemical Dependency Professional" with "Substance Use Disorder Professional." This change aligns with RCW 18.205.020. During the course of this review, the agency may identify additional related changes that are required in order to improve clarity or update policy.	03/27/21	Final Order		Cara Helmer Carah@wsha.org
3	Medicaid State Plan Amendment- Eligibility Updates	Health Care Authority	HCA intends to submit medicaid SPA 21-0022 to make the following eligibility-related changes to the medicaid state plan: 1. HCA submitted SPA 18-0001 on July 11, 2018, to implement a pilot program designed to monitor requests for multiple reasonable opportunity periods (ROP), which are one hundred twenty days of Washington apple health medicaid coverage. An ROP is designed to give noncitizens time to provide documentation that verifies their immigration status to which they have attested at the time of application. The pilot was effective from July 1, 2018, through June 30, 2019. SPA 21-0022 will remove the pilot information from the medicaid state plan. 2. Per recent Centers for Medicaid and Medicare guidance, HCA will add two immigration statuses that for individuals who are not considered to be lawfully present in the United States: •Individuals granted an administrative stay of removal under 8 C.F.R. 241. •Individuals granted employment authorization under 8 C.F.R. 274a.12 (c)(35) and (c)(36), i, unless they have another qualifying status as described in this regulation. HCA anticipates SPA 21-0022 will have no effect on payments/reimbursement/expenditures.	04/01/21	Notice		Andrew Busz Andrewb@wsha.org
3	Pension Discount Rate for Self-Insured Employers	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 for annual investment returns for the reserve funds for self-insured employers. This rule making will consider reducing the PDR from 5.9 percent to 5.8 percent for self-insurance.	04/01/21	Final Order		David Streeter DavidS@wsha.org



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3	Emergency Rule: LTSS Client Assets	Health Care Authority	The agency is amending this section due to some clients receiving long-term services and supports who have accumulated resources under requirements described in section 6008 of the Families First Coronavirus Response Act (FFCRA) that may result in their loss of coverage when the public health emergency (PHE) ends. The proposed rules allow the client to spend down these excess resources over twelve months beginning the month following the end of the PHE. Additionally, the interim rule with comment published by the Centers for Medicare and Medicaid Services that is being codified in 42 C.F.R. 433.400 requires action on changes in circumstances for these clients, which had been prohibited under FFCRA. This emergency is necessary while the agency works through the permanent rule-making process. The agency filed the proposed rule making under WSR 21-07-122 and a virtual public hearing will be held on April 27, 2021.	04/01/21	Emergency Rule		Zosia Stanley zosiaS@wsha.org



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3	Emergency Rule: Underlying Health Conditions Verification for Unemployment Insurance During a Public Health Emergency	Employment Security Department	<p>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. 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. The emergency rules clarify how the department will verify underlying health conditions for purposes of RCW 50.20.010 (43)(b)(ii) and 50.20.050 (2)(b)(xii)(C)(II).</p> <p>ESSB 5061 went into effect on February 8, 2021. In addition, the new good cause reason to quit applies to job separations that occur on or after April 4, 2021. The immediate adoption of rules is necessary so that the department can verify whether claimants are eligible for unemployment</p>	04/05/21	Emergency Rule		David Streeter DavidS@wsha.org



