

1 1960-S AMH .... H2613.1

2 **SHB 1960 - H AMD 276 Adopted 3-19-91**  
3 By Representatives Braddock and Moyer

4  
5 Strike everything after the enacting clause and insert the  
6 following:

7 "PART 1  
8 TEMPORARY PRACTICE PERMITS  
9 CONTINUED HEALTH PROFESSIONAL COMPETENCY DEMONSTRATION PROJECTS"

10 "Sec. 1. RCW 18.130.010 and 1986 c 259 s 1 are each amended to  
11 read as follows:

12 It is the intent of the legislature to strengthen and consolidate  
13 disciplinary and licensure procedures for the licensed health and  
14 health-related professions and businesses by providing a uniform  
15 disciplinary act with standardized procedures for the licensure of  
16 health care professionals and the enforcement of laws the purpose of  
17 which is to assure the public of the adequacy of professional  
18 competence and conduct in the healing arts.

19 It is also the intent of the legislature that all health and  
20 health-related professions newly credentialed by the state come under  
21 the uniform disciplinary act.

22 Further, the legislature declares that the addition of public  
23 members on all health care boards can give both the state and the  
24 public, which it has a statutory responsibility to protect, assurances  
25 of accountability and confidence in the various practices of health  
26 care."



1 designing and implementing activities to address shortages. The  
2 legislature declares that the establishment of higher educational  
3 programming and other activities necessary to address health  
4 professional shortages should be a state policy concern and that a  
5 means to accomplish this in a manner so as not to impair the high  
6 quality of current higher education programming and activities should  
7 be established. The legislature further declares that the development  
8 of state policy on professional shortages should involve close  
9 coordination and consultation between state government, institutions of  
10 higher education that conduct health care research and train health  
11 care professionals, health care service providers, consumers, and  
12 others. The legislature further declares that the health care needs of  
13 the people of this state should be a primary factor determining state  
14 policymaking designed to address health professional shortages."

15       "NEW SECTION.   **Sec. 4.**   STATE-WIDE HEALTH PERSONNEL RESOURCE PLAN.  
16 (1) The higher education coordinating board, the state board for  
17 community college education, the superintendent of public instruction,  
18 the state department of health, and the state department of social and  
19 health services, to be known for the purposes of this section as the  
20 committee, shall, in consultation with the higher education  
21 institutions and appropriate entities, establish a state-wide health  
22 personnel resource plan. The governor shall appoint a lead agency from  
23 one of the agencies on the committee. When establishing and  
24 implementing the state-wide health personnel resource plan the  
25 committee shall, to the extent possible, utilize existing data and  
26 information, personnel, equipment, and office space and shall minimize  
27 travel and take such other steps necessary to reduce the administrative  
28 costs associated with the preparation and implementation of the plan.

1           (2) The committee shall include in the state-wide health resource  
2 plan the following:

3           (a) Identification of the type, number, and location of the health  
4 care professional work force necessary to meet health care needs of the  
5 state. A description and analysis of the composition and numbers of  
6 the potential work force available for meeting health care service  
7 needs of the population to be used for recruitment purposes. This  
8 should include a description of the data, methodology, and process used  
9 to make such determinations.

10          (b) A centralized inventory of the numbers of student applications  
11 to higher education and vocational technical training and education  
12 programs, yearly enrollments, yearly degrees awarded, and numbers on  
13 waiting lists for all the state's publicly funded health care training  
14 and education programs. The committee shall request similar  
15 information for incorporation into the inventory from private higher  
16 education and vocational technical training and education programs.

17          (c) A description of state-wide and local specialized provider  
18 training needs to meet the health care needs of target populations and  
19 a plan to meet such needs in a cost-effective and accessible manner.

20          (d) A description of the need for multiskilled health care  
21 professionals and an implementation plan to restructure educational and  
22 training programming to meet these needs.

23          (e) An analysis of the types and estimated numbers of health care  
24 personnel that will need to be recruited from out-of-state to meet the  
25 health professional needs not met by in-state trained personnel.

