

PRIORITY	Primary	AGENCY	DESCRIPTION	Pre-Proposal	Proposal	Extra Materials	Intended Adoption Date	Effective Date	WSHA Position/Impact	WSHA CONTACT
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.	Pre-Proposal	Proposal		01/06/21	02/06/21	SUPPORT	Shirley Prasad ShirleyP@wsha.org
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.	N/A	Proposal		03/18/21	07/01/21	SUPPORT WITH CONCERNS	Shirley Prasad ShirleyP@wsha.org
1	Chapter 246-341 WAC, Behavioral Health Services Administrative Requirements	Department of Health	The Department of Health is considering updating the chapter of rules for licensed and certified behavioral health agencies that will include: (1) Changes to reflect legislation; (2) changes related to federal requirements; (3) requests from partners and stakeholders for clarification, and areas of clean up that have been identified since the department began regulating behavioral health agencies in 2018.	Pre-Proposal	Proposal		03/16/21		SUPPORT	Jaclyn Greenberg JaclynG@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.	Pre-Proposal	Proposal		05/18/21		CONCERNS	David Streeter DavidS@wsha.org
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.	Pre-Proposal	Proposal		06/22/21		SUPPORT	David Streeter DavidS@wsha.org

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1	Waiver for the Electronic Prescribing Mandate- Providers with 10 or More Prescribers	Department of Health	Prescription Monitoring Program Waiver- The Department of Health is proposing a new section in chapter 246-470 WAC to establish a waiver process and criteria for facilities, entities, offices, or provider groups with ten or more prescribers to apply for an exemption from the PMP and electronic health record (EHR) integration required by Substitute Senate Bill (SSB) 5380.	Pre-Proposal	Proposal		By January 1, 2021		MONITOR	David Streeter DavidS@wsha.org
1	Emergency Medical Services (EMS) and Trauma Care Systems - WAC 246-976	Department of Health	Department of Health he Department of Health (DOH) is updating EMD sections to align with national standards and respond to legislative requirements by: (1) considering updates to align with current national standards; (2) making regulations more clear and concise; (3) responding to statutory requirements; and (4) streamlining initial and renewal application processes for prehospital services licenses and EMS provider certification. ((Ch. 246-976 WAC))	Pre-Proposal					MONITOR	Alicia Eyler AliciaE@wsha.org
1	Workers' Comp Financial Qualification Rules	Department of Labor & Industries	The purpose of this rule making is to update the rules for the financial qualification and maintenance of self-insurance certification, so that these rules are consistent with modern business practices. Existing rules will be amended, and new sections may be added. Existing rules are dated and out of alignment with industry best practices. The key objectives of the rule-making effort are to: •Ensure self-insured employers can accurately and timely provide workers' compensation benefits to their workers; •Protect and safeguard the insolvency trust fund; •Promote transparency for the department of labor and industries (L&I) actions when a firm is placed on financial watch; •Make the rules relevant to current financial conditions and business models; and •Create efficient and adaptable standards for employers' overall financial management.	Pre-Proposal					MONITOR	David Streeter DavidS@wsha.org

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1	Wildfire Smoke	Department of Labor & Industries	The agency recognizes the hazard of wildfire smoke exposure is increasing every year and is now potentially presenting important health risks to all outdoor workers including those in construction and agriculture. Labor and industries has received a petition for rule making on this topic as well. California has adopted rules for workplace safety and health rules regarding wildfire smoke.	Pre-Proposal					MONITOR	David Streeter DavidS@wsha.org
1	OUD Remote Dispensing Sites	Pharmacy Quality Assurance Commission	SSB 6086 mandates that the commission adopt rules to establish the minimum standards for opioid use disorder (OUD) medication remote dispensing sites. Consequently, there is no alternative to adopting rules. Current rules related to storing drugs outside of a pharmacy do not adequately cover the minimum standards and exclude certain facilities from having remote dispensing sites, which does not align with the intent of the law. Furthermore, these regulations must be in rule to [be] enforceable.	Pre-Proposal					MONITOR	David Streeter DavidS@wsha.org
1	EMS Data Reporting for SUD Treatment	Department of Health	Updates to existing sections of chapter 246-976 WAC and the establishment of new sections may be needed to align existing ambulance and aid service requirements with RCW 70.168.090, as revised under SSB 5380. RCW 70.168.090 now requires licensed ambulance and aid services to report patient data electronically to the department and allow for certain data sharing for the purpose of substance abuse treatment. It is anticipated that amendments to existing EMS data rules and new sections may need to be created to ensure clear and concise data submission standards and to produce quality, usable data for improving standards of care and best practice for the benefit and safety of the public.	Pre-Proposal		Rule Page			MONITOR	David Streeter DavidS@wsha.org
1	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.	Pre-Proposal	Proposal				CONCERNS	David Streeter DavidS@wsha.org