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3	Emergency Rule: Nursing Home Admissions Rules Suspensions	Department of Social and Health Services	The department is extending the amendment of the rules listed below to assure [ensure] nursing homes are not significantly impeded from admitting and caring for residents during the COVID-19 outbreak. These amendments will continue to align state nursing home rules with federal rules that are suspended or amended to help facilitate care during the COVID-19 pandemic. The federal rules were amended to remove the timelines for completing and transmitting resident assessments, and to delay the requirement by thirty days for a preadmission screening and resident review (PASRR) screening prior to admission to a nursing home. Federal rules also amended care-planning timelines, discharge and transfer notice requirements, and requirements that ensure residents can meet in groups. The rules identified below currently require a PASRR screen prior to admission, have timelines for completion of the comprehensive resident assessment and care plan, and have timelines for the transmission of the resident assessment. These rules also establish the right of residents to participate in resident groups and require specific notice and time requirements before a resident discharge or transfer can occur.	04/06/21	Emergency Rule		Zosia Stanley zosias@wsha.org
3	Allopathic Physician and Physician Assistant AIDS Training Requirement	Washington Medical Commission	When Washington adopted statutes concerning AIDS, very little was known about the disease compared to today. Now, AIDS is very treatable and preventable. In 2014, Governor Inslee issued a proclamation including efforts to reduce stigma, which included updating state law. ESHB 1551 repeals statutes concerning AIDS education and training for emergency medical personnel, health professionals, and health care facility employees, which helps reduce stigma towards people living with HIV/AIDS by not singling out AIDS as an exceptional disease that requires specific training and education separate from other health conditions.	04/12/21	Final Order		Cara Helmer Carah@wsha.org
3	Emergency Rule: SUD Waiver Implementation-MAT	Health Care Authority	The agency is filing this emergency rule to meet the Centers for Medicare and Medicaid (CMS) milestone requirement 3 regarding the agency's Substance Use Disorder (SUD) Waiver Implementation Plan. Milestone 3 required the agency adopt rules by July 1, 2020, reflecting the requirement that residential treatment facilities offer medication assisted treatment access on-site or facilitate off-site access.	04/13/21	Emergency Rule		Cara Helmer Carah@wsha.org

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3	Emergency Rule: Removal of Community Support Benefit Exclusion for IMD	Health Care Authority	This filing is necessary to comply with changes made by the Centers for Medicare and Medicaid Services to the foundational community supports program protocol. These changes permit implementation of supportive housing services in approved IMD facilities under Washington state's 1115 Medicaid Transformation Waiver.	04/23/21	Emergency Rule		Cara Helmer Carah@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.	05/06/21	Final Order		Andrew Busz Andrewb@wsha.org
3	WAC 182-501-0135 Patient Review and Coordination	Health Care Authority	The agency is revising this section to clarify that clients who have comprehensive, private medical insurance (not casualty) are not reviewed or placed into the patient review and coordination program.	05/08/21	Final Order		Andrew Busz Andrewb@wsha.org
3	WAC 182-512-0800 SSI-related medical—General income exclusions	Health Care Authority	The agency is amending WAC 182-512-0800 to add an additional category of income excluded when determining eligibility for Washington apple health SSI-related medical programs, specifically, unearned income withheld for income tax purposes from a benefit that is beyond the person's control. During the course of this review, the agency may identify additional related changes that are required in order to improve clarity or update policy.	05/08/21	Final Order		Andrew Busz Andrewb@wsha.org




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3	Emergency Rule: Nursing Home Admissions Rules Suspensions	Department of Social and Health Services	The department is extending the amendment of the rules listed below to assure [ensure] nursing homes are not significantly impeded from admitting and caring for residents during the COVID-19 outbreak. These amendments will continue to align state nursing home rules with federal rules that are suspended or amended to help facilitate care during the COVID-19 pandemic. The federal rules were amended to remove the timelines for completing and transmitting resident assessments, and to delay the requirement by thirty days for a preadmission screening and resident review (PASRR) screening prior to admission to a nursing home. Federal rules also amended care-planning timelines, discharge and transfer notice requirements, and requirements that ensure residents can meet in groups. The rules identified below currently require a PASRR screen prior to admission, have timelines for completion of the comprehensive resident assessment and care plan, and have timelines for the transmission of the resident assessment. These rules also establish the right of residents to participate in resident groups and require specific notice and time requirements before a resident discharge or transfer can occur.	05/10/21	Emergency Rule		Zosia Stanley zosiaS@wsha.org
3	Suicide Prevention and AIDS Training	Department of Health	The Department of Health is considering amending rules to reflect legislation. ESHB 2411 (chapter 229, Laws of 2020) adds additional requirements for suicide prevention continuing education that impact mental health counselors, marriage and family therapists, and social workers. ESHB 1551 removes training requirements for AIDS training.	05/14/21	Final Order		Cara Helmer Carah@wsha.org
3	Emergency Rule: Percutaneous coronary intervention (PCI) Services Concurrent Review Cycles	Department of Health	The department of health (department) is adopting an emergency rule to extend deadlines for PCI services concurrent review cycle. This existing rule sets the deadlines for each step of the concurrent review process based on identified need for PCI services in Washington state. The amendments in this emergency rule are necessary due to the coronavirus disease 2019 (COVID-19) pandemic response.	05/14/21	Emergency Rule		David Streeter DavidS@wsha.org
3	Emergency Rule: LPN, RN, and ARNP Training	Nursing Care Quality Assurance Commission	NCQAC is continuing the adoption of emergency rules in response to the coronavirus disease (COVID-19). This is the fifth emergency rule for these amendments and it continues, without change, the emergency rule that was filed on January 20, 2021, under WSR 21-04-005.	05/20/21	Emergency Rule		Ashlen Strong AshlenS@wsha.org