26          (f) An analysis of the need for educational articulation within the  
27 various health care disciplines and a plan for addressing the need.

28          (g) An analysis of the training needs of those members of the long-  
29 term care profession that are not regulated and that have no formal  
30 training requirements.

1 (h) A designation of the professions and geographic locations in  
2 which loan repayment and scholarships should be available based upon  
3 objective data-based forecasts of health professional shortages. A  
4 description of the criteria used to select professions and geographic  
5 locations shall be included. Designations of professions and  
6 geographic locations may be amended by the department of health when  
7 circumstances warrant as provided for in section 11 of this act.

8 (i) A description of needed changes in regulatory laws governing  
9 the credentialing of health professionals.

10 (j) A description of linguistic and cultural training needs of  
11 foreign-trained health care professions to assure safe and effective  
12 practice of their health care profession.

13 (k) A plan to implement the recommendations of the state-wide  
14 nursing plan authorized by RCW 74.39.040.

15 (l) A description of how the higher education coordinating board,  
16 state board of community college education, superintendent of public  
17 instruction, department of health and department of social and health  
18 services coordinated in the creation and implementation of the state  
19 plan including the areas of responsibility each agency shall assume.

20 (m) A description of the estimated fiscal requirements for  
21 implementation of the state-wide health resource plan.

22 (3) The committee may call upon other agencies of the state to  
23 provide available information to assist the committee in meeting the  
24 responsibilities under this chapter. This information shall be  
25 supplied as promptly as circumstances permit and to the extent that  
26 funds are available.

27 (4) State agencies involved in the development of the plan shall to  
28 the extent possible utilize existing personnel and financial resources  
29 in the development and implementation of the state-wide health  
30 personnel resource plan.

1 (5) The state-wide health resource plan shall be submitted to the  
2 governor by July 1, 1992, and updated by July 1 of each even-numbered  
3 year. The governor, no later than December 1 of that year, shall  
4 approve, approve with modifications, or disapprove the state-wide  
5 health resource plan.

6 (6) The approved state-wide health resource plan shall be submitted  
7 to the legislature by December 1 each even-numbered year.

8 (7) Implementation of the state-wide plan as it pertains to the  
9 office of the superintendent of public instruction, the state board for  
10 community college education, the department of social and health  
11 services, and the department of health shall begin by July 1, 1993.

12 (8) Notwithstanding subsections (5) and (7) of this section, the  
13 committee shall prepare and submit to the higher education coordinating  
14 board by June 1, 1992, the analysis necessary for the initial  
15 implementation of the health professional loan repayment and  
16 scholarship program created in chapter 28B... RCW (as codified pursuant  
17 to section 26 of this act).

18 (9) The higher education coordinating board shall, in consultation  
19 with the higher education institutions and other appropriate entities,  
20 develop the higher education portion of the health personnel resource  
21 shortage plan. The plan shall address the following:

22 (a) A description of how education technology, including  
23 telecommunications, can be used to provide higher education health  
24 professions training programs.

25 (b) A description of how higher education programs are sensitive to  
26 the changing work force.

27 (c) A strategy for increasing graduates in the health professions,  
28 including such strategies for those declaring an intent to serve in  
29 health professional shortage areas after graduation.

1 (d) A description of policies for permitting academic credit for  
2 academically supervised internships.

3 (e) A description of a plan for making internships and residency  
4 programs geographically accessible to the extent practicable.

5 (f) An analysis of articulation within health care disciplines.

6 (g) Funding requirements to implement the plans. Plans shall be  
7 incorporated into the biennial budget submissions of each four-year  
8 higher education institution.