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1	Exempting Patients in Nursing Homes and Long-Term Acute Care Hospital from the Opioid Prescribing Rules	Washington Medical Commission	Since the rules related to ESHB 1427 became effective January 1, 2019, the commission has continued to receive comments related to long term acute care and nursing home patients. To address this issue, the commission filed an interpretive statement: "Exempting Patients in Nursing Homes and Long-Term Acute Care Hospital from the Opioid Prescribing Rules." While the interpretive statement has helped to curb the comments and concerns from prescribers, the commission feels this important exemption should be in rule.	Pre-Proposal					MONITOR	David Streeter DavidS@wsha.org
1	Certificate of Need	Department of Health	Certificate of Need- The Department of Health is opening all rules related to Certificate of Need (CN) in chapter 246-310 WAC. The Department is considering amending, creating, and repealing some or all rules to clarify, streamline, develop progressive enforcement tools, and modernize language. This review will include examining general and specific facility type need methodologies. Updates to rules will take into account incorporating national optimal approaches, providing clear and consistent guidance, and reducing litigation. As part of the rulemaking process, the department will consider the rulemaking topics in recently withdrawn Preproposals (CR-101's) as well as recent petitions regarding updates to need methodologies. WSHA is in active discussions with the Department to more clearly understand the approach and breadth in this rulemaking.	Pre-Proposal					MONITOR	David Streeter DavidS@wsha.org
1	Pharmacy Licensing Fees	Pharmacy Quality Assurance Commission	The Department of Health in consultation with the commission, is considering creating a new section in the chapter of rule to move existing licensing fees collected by the commission into the new consolidated chapter created by the commission. The department, in consultation with the commission, will also consider changes to renewal cycles, and restructuring the fees for drug researchers as requested by stakeholders during public comment of the pharmacy chapter rewrite.	Pre-Proposal					MONITOR	David Streeter DavidS@wsha.org

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1	Telemedicine for Physicians and Physician Assistants	Washington Medical commission	The commission will consider rule making to address the practice of physicians and physician assistants engaging in telemedicine with Washington patients. Possible subjects the commission may address are: What, if any requirements for licensure; recordkeeping requirements; establishing a patient-practitioner relationship; prescribing issues; and standard of care. Regulating the use of telemedicine would place the commission in an active patient safety role.	Pre-Proposal		April 19, 2021 Rulemaking Workshop Packet			MONITOR	David Streeter DavidS@wsha.org
1	Right of involuntarily detained/committed individuals to refuse antipsychotic medication	Health Care Authority	The agency intends to develop rules regarding the right of involuntarily detained/committed individuals to refuse antipsychotic medication as required by RCW 71.05.215	Pre-Proposal					MONITOR	Jaclyn Greenberg JaclynG@wsha.org
1	Whistleblower Complaints	Department of Health	The Department of Health (department) is considering revising sections of this chapter to implement SHB 1049 (chapter 62, Laws of 2019) and to ensure the rules are clear, up to date, and align with best practices. Rulemaking is necessary to align rule definitions and criteria with current law, which expanded whistleblower protections. These rule updates are needed to ensure consistency and enforceability.	Pre-Proposal		Draft Rules			MONITOR	Jaclyn Greenberg JaclynG@wsha.org
1	Severity Matrix for Fines Related to Psychiatric Hospital Enforcement	Department of Health	Section 3 of SHB 2426 directs the department to adopt in rule specific fine amounts in relation to the severity of noncompliance by a psychiatric hospital. A fine would only be assessed if the department determines the psychiatric hospital has previously been subject to an enforcement action for the same or similar type of violation of the same statute or rule, or has been given any previous statement of deficiency that included the same or similar type of violation of the same or similar statute or rule, or when the psychiatric hospital failed to correct noncompliance with a statute or rule by a date established or agreed to by the department.	Pre-Proposal		Draft Rules			SUPPORT WITH CONCERNS	Shirley Prasad ShirleyP@wsha.org