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3	Emergency Rule: NAC and NAR Training	Nursing Care Quality Assurance Commission	NCQAC is continuing and amending emergency rules in response to the coronavirus disease (COVID-19) pandemic. The rules in chapter 246-841 WAC provide regulatory requirements for NAC and NAR. These amendments allow additional pathways to comply with current standards. This is the fourth emergency rule and it continues and updates the emergency rule that was filed on January 20, 2021, under WSR 21-04-004. Prior filings on October 23, 2020, under WSR 20-22-023 and June 26, 2020, under WSR 20-14-066. The new amendments are technical changes to the numbering and language removal to match changes made due to the repeal of AIDS education and training requirements.	05/20/21	Emergency Rule		Ashlen Strong AshlenS@wsha.org
3	Drug Data and Price Reporting	Health Care Authority	HCA is amending WAC 182-51-0600 to change the timeframe manufacturers have to report to HCA new covered drugs being introduced to market in Washington. HCA is also amending WAC 182-51-0900 to add the contents of the prescription drug pricing transparency program's nondisclosure agreement. During the course of this review, the agency may identify additional related changes that are required in order to improve clarity or update policy.	05/23/21	Final Order		Andrew Busz Andrewb@wsha.org
3	Medicaid Client Signature Requirement	Health Care Authority	HCA is revising this section to eliminate the requirement for date and signature from the medicaid client or the client's designee upon delivery of medical equipment and supplies in order to avoid contact between the client and delivery person. HCA currently has emergency rules, filed under WSR 20-23-038, striking this requirement.	05/30/21	Final Order		David Streeter DavidS@wsha.org
3	LTSS Client Assets	Health Care Authority	Some clients receiving long-term services and supports (LTSS) have accumulated resources under requirements described in section 6008 of the Families First Coronavirus Response Act (FFCRA) that may result in their loss of coverage when the public health emergency (PHE) ends. The proposed amendment allows the client to spend down these excess resources over twelve months beginning the month following the end of the PHE. Also, the interim rule with comment published by the Centers for Medicare and Medicaid Services (CMS) that is being codified in 42 C.F.R. 433.400 requires action on changes in circumstances for these clients, which had been prohibited under FFCRA.	06/03/21	Final Order		Zosia Stanley zosiaS@wsha.org



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3	Disenrollment of Health Home Enrollees	Health Care Authority	The agency intends to conduct rule making regarding the disenrollment of health home enrollees for cause to align with agency policy. During the course of this review, the agency may identify additional related changes that are required in order to improve clarity or update policy.	06/12/21	Final Order		Andrew Busz Andrewb@wsha.org
3	Nurse Credential Requirement Amendments	Nursing Care Quality Assurance Commission	The Nursing Care Quality Assurance Commission is considering amendments to the continuing competency rules and requirements for active, inactive, expired, and retired active credential status.	06/12/21	Final Order		Cara Helmer Carah@wsha.org
3	WAC 284-30-595- Health Carrier Definition	Office of the Insurance Commissioner	WSR 20-24-070 created WAC 284-30-595 to provide guidance for companies to use and apply implementation credits. Due solely [to] using of the word "insurer" in WAC 284-30-595, health care service contractors and health maintenance organizations were unintentionally excluded. This rule making will specifically define health carriers as a permissible entity within WAC 284-30-595.	06/14/21	Final Order	Rule Page	Andrew Busz Andrewb@wsha.org
3	PMP Rule Alignment with SB 5380	Department of Health	The proposal brings the rules into alignment with the statute. The proposed rules clarify that dispensers shall submit information to the PMP as soon as possible, but not later than one business day. The proposal also removes language that requires a facility or entity to be a trading partner with the state's health information exchange (HIE) in order to have access to the PMP.	06/18/21	Final Order		David Streeter DavidS@wsha.org



