CERTIFICATION OF ENROLLMENT

**SUBSTITUTE HOUSE BILL 1625**

64th Legislature

2015 Regular Session

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| Passed by the House April 16, 2015Yeas 96 Nays 0**Speaker of the House of Representatives**Passed by the Senate April 8, 2015Yeas 47 Nays 0**President of the Senate** | CERTIFICATEI, Barbara Baker, Chief Clerk of the House of Representatives of the State of Washington, do hereby certify that the attached is **SUBSTITUTE HOUSE BILL 1625** as passed by House of Representatives and the Senate on the dates hereon set forth.**Chief Clerk** |
| Approved  |  |
| **Governor of the State of Washington** | **Secretary of State** **State of Washington** |

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**SUBSTITUTE HOUSE BILL 1625**

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AS AMENDED BY THE SENATE

Passed Legislature - 2015 Regular Session

**State of Washington 64th Legislature 2015 Regular Session**

**By** House Health Care & Wellness (originally sponsored by Representatives Schmick and Wylie)

AN ACT Relating to the provision of drugs to ambulance and aid services; adding a new section to chapter 18.64 RCW; adding a new section to chapter 70.168 RCW; and providing an expiration date.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

NEW SECTION. **Sec.**  A new section is added to chapter 18.64 RCW to read as follows:

A pharmacy that is licensed under this chapter and operated by a hospital that is licensed under chapter 70.41 RCW may provide drugs to ambulance or aid services that are licensed under RCW 18.73.130 for use associated with providing emergency medical services to patients if the following conditions are met:

(1) The hospital is located in the same or an adjacent county to the county in which the ambulance or aid service operates;

(2) A medical program director of an ambulance or aid service has requested drugs from the hospital per agreed protocol. A medical program director may only request drugs that:

(a) Are relevant to the level of service provided by the ambulance or aid service and the training of its emergency medical personnel; and

(b) Are approved as part of the ambulance or aid service prehospital patient care protocols for use by emergency medical personnel in the county in which the ambulance or aid service is located; and

(3) The provision of the drugs by the pharmacy is not contingent upon arrangements for the transport of patients to the hospital that operates the pharmacy for reasons other than the consideration of patients' medical needs and any patient care procedures.

NEW SECTION. **Sec.**  A new section is added to chapter 70.168 RCW to read as follows:

(1) The emergency medical services and trauma care steering committee established in RCW 70.168.020 shall consider the use of the following medications by emergency medical technicians certified under chapter 18.73 RCW:

(a) Hydrocortisone sodium succinate or similar medications for the treatment of adrenal insufficiency; and

(b) Glucagon emergency kits.

(2) The review shall consider:

(a) The adequacy of current training for emergency medical technicians to administer the medications in subsection (1) of this section;

(b) The feasibility of supplementing the training of emergency medical technicians on either a statewide basis or a local basis to administer the medications in subsection (1) of this section;

(c) The costs and the likely utilization of stocking ambulances with the medications in subsection (1) of this section; and

(d) Options for localized solutions to specific community needs for the medications in subsection (1) of this section where only basic life support services are available, including needs that may arise in a school setting.

(3) The steering committee may appoint a work group to develop a draft report to present to the full steering committee, prior to the full steering committee adopting its report.

(4) By December 15, 2015, the steering committee shall report to the governor and the appropriate committees of the legislature. The report shall summarize the review of the topics in subsection (2) of this section and any policy recommendations related to the review. The report shall include any available data related to the frequency of incidents requiring the administration of medications in subsection (1) of this section.

(5) This section expires June 30, 2016.

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