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1	Presumptive Eligibility for Long-Term Care	Health Care Authority	The agency is creating new sections in chapters 182-513 and 182-515 WAC to create presumptive eligibility for long-term care in home when a client is discharged home from an acute care hospital or state hospital diversion. During the course of this review, the agency may identify additional related changes that are required in order to improve clarity or update policy.	Pre-Proposal					SUPPORT	Zosia Stanley ZosiaS@wsha.org
1	Trauma Designation Process and Criteria	Department of Health	Since the trauma system's inception, there has not been a review of the process or criteria by which the trauma care regions and department make min/max decisions. The first established criteria have not been formalized in rule and have been used in varying degrees by trauma care regions. As the trauma system matures, trauma centers have expressed interest in applying for level I trauma designation and there is currently no process or criteria in place to objectively evaluate the need and impact of additional trauma centers.	Pre-Proposal					MONITOR	Zosia Stanley ZosiaS@wsha.org
1	Alien Emergency Medical Program	Health Care Authority	The agency is amending WAC 182-507-0115 to change the alien emergency medical program's scope of covered services to include testing, assessment, and treatment of conditions that pose a potential threat to public health.	Pre-Proposal					MONITOR	Zosia Stanley ZosiaS@wsha.org
1	Charity care	Department of Health	The Department of Health will consider rulemaking to revise the state regulations pertaining to charity care (WAC 246-453) to comply with legislation passed in 2018.	Pre-Proposal		Rulemaking activity			CONCERNS	Zosia Stanley ZosiaS@wsha.org
2	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.	Pre-Proposal	Proposal		12/14/20		SUPPORT WITH CONCERNS	Zosia Stanley ZosiaS@wsha.org

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2	Notifiable Conditions (Ch. 246-101 WAC)	Department of Health Washington State Board of Health	Department of Health - Notifiable Conditions (Ch. 246-101 WAC) - The Department of Health (DOH) and the State Board of Health (SBOH) will consider adding notification and specimen submission requirements for "new conditions" and conditions currently identified as "other rare diseases of public health significance"; changing notification and specimen submission requirements for existing conditions; clarifying notification requirements for suspected cases; requiring electronic lab notification; revising reporting requirements for veterinarians and the Washington state department of agriculture; updating statutory references in the rules; updating references to the 2006 Security and Confidentiality Guidelines developed by the Centers for Disease Control and Prevention to the most recent publication; harmonizing definitions between WAC 246-100-011 and chapter 246-101 WAC; and improving clarity and usability. See Pre-Proposal for the list of conditions under consideration.	Pre-Proposal	Proposal	Rulemaking page	03/10/21		MONITOR	David Streeter DavidS@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.	Pre-Proposal	Proposal		04/07/21		SUPPORT	Alicia Eyler AliciaE@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	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.	Pre-Proposal	Proposal		04/28/21		SUPPORT	Alicia Eyler AliciaE@wsha.org Zosia Stanley ZosiaS@wsha.org

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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.	Pre-Proposal	Proposal		04/28/21		MONITOR	Jaclyn Greenberg JaclynG@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.	Pre-Proposal	Proposal		05/12/21		NEUTRAL	Andrew Busz Andrewb@wsha.org
2	E-Prescribing Waiver	Department of Health Pharmacy Quality Assurance Commission	Rules are necessary to allow for a waiver from compliance with the direction given by the legislature in SSB 5380, which mandates all controlled substances be electronically communicated to pharmacies beginning January 1, 2021. The bill directed the department of health (department) to develop a waiver process which a practitioner can use if they have an economic hardship, technological limitation, or other exceptional circumstance that prevents them [from] complying with the mandate.	Pre-Proposal	Proposal		06/04/21		MONITOR	David Streeter DavidS@wsha.org

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2	Hospital Construction Review	Department of Health	Hospital Construction Review - The Department of Health (DOH) is considering amending licensing regulations to align with the 2018 federal and national construction standards, namely the Facility Guidelines Institute (FGI)'s Guidelines for Design and Construction of Hospitals and Guidelines for Design and Construction of Outpatient Facilities. According to the Pre-Proposal, adopting current standards would allow facilities to take advantage of newer construction methods. This change would also provide the opportunity to be consistent with widely-recognized standards that are vital to the health and safety of hospital patients and staff. A report detailing draft proposals in response to the initial draft of revisions to the WAC was recently released. (WAC 246-320-500 thru 600).	Pre-Proposal		Report on Draft Proposals (10.18.18)	Intended: Spring 2019		MONITOR	David Streeter DavidS@wsha.org
2	Direct Care Staff Methodology	Department of Social and Health Services	The department of social and health services (DSHS) is considering amending WAC 388-97-0001 and 388-97-1090 to implement EHB 1564 (chapter 301, Laws of 2019). The bill revised the definition of "direct care staff" to establish the methodology for calculating the hours per day minimum staffing standard. The department will consider amending the staffing language in WAC 388-97-0001 and 388-97-1090 to include when the director of nursing services hours must be included or excluded in calculating the minimum staffing standard.	Pre-Proposal					MONITOR	Andrew Busz Andrewb@wsha.org