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3	Medical Aid for Injured Workers Rule Update	Department of Labor & Industries	The affected rules describe elements used in the process of updating the maximum allowable payments for most professional health care services. These elements are set in rule in order to follow the established methodologies of the department of labor and industries (L&I) and maintain consistency with the health care authority and medicaid purchasing administration. Specifically, the proposed rule changes will do the following: 1. WAC 296-20-135: Update the conversion factors used by L&I for calculating reimbursement rates for most professional health care and anesthesia services. The conversion factors will be updated to correspond to changes in the medical procedure codes, the relative value units, and anesthesia base units. These changes will enable L&I to continue a reimbursement methodology consistent with other state agencies. Cost-of-living adjustments may be incorporated into the changes in the conversion factors. 2. WAC 296-23-220 and 296-23-230: Update the maximum daily reimbursement level for physical and occupational therapy services so L&I may, if necessary, give cost-of-living adjustments to affected providers.	07/01/21	Final Order		Andrew Busz Andrewb@wsha.org
3	Emergency Rule: Severe Heat Exposure	Department of Labor & Industries	L&I is adopting emergency rules to amend the current outdoor heat exposure rules under chapter 296-62 WAC, General occupational health standards; and chapter 296-307 WAC, Safety standards for agriculture, to address extreme high heat procedures.	07/13/21	Emergency Rule		David Streeter DavidS@wsha.org
3	Emergency Rule: Wildfire Smoke	Department of Labor & Industries	L&I is adopting emergency rules regarding wildfire smoke under chapter 296-62 WAC, General occupational health standards. L&I recognizes the hazard of wildfire smoke exposure is increasing every year and potentially presents serious health risks to all workers, especially those working outside in industries such as construction and agriculture. L&I has received a petition for rule making regarding wildfire smoke protections after the historic 2020 wildfires, which created unprecedented smoke conditions in the state.	07/16/21	Emergency Rule		David Streeter DavidS@wsha.org
3	Emergency Rule: COFA Medicaid Eligibility	Health Care Authority	The Consolidated Appropriations Act, 2021 was enacted on December 27, 2020, and restored medicaid funding for eligible individuals living in the United States in accordance with the Compacts of Free Association. The immediate revision of this rule is necessary to align with the act while the agency proceeds with the permanent rules process.	07/22/21	Emergency Rule		Andrew Busz Andrewb@wsha.org



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3	DOH and Professional Board Adjudicative Proceedings	Department of Health	The Department of Health is considering amending the procedural rules applicable to adjudicative proceedings conducted by the department and health professions boards and commissions in order to facilitate filing and serving documents. The department is considering adding the option of e-filing documents with the department's adjudicative clerk's office (ACO) and serving documents to a party or a party's designated representative. Documents would be efiled at a particular email address at the department's ACO and parties could agree to serve documents electronically. The department will consider retaining the options of mailing hard copies to or faxing to the ACO or a party or their designated representative, but removing the requirement to mail copies at the same time as faxing them. The department is considering retaining the option to file by hand delivery.	07/23/21	Final Order		Cara Helmer Carah@wsha.org
3	Chapter 182-535 WAC- Dental-related services	Health Care Authority	HCA is proposing a number of changes to Chapter 182-535- Dental-Related Services	08/01/21	Final Order		Andrew Busz Andrewb@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.	08/01/21	Final Order	Rule Page	David Streeter DavidS@wsha.org
3	Emergency Rule: Home Health Hospice Supervision via Telemedicine	Department of Health	This emergency rule amends WAC 246-335-545 and WAC 246-335-645 to remove the requirement that supervision of aide services must be "during an on-site visit" and to add language that the supervisory visit "may be conducted on-site or via telemedicine." This rule will allow home health and hospice agencies to perform supervision either on-site or via telemedicine.	08/03/21	Emergency Rule		David Streeter DavidS@wsha.org
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.	08/08/21	Final Order		Andrew Busz Andrewb@wsha.org

