



August 5, 2026

Secretary Dennis Worsham
Washington State Department of Health

Re: Washington State Hospitals Urgent Request For State Law Flexibilities to Support Wildfire Response

VIA E-MAIL

Dear Secretary Worsham:

Washington state's hospitals and health care providers in the area of the declared federal emergency are and will continue to be on the frontlines of wildfire response. The fires are not yet contained and impacts are expected to continue for weeks to come. They are experiencing increased demand for services from community members impacted by smoke, especially those with underlying lung and cardiac conditions and caring for medical needs of firefighters. Staffing challenges are significant because many have lost their homes and are displaced by evacuation orders. One local hospital had to be evacuated resulting in transfer of patients into facilities that are open. While they do not have acute medical needs, residents of local adult family homes have been dropped off at hospitals leading to increased census and demands on staff, space, and supplies. Fires are making transportation in the area challenging, which may soon impact supply availability.

Hospitals and health care providers in the impacted areas (Chelan, Ferry, Okanogan, Spokane, Stevens and Yakima counties, as well as the Confederated Tribes and Bands of the Yakama Nation, Confederated Tribes of the Colville Reservation and the Spokane Tribe of Indians) need state-level flexibility to address critical health system challenges, provide or respond to surge capacity needs, and work with emergency management in responding to the emergency.

Because of these factors, hospitals are respectfully requesting the Department of Health and Governor's Office to provide waivers or suspension of specific health care-related

statutes and substantially equivalent regulations in the impacted areas, pursuant to RCW 43.06.010, RCW 43.06.220, and RCW 43.06.225, including the following:

1. **Capacity and site of care.**

- **Certificate of need:** Allow hospitals to quickly respond to the need for increased beds and alternative care treatment sites without the delays that currently apply to various types of health care facilities including but not limited to hospitals. Waive the requirement for a Certificate of Need (CN) in order to allow for timely increase bed capacity and projects undertaken to provide surge capacity. Applies to: hospices and hospice care centers, hospitals, psychiatric hospitals, nursing homes, kidney disease treatment centers, ambulatory surgical facilities, and home health agencies. Also waive CN requirements and delays for increasing the number of dialysis stations at kidney disease centers.
 - RCW [70.38.105](#)(4) (a), (e), and (h) and substantially equivalent regulations (WAC 246-310-020(a), (c), and (e)).
- **Hospital licensure premises:** Allow hospitals flexibility for in-hospital surge and alternative care sites by waiving the requirement that hospital licensure be for the specific premises named in the application.
 - RCW [70.41.110](#) , the following language only: "premises and";.

2. **Pharmacy flexibility.** Allow pharmacies flexibility to the limitation of a pharmacy license to a particular location to permit pharmacies to store drugs at alternate care sites without obtaining another license. Allow pharmacies flexibility from the requirement to display the license at the pharmacy location:

- RCW [18.64.043](#)(1), the following language only: "of location, which shall entitle the owner to operate such pharmacy at the location specified, or such other temporary location as the secretary may approve,"
- RCW [18.64.043](#)(2)(a), the following language only: "of location"
- RCW [18.64.043](#)(3), the following language only: "and to keep the license of location or the renewal thereof properly exhibited in said pharmacy."

3. **Health care workforce.**

- **Hospital privileging documentation:** Hospitals are facing significant staffing shortages as the local workforce are directly impacted by fires and evacuations. Temporarily waiving requirements to document and verify employment/privileging information before granting or renewing clinical privileges or association of a physician, PA or APRN will allow hospital to more quickly onboard and retain staff.

- RCW [70.41.230](#).
- **Licensure renewal:** Allow the Secretary of Health to extend license renewal periods for all health care professional licensees by policy instead of formal rulemaking.
 - RCW [43.70.280](#)(2), the following language only: "Such extension, reduction, or other modification of a licensing, certification, or registration period shall be by rule or regulation of the department of health adopted in accordance with the provisions of chapter [34.05](#) RCW. Such rules and regulations may provide a method for imposing and collecting such additional proportional fee as may be required for the extended or modified period."
- **Medical assistant supervision:** As noted, hospitals face staffing shortages as their workforces are impacted by the fires. Providers and staff need to be working at the top of their licenses and able to exercise flexibility. Waiving requirements that medical assistants perform duties with a supervising health care practitioner physically present in the room or immediately available during blood draws allows flexibility.
 - RCW [18.360.010](#)(12), the following language only: "physically present and is" and "in the facility. The health care practitioner does not need to be present during procedures to withdraw blood but must be immediately available."

Follow up communication can be sent to me at zosias@wsha.org. We are grateful for the strong partnership between the Department of Health and Washington's hospitals.



Zosia Stanley, Senior Vice President and Deputy General Counsel

Cc:

Kirstin Peterson, Chief of Policy

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