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2	Nursing Assistant Standards Update	Nursing Care Quality Assurance Commission	NCQAC identified that chapter 246-841 WAC, excluding WAC 246-841-520, 246-841-720, and 246-841-990; and chapter 246-842 WAC need to be updated to reflect best practices, eliminate redundancy, and make other necessary revisions. Legislated work by NCQAC with key interested parties in 2018-2020 confirms the identified need for updating the rules. The coronavirus disease 2019 (COVID-19) pandemic magnifies the need and urgency for changes to the rules which may eliminate barriers to career advancement for nursing assistants to help address the nursing assistant shortage in health care. Specifically NCQAC is considering: (1) Repealing chapter 246-842 WAC. Chapters 246-841 and 246-842 WAC are similar. Repealing chapter 246-842 WAC may eliminate unnecessary redundancy, which creates confusion about requirements. Any requirements that may need to be retained could be moved to chapter 246-841 WAC; (2) updating the rules overall to reflect the most current standards and practice, clarifying and updating curriculum and testing requirements for training programs, and eliminating barriers to career advancement for nursing assistants to help address the nursing assistant shortage in health care; and (3) standardizing the scope of practice for nursing assistance as allowed by law. The scope of practice for nursing assistants varies depending on the work setting. NCQAC believes	Pre-Proposal					MONITOR	Alicia Eyler AliciaE@wsha.org
2	Licensure for Mental Health counselors, Marriage and Family Therapists, and Social Workers (Ch. 246-809 WAC)	Department of Health	Licensure for Mental Health counselors, Marriage and Family Therapists, and Social Workers (Ch. 246-809 WAC) - The Department of Health (DOH) is considering developing new and revised requirements related to supervision of associates and the approved supervisor requirements in order to better prepare associates for independent licensure. In addition, the department is considering amending the recordkeeping, education, and continuing education requirements to strengthen the requirements and align them with current trends in practice. The department will also consider making clarifications and technical changes in other licensing standards, as needed.	Pre-Proposal					MONITOR	Alicia Eyler AliciaE@wsha.org

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2	WAC 388-97-0300 Notice of rights and services	Department of Social and Health Services	Federal rules regarding nursing home clinical records were amended by the Centers for Medicare and Medicaid Services (CMS) through an 1135 blanket waiver in response to the COVID-19 public health emergency. The amended federal rules are effective March 1, 2020, through the end of the national emergency declaration. The department will monitor federal nursing home communication to ensure this rule making reflects the same span of time as the suspended federal rule regarding clinical records. This will help ensure federal and state rules remain similar and provide for consistent application of clinical record rules during the investigation process.	Pre-Proposal					SUPPORT	Alicia Eyler AliciaE@wsha.org Zosia Stanley ZosiaS@wsha.org
2	TB Screening Waiver	Department of Social and Health Services	The department is considering amending the following rules to identify the period of time tuberculosis testing is suspended or waived during the declared emergency of COVID-19 per Proclamation by the Governor 20-05.	Pre-Proposal					MONITOR	Alicia Eyler Zosia Stanley
2	Chapter 246-926 WAC Radiological technologists	The Department of Health	Chapter 246-926 WAC Radiological technologists - The Department of Health (department) is considering opening rules to clarify, streamline, and modernize the regulations for cardiovascular invasive specialists, radiologic technologists, radiologist assistants, and X-ray technicians. This may include repealing or adding new sections of rules, clarifying competency requirements and identifying authorized duties.	Pre-Proposal					MONITOR	Alicia Eyler AliciaE@wsha.org

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2	Physician Assistants	Washington Medical Commission	<p>The commission is considering updating the PA chapter to more closely align with current industry standards, modernize regulations to align with current national industry standards and best practices, and provide clearer rules language for licensed PAs. Included in this rule-making proposal is incorporating the requirements of SHB 2378 Concerning physician assistants. The commission is considering adding new sections in accordance with SHB 2378. This bill combines the PA licensing under the Washington medical commission effective July 1, 2021, and eliminates the profession of osteopathic physician assistant. The bill instructs the commission to consult with the board of osteopathic medicine and surgery when investigating allegations of unprofessional conduct by a licensee under the supervision of an osteopathic physician. The bill also reduces administrative and regulatory burdens on PA practice by moving practice agreements from an agency-level approval process to employment level process. Employers are required to keep agreements on file. The bill requires the commission to collect and file the agreements. Changes nomenclature from "delegation" to "practice" agreement and from "supervising physician" to "participating physician" agreement.</p>	Pre-Proposal		April 7, 2021 Rule Workshop Packet			SUPPORT	David Streeter DavidS@wsha.org