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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.	08/21/21	Final Order		Cara Helmer Carah@wsha.org
3	Emergency Rule: Nursing Home Admissions Rules Suspensions	Department of Social and Health Services	The department is extending the amendment of the rules listed below to assure [ensure] nursing homes are not significantly impeded from admitting and caring for residents during the COVID-19 outbreak. These amendments will continue to align state nursing home rules with federal rules that are suspended or amended to help facilitate care during the COVID-19 pandemic. The federal rules were amended to remove the timelines for completing and transmitting resident assessments, and to delay the requirement by thirty days for a preadmission screening and resident review (PASRR) screening prior to admission to a nursing home. Federal rules also amended care-planning timelines, discharge and transfer notice requirements, and requirements that ensure residents can meet in groups. The rules identified below currently require a PASRR screen prior to admission, have timelines for completion of the comprehensive resident assessment and care plan, and have timelines for the transmission of the resident assessment. These rules also establish the right of residents to participate in resident groups and require specific notice and time requirements before a resident discharge or transfer can occur.	09/07/21	Emergency Rule		Zosia Stanley zosiaS@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.	09/18/21	Final Order		David Streeter DavidS@wsha.org
3	Emergency Rule: ABA Analysis Age Limits and Language Updates	Health Care Authority	HCA is revising these rules to remove the age limits for applied behavioral analysis (ABA) and update language to remove child or children and replace with client. In WAC 182-501-0600, the agency is updating the "N" (No) to a "Y" (Yes) in the ABA covered services table for ABP 21+, CN 21+ and MN 21+. The agency is also updating the ambulance section in the covered services table for ABP 21+ to a "Y" (Yes) as it was inadvertently left blank.	09/22/21	Emergency Rule		Cara Helmer Carah@wsha.org

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3	Emergency Rule: Long-Term Care Worker Training Requirements	Department of Social and Health Services	The department is requiring long-term care workers (LTCW) to complete training requirements by certain dates that would potentially be before the suspension of the training requirements end. The department is dividing the group of LTCWs who are working now and started within 120 days of when the suspension went into place in early 2020, into cohorts based on length of time working. The rule would then require each cohort to complete the requirements by deadlines in rule with the "oldest" LTCWs having the first deadline and then working through the groups chronologically.	09/22/21	Emergency Rule		Zosia Stanley zosiaS@wsha.org
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.	09/26/21	Final Order		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.	09/27/21	Final Order		Cara Helmer Carah@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.	10/01/21	Final Order		Andrew Busz Andrewb@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.	10/04/21	Final Order		Andrew Busz Andrewb@wsha.org



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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.	10/10/21	Final Order		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.	10/18/21	Final Order		Zosia Stanley zosiaS@wsha.org
3	Behavioral Health License Renewal Amendments	Department of Health	DOH proposes amending two behavioral health professions under the authority of the secretary of health to implement HB 1063 (chapter 57, Laws of 2021). Proposed amendments will incorporate by reference statutes that now allow additional license renewals for licensed counselor associates and substance use disorder professional trainees. Additionally, a proposed amendment will make a housekeeping change to remove an outdated citation. The purpose of the proposed amendments is to align rules with recent statutory changes. HB 1063 created an exception to the statutory limits on associate and trainee license renewals for licensed counselors and substance use disorder professionals (SUDP). Proposed rule amendments will incorporate statutory amendments by reference.	10/25/21	Final Order		Cara Helmer Carah@wsha.org
3	Distance Supervision Hours for Social Workers	Department of Health	DOH is proposing a permanent rule amendment to WAC 246-809-330 to remove the limit on distance supervision hours that may be obtained by social worker associates applying for licensure, consistent with statutory amendments made by SHB 1007 (chapter 21, Laws of 2021). The purpose of the proposed amendment to WAC 246-809-330 is to align with statutory amendments to RCW 18.225.090 made by SHB 1007. Currently, both RCW 18.255.090 and WAC 246-809-330 limit the number of distance supervision hours that may be obtained to forty hours for a social worker associate-advanced and sixty hours for a social worker associate-independent clinical. Statutory amendments effective July 24, 2021, will remove the limits on distance supervision hours, creating a conflict with WAC 246-809-330. Amending WAC 246-809-330 through expedited rule making to remove limits on distance supervision hours will align the regulation with the statute.	10/25/21	Final Order		David Streeter DavidS@wsha.org