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2	De-scheduling Epidiolex	Pharmacy Quality Assurance Commission	Epidiolex is an FDA-approved cannabidiol with less than 0.3% THC, used to help treat some seizure disorders. The 2018 Agricultural Improvement Act (2018 Farm Bill) amended the Controlled Substances Act and declassified hemp products with less than 0.3% THC from Schedule I and excluded hemp from the definition of marijuana. Epidiolex remained on Schedule V until April 6, 2020, when the United States Drug Enforcement Agency (DEA) announced that it would no longer be a federally controlled substance. Following this statement and decision from the 2018 Farm Bill, the commission received a petition from stakeholders to update their rules to reflect the change. In response to the federal change, stakeholder petition, and in support of the COVID-19 pandemic response, the commission implemented emergency rules to delete Epidiolex from the list of Schedule V controlled substances on July 10, 2020, under WSR 20-15-059. This proposal is opening WAC 246-945-056 to consider making the emergency rule permanent and align Washington regulation with the federal decision.	Pre-Proposal					SUPPORT	David Streeter DavidS@wsha.org
2	Telemedicine for Osteopathic Physicians and Surgeons	Department of Health	The board will consider rulemaking to address the practice of osteopathic physicians and surgeons engaging in telemedicine with Washington State patients. Possible subjects the board may address are: licensure requirements; record keeping requirements; establishing a patient-practitioner relationship; prescribing issues; and standard of care. Regulating the use of telemedicine ensures the board continues to take an active patient safety role as technology evolves.	Pre-Proposal					SUPPORT	David Streeter DavidS@wsha.org
2	Allopathic CDTA	Washington Medical Commission	The Washington Medical Commission (commission) is considering creating new rule sections to regulate the use of collaborative drug therapy agreements (CDTA).	Pre-Proposal					MONITOR	David Streeter DavidS@wsha.org
2	Medical marijuana consultant certification	Department of Health	The department is opening this chapter of rules to consider amendments that would enhance and clarify training requirements and practice parameters of a medical marijuana certified consultant.	Pre-Proposal					MONITOR	David Streeter DavidS@wsha.org

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2	New rules to implement chapter 220, Laws of 2017 (SSB 5514), Emergency department patient care information—Department of health collection—Confidentiality	Department of Health	Department of Health - DOH is considering creating new rules to implement chapter 220, Laws of 2017 (SSB 5514), Emergency department patient care information—Department of health collection—Confidentiality, by establishing reporting and data release requirements for emergency department data collection.	Pre-Proposal		RHINO rulemaking website			MONITOR	David Streeter DavidS@wsha.org
2	Chapter 246-08 WAC, Practice and Procedure	Department of Health	Department of Health (DOH) - Chapter 246-08 WAC, Practice and Procedure. DOH has opened this chapter to review its rules regarding adjudicative proceedings for declaratory orders; public record requests; agency indexes; and general agency administrative processes. The department is reviewing existing rules within the chapter to identify amendments that may be necessary as a result of changes in statutes, changes in internal operations, opportunities to streamline processes to reduce regulatory burden without compromising public health and safety, and to provide clear, concise and reasonable rules. This rulemaking excludes: WAC 246-08-390 Acquisition, security, disclosure and destruction of health information; and WAC 246-08-400, How much can a health care provider charge for searching and duplicating health care records.	Pre-Proposal					MONITOR	Jaclyn Greenberg JaclynG@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.	Proposal					MONITOR	Zosia Stanley ZosiaS@wsha.org
2	Stabilization, Assessment, and Intervention Facility (SAIF) Program	Department of Social and Health Services	The developmental disabilities administration (DDA) is planning to write new rules to govern the new stabilization, assessment, and intervention facility (SAIF) program. The SAIF program was created by the 2019-2021 operating budget (ESHB 1109, section 203(j), chapter 415, Laws of 2019). During the course of this review, the department may make additional changes that are necessary to improve rule clarity or update policy.	Pre-Proposal					MONITOR	Zosia Stanley ZosiaS@wsha.org

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

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3	Allowing Master's Level Therapists to Treat Injured Workers	Department of Labor & Industries	Allowing Master's Level Therapists to Treat Injured Workers- L&I rules don't currently allow master's level therapists (MLTs) to treat injured workers. Stakeholders requested L&I change the rules and allow these providers to treat workers for accepted conditions within the providers' scope of practice. L&I decided to initiate a pilot to help determine how MLTs can best be incorporated into the workers' compensation setting. Under this pilot these current provisions related to treatment by MLTs are waived for pilot participants only. The pilot will begin on January 1, 2020 and the exceptions granted are effective throughout a four-year pilot period or as otherwise specified. Labor & Industries may pay qualified providers participating in the project to deliver appropriate behavioral and mental health interventions to workers with an open workers' compensation claim. Pilot program results, including billing patterns, submission of required documentation, and referrals for further services will be considered in developing final rule language, medical coverage decisions, and/or payment policy. L&I has determined this waiver is in the public interest and necessary to conduct this pilot project.	Pre-Proposal			12/03/19		SUPPORT	David Streeter DavidS@wsha.org
3	Prenatal Tests - Chapter 246-680 WAC Congenital and Heritable Disorders	Washington State Board of Health	Washington State Board of Health - Prenatal Tests - Chapter 246-680 WAC Congenital and Heritable Disorders - This rule outlines prenatal screening and diagnostic tests that are considered to be medically necessary and are required to be included in benefits packages provided by insurers, health care service contractors, and health maintenance organizations.	Pre-Proposal	Proposal		01/13/21		SUPPORT	Alicia Eyler AliciaE@wsha.org

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3	WAC 182-531-1675 Washington apple health—Gender affirming interventions for gender dysphoria	Health Care Authority	The agency is revising this rule to: <ul style="list-style-type: none"> •Remove the list of noncovered services and clarify that requests will be evaluated for medical necessity; •Remove barriers and unnecessary administrative processes for the client and provider; and •Streamline the authorization process. The proposed rule: <ul style="list-style-type: none"> •Provides that psychosocial evaluations shall be effective for eighteen months instead of twelve; •Allows clients to document safety concerns that have prevented them from living full time in the desired gender; and •Includes alternate requirements for clients who have not met the standard documentation requirements for surgery. Reasons Supporting Proposal: See purpose.	Pre-Proposal	Proposal		01/27/21		MONITOR	Alicia Eyler AliciaE@wsha.org
3	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.	N/A	Proposal		02/22/21		SUPPORT	David Streeter DavidS@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.	Pre-Proposal	Proposal		03/12/21		MONITOR	Alicia Eyler AliciaE@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.	Pre-Proposal	Proposal		03/18/21		MONITOR	Alicia Eyler AliciaE@wsha.org

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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.	Pre-Proposal	Proposal		04/07/21		MONITOR	Andrew Busz Andrewb@wsha.org
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.	Pre-Proposal	Proposal		04/07/21		MONITOR	Andrew Busz Andrewb@wsha.org
3	Independent Medical Examination Specialist Availability	Department of Labor & Industries	The rule will address how to accommodate the injured worker if no approved independent medical examiner in the specialty needed is available in a reasonably convenient location as well as how telemedicine IMEs may be used.	Pre-Proposal			04/07/21		MONITOR	David Streeter DavidS@wsha.org
3	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.	Pre-Proposal	Proposal		04/28/21		NEUTRAL	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.	Pre-Proposal	Proposal		04/28/21		MONITOR	Zosia Stanley ZosiaS@wsha.org

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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.	Pre-Proposal	Proposal	Rule Page	05/14/21		SUPPORT	Andrew Busz Andrewb@wsha.org
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.	Pre-Proposal	Proposal		05/18/21		MONITOR	Andrew Busz Andrewb@wsha.org
3	L&I Outpatient Hospital Payment Policy	Department of Labor & Industries	The two rules the department of labor and industries (L&I) is considering amending are in conflict with each other because the underlying federal regulations by the Centers for Medicare and Medicaid Services changed on January 1, 2017, creating the conflict between the two listed rules. Amending and aligning the conflicting rules would eliminate any confusion regarding L&I's outpatient hospital payment policy.	Pre-Proposal					MONITOR	Andrew Busz Andrewb@wsha.org