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3	WAC 182-550-4800 Hospital Payment Methods—State- Administered Programs	Health Care Authority	The agency is amending these rules to update the grouper from all-patient diagnosis related group (DRG) to all-patient refined DRG and remove references to version 23. During the course of this review, the agency may identify additional related changes that are required in order to improve clarity or update policy.	11/27/21	Final Order		Andrew Busz Andrewb@wsha.org
3	Emergency Rule: Home Health Hospice Supervision via Telemedicine	Department of Health	This emergency rule amends WAC 246-335-545 and WAC 246-335-645 to remove the requirement that supervision of aide services must be "during an on-site visit" and to add language that the supervisory visit "may be conducted on-site or via telemedicine." This rule will allow home health and hospice agencies to perform supervision either on-site or via telemedicine.	12/01/21	Emergency Rule		David Streeter DavidS@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.	12/01/21	Final Order		David Streeter DavidS@wsha.org
3	Apple Health Income Eligibility	Health Care Authority	HCA is creating these new rules to identify income that HCA does not count when determining apple health eligibility. During the course of this review, the agency may identify additional related changes that are required in order to improve clarity or update policy.	12/03/21	Final Order		Andrew Busz Andrewb@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.	12/03/21	Final Order		David Streeter DavidS@wsha.org



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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.	12/10/21	Final Order		David Streeter DavidS@wsha.org
3	Washington State Health Insurance Purpose, Membership, and Reporting	Office of the Insurance Commissioner	The proposed rules will describe the WSHIP, as well as its purpose, membership and annual reporting requirements. Adding these rules will help provide context and clarity regarding what the WSHIP is and which carriers fall under the related reporting requirements.	12/13/21	Final Order		Andrew Busz Andrewb@wsha.org
3	Emergency Rule: Behavioral Health and SUD Mobile Units	Department of Health	DOH is adopting an emergency rule to amend WAC 246-341-0342 to define a mobile unit for behavioral health agencies in Washington and allow opioid treatment programs (OTPs) to add a mobile unit as an extension of their existing license. This will align existing rule with the federal changes published in Title 21 of the Code of Federal Regulations, Parts 1300, 1301, and 1304 (21 C.F.R.). On July 28, 2021, these federal rules were revised to allow OTPs to operate mobile units under their existing federal Drug Enforcement Administration (DEA) license. Although current behavioral health agency (BHA) licensing and certification rules reference 21 C.F.R., these rules went into effect on July 1, 2021, prior to the federal change, and need to be updated to ensure that OTPs in Washington are complying with the current version of the federal rule. The amendments to WAC 246-341-0342 define what a mobile unit is, require OTPs to notify the department in writing prior to operating a mobile unit, and outline requirements for OTPs that operate a mobile narcotic treatment program. These requirements include submitting a copy of the DEA approval for the unit and complying with 21 C.F.R. Parts 1300, 1301, and 1304.	12/15/21	Emergency Rule		Cara Helmer Carah@wsha.org



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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.	12/21/21	Final Order	Rule Page	Andrew Busz Andrewb@wsha.org
3	Emergency Rule: Nursing Home Admissions Rules Suspensions	Department of Social and Health Services	The department is extending the amendment of the rules listed below to assure [ensure] nursing homes are not significantly impeded from admitting and caring for residents during the COVID-19 outbreak. These amendments will continue to align state nursing home rules with federal rules that are suspended or amended to help facilitate care during the COVID-19 pandemic. The federal rules were amended to remove the timelines for completing and transmitting resident assessments, and to delay the requirement by thirty days for a preadmission screening and resident review (PASRR) screening prior to admission to a nursing home. Federal rules also amended care-planning timelines, discharge and transfer notice requirements, and requirements that ensure residents can meet in groups. The rules identified below currently require a PASRR screen prior to admission, have timelines for completion of the comprehensive resident assessment and care plan, and have timelines for the transmission of the resident assessment. These rules also establish the right of residents to participate in resident groups and require specific notice and time requirements before a resident discharge or transfer can occur.	12/24/21	Emergency Rule		Zosia Stanley zosiaS@wsha.org
4	Covered Generic Cough and Cold Products	Health Care Authority	The agency intends to replace the list of covered generic products for the treatment of cough and cold. Instead, the agency will cover only those products with a preferred status on the Medicaid preferred drug list (PDL) on the date a prescription is dispensed.	01/23/21	Final Order		Andrew Busz Andrewb@wsha.org