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3	Ambulance Quality Assurance Fee	Health Care Authority	Rules are necessary to provide for a quality assurance fee for specified providers of emergency ambulance to be added to the base funding from all other sources supporting additional medicaid payments to nonpublic and nonfederal providers. Additionally, a section is being added for a dedicated fund established by the treasury as the ambulance transport fund. During the course of this review, the agency may identify additional related changes that are required in order to improve clarity or update policy.	Pre-Proposal					MONITOR	Andrew Busz Andrewb@wsha.org
3	COFA Medicaid Eligibility	Health Care Authority	The agency is amending this section to align with the Consolidated Appropriations Act, 2021 (Sec. 208) which restored eligibility for Medicaid benefits for individuals from the Republic of Palau, the Republic of the Marshall Islands, and the Federated States of Micronesia.	Pre-Proposal					NEUTRAL	Alicia Eyler AliciaE@wsha.org
3	Physician and Physician Assistant Practice Deficiencies	Washington Medical Commission	The commission is considering creating two new rule sections that will establish a clinical assistance program to resolve practice deficiencies that may not rise to the level of a license sanction or revocation through a plan of education, training, and/or supervision for allopathic physicians and physician assistants. The commission will consider amending other related rules as needed.	Pre-Proposal					MONITOR	Alicia Eyler AliciaE@wsha.org
3	Applied Behavioral Analysis Licensing	Department of Health	Since chapter 246-805 WAC became effective in 2017, the department has acquired several years of experience regulating these professions. After consultation with the applied behavioral analysis advisory committee, the department is taking the opportunity to consider updates for a variety of issues. Updates may be needed to clarify requirements as well as possible alignment with current best practices and national standards. Rules may be needed to create a temporary license as allowed by RCW 18.380.080, as well as consider establishing a corresponding temporary license fee. Fees for duplicate licenses or license verification may need to be reduced to align with similar department fees for other professions. The department may update terms, references, and citations as needed, and will consider repealing requirements for AIDS training per recently passed legislation (ESHB 1551; chapter 76, Laws of 2020).	Pre-Proposal					MONITOR	Alicia Eyler AliciaE@wsha.org

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3	Sexual Assault Kit Tracking System	Washington State Patrol	The proposed changes will provide clean up and clarification to the existing language to ensure the rules reference and comply with current laws in the state of Washington.	Pre-Proposal					SUPPORT	Alicia Eyler AliciaE@wsha.org
3	Tribal Designated Crisis Responder	Health Care Authority	Chapter 256, Laws of 2020, among other things, amended RCW 71.05.020(13) definition of "designated crisis responder" to include a mental health professional appointed by the health care authority (HCA) in consultation with a federally recognized Indian tribe or after meeting and conferring with an Indian health care provider. HCA is adopting a new rule to govern this appointment process.	Pre-Proposal					MONITOR	Alicia Eyler AliciaE@wsha.org
3	HIV/AIDS Legal Changes	Washington State Board of Health	During the 2020 legislative session, the legislature passed ESHB 1551, modernizing the control of certain communicable diseases (chapter 76, Laws of 2020). This bill modernizes the state's control of communicable disease laws by ending statutory HIV/AIDS exceptionalism, reducing HIV-related stigma, defelonizing HIV exposure, and removing barriers to HIV testing. The new law took effect June 11, 2020. The board is undertaking rule making to consider possible revisions to chapters 246-100 and 246-101 WAC to assure consistency with the bill's requirements and protect public health and safety. Revisions may include, but are not limited to, establishing reporting requirements and procedures for investigations for sexually transmitted diseases; specifying behavior that endangers the public health; defining specimens that can be obtained and tests that can be administered for sexually transmitted diseases, blood-borne pathogens, and other infections; determining categories of employment that are at risk of substantial exposure to a blood-borne pathogen; and defining what constitutes an exposure that presents a possible risk of transmission of a blood-borne pathogen.	Pre-Proposal					NEUTRAL	Alicia Eyler AliciaE@wsha.org
3	Apple Health Income Eligibility	Health Care Authority	In response to the current public health emergency surrounding the outbreak of the Coronavirus disease (COVID-19), along with the Governor of Washington's emergency proclamations related to COVID-19, HCA is creating these new rules to identify income that HCA does not count when determining Apple Health eligibility.	Pre-Proposal					MONITOR	Alicia Eyler AliciaE@wsha.org

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3	Integrating International Medical School Graduates	Washington Medical Commission	SB 6551 permits the commission to issue limited licenses to IMG. The bill also directs the commission to establish requirements for an exceptional qualification waiver in rule as well as establish requirements for a time-limited clinical experience license for IMG applicants. Establishing these requirements would reduce barriers for IMG applicants obtaining residency positions in Washington.	Pre-Proposal					MONITOR	Alicia Eyler AliciaE@wsha.org
3	Nursing scope of practice standards - WAC 246-840-300 ARNP scope of practice and WAC 246-840-700 through 246-840-710 pertaining to nursing practice standards, and other related sections in chapter 246-840 WAC	Nursing Care Quality Assurance Commission	Nursing scope of practice standards - WAC 246-840-300 ARNP scope of practice and WAC 246-840-700 through 246-840-710 pertaining to nursing practice standards, and other related sections in chapter 246-840 WAC, the nursing care quality assurance commission (commission) is considering amending sections of the scope of practice and practice standard rules to improve clarity.	Pre-Proposal					MONITOR	Alicia Eyler AliciaE@wsha.org
3	De Minimis Data Reporting	Health Care Authority	The health care authority (HCA) is adding a definition of de minimis to the section to specify a minimum reporting threshold below which a data supplier is not required to submit data. During the course of this review, HCA may identify additional related changes that are required in order to improve clarity or update policy.	Pre-Proposal					MONITOR	David Streeter DavidS@wsha.org
3	Suicide Prevention Training for Mental Health Counselors	Department of Health	ESHB 2411 requires the department to create minimum standards for new, advanced six-hour suicide prevention trainings. Part 14 of chapter 246-12 WAC contains minimum standards for the current suicide prevention trainings; amending and adopting new sections of rule in Part 14 will allow the department to permanently adopt minimum standards for the new trainings, while collocating the new section with existing rule on similar trainings.	Pre-Proposal					MONITOR	David Streeter DavidS@wsha.org

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3	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 e-filed 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.	Pre-Proposal					MONITOR	David Streeter DavidS@wsha.org
3	Inpatient Psychiatric Services	Health Care Authority	The agency is amending this section to replace outdated terms such as "residential support network (RSN)" and "mental health designee," to delete references to the department of mental health, and to update language regarding authorization and certification for inpatient psychiatric care consistent with the current managed care and administrative services organization structure. During the course of this review, the agency may identify additional related changes that are required in order to improve clarity or update policy.	Pre-Proposal					MONITOR	Jaclyn Greenberg JaclynG@wsha.org

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3	Nursing Home Admissions Rules Suspensions	Department of Social and Health Services	The department of social and health services (DSHS), aging and long-term support administration, is considering amending WAC 388-97-0120 Individual transfer and discharge rights and procedures, 388-97-0920 Participation in resident and family groups, 388-97-1000 Resident assessment, 388-97-1020 Comprehensive plan of care, 388-97-1915 PASRR requirements prior to admission of new residents, 388-97-1975 PASRR requirements after admission of a resident, and other related rules as may be required to identify the period of time portions of these rules were suspended or waived during the declared emergency of COVID-19 per Proclamation by the Governor 20-05 and extensions thereto.	Pre-Proposal					MONITOR	Zosia Stanley ZosiaS@wsha.org
4	PFML Rule Clarity	Employment Security Department	The paid family and medical leave (PFML) program (Title 50A RCW) requires updating existing rules and promulgating new rules to ensure clarity and make necessary changes based on programmatic needs. This preproposal statement of inquiry includes, but is not limited to, adding definitions of "illegal acts" and "successor," updating the definition of "health care provider," clarifying references to "hours worked," for the purposes of job protection and program consistency, clarification regarding small business grants, and adding information regarding closed hearings and appeal withdrawals.	Pre-Proposal	Proposal		02/16/21		MONITOR	David Streeter DavidS@wsha.org
4	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.	N/A	Proposal		04/05/21		SUPPORT	David Streeter DavidS@wsha.org

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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.	Pre-Proposal	Proposal		04/28/21		MONITOR	Zosia Stanley ZosiaS@wsha.org
4	TANF/SFA Time Limit Extensions	Department of Social and Health Services	Amendments are planned to address impacts of legislative changes and emergency conditions on TANF/SFA time limit extension policy.	Pre-Proposal					MONITOR	Alicia Eyler AliciaE@wsha.org
4	Midwife Licensure	Department of Health	The department is considering revisions to several sections of the midwifery chapter in order to modernize and reduce barriers in the rules.	Pre-Proposal					MONITOR	Alicia Eyler AliciaE@wsha.org
4	WAC 246-915-085 Continuing competency, physical therapists and physical therapist assistants.	Department of Health	The Board of Physical Therapy is considering general updates, revisions, and housekeeping amendments.	Pre-Proposal					MONITOR	Alicia Eyler AliciaE@wsha.org
4	Workers' Comp Reporting and Recordkeeping	Department of Labor & Industries	2022 Classification and reporting rule making: Classification development's goal is to implement clear rule writing to ensure staff and customers can easily understand and apply the workers' compensation insurance classification and reporting rules. Classification development studied some subclassifications for potential reduction in numbers; and reviewed classification and reporting rules for improvement and clarification. The purpose of this rule making is not to make substantive changes to how employers are classified and amendments will not impact employer rates. As part of this rule making, the department of labor and industries (L&I) also intends to review these chapters for need, clarity, and consistency to make changes where possible to reduce the regulatory burden on employers insured with the State Fund.	Pre-Proposal					SUPPORT	David Streeter DavidS@wsha.org