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4	AIDS Training for Nurses	Nursing Care Quality Assurance Commission	Section 22(11) of ESHB 1551 repeals RCW 70.24.270 Health professionals—Rules for AIDS education and training. This repeal no longer requires health professionals to obtain AIDS education and training as a condition of licensure. As a result, the commission proposes to repeal the requirement for AIDS training in WAC 246-840-025, 246-840-030, 246-840-045, 246-840-090, 246-840-539, 246-840-541, 246-840-860, 246-840-905, 246-841-490, 246-841-578, 246-841-585, and 246-841-610.	02/02/21	Final Order		Cara Helmer Carah@wsha.org
4	Emergency Rule: Apple Health 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, this rule making is necessary to preserve the public health, safety, and general welfare by identifying income that the health care authority (HCA) does not count when determining apple health eligibility. This emergency filing is necessary to renew the current emergency rule which is set to expire on May 29, 2021, while the permanent rule-making process proceeds. Since the previous emergency filing under WSR 20-20-075, HCA sent a draft of the rules to external stakeholders for feedback. As a result of comments received, HCA revised these emergency rules to include changing the end date of lost wage assistance to September 6, 2021, and adding the following to the items listed as income disregards: (1) Unemployment compensation received during the public health emergency for certain non-MAGI eligibility groups, (2) payments from the pandemic relief program as authorized by the governor, and (3) federal pandemic unemployment compensation authorized by the Coronavirus Aid, Relief, and Economic Security Act of 2020 and extended by the American Rescue Plan Act of 2021.	05/06/21	Emergency Rule		Andrew Busz Andrewb@wsha.org
4	Long Term Services and Supports Alignment with Consolidated Appropriations Act of 2021	Health Care Authority	The agency is revising these sections as allowed in the Consolidated Appropriations Act of 2021 extension of spousal impoverishment protections and updating the time frame for institutionalization for RCL from ninety days to sixty days. During the course of this review, the agency may identify additional related changes that are required in order to improve clarity or update policy.	05/30/21	Final Order		Zosia Stanley zosiaS@wsha.org



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4	Provider Fees for Search and Duplicating Health Records	Department of Health	The definition of "reasonable fee" in RCW 70.02.010 requires the fee amount to be adjusted every two years. WAC 246-08-400 referenced these adjustments by stating the specific fees that may be charged. The current rule cites RCW 70.02.010 and a specific subsection for the definition of "reasonable fee." As other amendments to the law are made the subsections may change more frequently than the requirement to adjust the fee. The proposed rule amends the language so that frequent formatting updates to the statute will no longer impact the rule. The proposed amendment continues to reference RCW 70.02.010 but no longer references the specific subsection and does not change the meaning or intent of the rule.	06/18/21	Final Order		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.	07/01/21	Final Order		Andrew Busz Andrewb@wsha.org
4	Emergency Rule: Apple Health 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, this rule making is necessary to preserve the public health, safety, and general welfare by identifying income that the health care authority (HCA) does not count when determining apple health eligibility. This emergency filing is necessary to renew the current emergency rule which is set to expire on May 29, 2021, while the permanent rule-making process proceeds. Since the previous emergency filing under WSR 20-20-075, HCA sent a draft of the rules to external stakeholders for feedback. As a result of comments received, HCA revised these emergency rules to include changing the end date of lost wage assistance to September 6, 2021, and adding the following to the items listed as income disregards: (1) Unemployment compensation received during the public health emergency for certain non-MAGI eligibility groups, (2) payments from the pandemic relief program as authorized by the governor, and (3) federal pandemic unemployment compensation authorized by the Coronavirus Aid, Relief, and Economic Security Act of 2020 and extended by the American Rescue Plan Act of 2021.	09/03/21	Emergency Rule		Andrew Busz Andrewb@wsha.org



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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.	09/26/21	Final Order		Cara Helmer Carah@wsha.org
4	Access to Baby and Child Dentistry Program	Health Care Authority	HCA is amending these rules align with SSB 5976. During the course of this review, the agency may identify additional related changes that are required in order to improve clarity or update policy.	11/28/21	Final Order		Andrew Busz Andrewb@wsha.org
4	Medicaid Coverage Post-Public Health Emergency	Health Care Authority	Certain Medicaid programs extended coverage to clients during PHE. Rule making is needed to avoid a gap in coverage between the time PHE ends and the time similar coverage is reinstated under Medicaid verification procedures that existed before the PHE. 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.	12/03/21	Final Order		Andrew Busz Andrewb@wsha.org