9 (10) Each publicly funded four-year institution of higher education  
10 authorized under Title 28B RCW that offers health training and  
11 education programs shall biennially prepare and submit an institutional  
12 plan to the higher education coordinating board as part of the  
13 institution's biennial budget submission. The institutional plan shall  
14 identify programming and activities of the institution that address the  
15 higher education portion of the state-wide health professional resource  
16 plan listed in subsection (9) of this section. The higher education  
17 coordinating board shall assess whether it meets the criteria and  
18 standards developed in the state-wide plan. The institutional plans  
19 shall become part of the state-wide resource plan and shall be  
20 implemented as additional resources are appropriated."

21 "PART 3

22 HEALTH PROFESSIONAL CREDENTIALING SUNRISE MODIFICATIONS"

23 "**Sec. 5.** RCW 18.120.030 and 1983 c 168 s 3 are each amended to  
24 read as follows:

25 After July 24, 1983, if appropriate, applicant groups shall explain  
26 each of the following factors to the extent requested by the  
27 legislative committees of reference:

28 (1) A definition of the problem and why regulation is necessary:

1 (a) The nature of the potential harm to the public if the health  
2 profession is not regulated, and the extent to which there is a threat  
3 to public health and safety;

4 (b) The extent to which consumers need and will benefit from a  
5 method of regulation identifying competent practitioners, indicating  
6 typical employers, if any, of practitioners in the health profession;  
7 and

8 (c) The extent of autonomy a practitioner has, as indicated by:

9 (i) The extent to which the health profession calls for independent  
10 judgment and the extent of skill or experience required in making the  
11 independent judgment; and

12 (ii) The extent to which practitioners are supervised;

13 (2) The efforts made to address the problem:

14 (a) Voluntary efforts, if any, by members of the health profession  
15 to:

16 (i) Establish a code of ethics; or

17 (ii) Help resolve disputes between health practitioners and  
18 consumers; and

19 (b) Recourse to and the extent of use of applicable law and whether  
20 it could be strengthened to control the problem;

21 (3) The alternatives considered:

22 (a) Regulation of business employers or practitioners rather than  
23 employee practitioners;

24 (b) Regulation of the program or service rather than the individual  
25 practitioners;

26 (c) Registration of all practitioners;

27 (d) Certification of all practitioners;

28 (e) Other alternatives;

29 (f) Why the use of the alternatives specified in this subsection  
30 would not be adequate to protect the public interest; and



1 (g) Why licensing would serve to protect the public interest;

2 (4) The benefit to the public if regulation is granted:

3 (a) The extent to which the incidence of specific problems present  
4 in the unregulated health profession can reasonably be expected to be  
5 reduced by regulation;

6 (b) Whether the public can identify qualified practitioners;

7 (c) The extent to which the public can be confident that qualified  
8 practitioners are competent:

9 (i) Whether the proposed regulatory entity would be a board  
10 composed of members of the profession and public members, or a state  
11 agency, or both, and, if appropriate, their respective responsibilities  
12 in administering the system of registration, certification, or  
13 licensure, including the composition of the board and the number of  
14 public members, if any; the powers and duties of the board or state  
15 agency regarding examinations and for cause revocation, suspension, and  
16 nonrenewal of registrations, certificates, or licenses; the  
17 promulgation of rules and canons of ethics; the conduct of inspections;  
18 the receipt of complaints and disciplinary action taken against  
19 practitioners; and how fees would be levied and collected to cover the  
20 expenses of administering and operating the regulatory system;

21 (ii) If there is a grandfather clause, whether such practitioners  
22 will be required to meet the prerequisite qualifications established by  
23 the regulatory entity at a later date;

24 (iii) The nature of the standards proposed for registration,  
25 certification, or licensure as compared with the standards of other  
26 jurisdictions;

27 (iv) Whether the regulatory entity would be authorized to enter  
28 into reciprocity agreements with other jurisdictions; ((and))

29 (v) The nature and duration of any training including, but not  
30 limited to, whether the training includes a substantial amount of

1 supervised field experience; whether training programs exist in this  
2 state; if there will be an experience requirement; whether the  
3 experience must be acquired under a registered, certificated, or  
4 licensed practitioner; whether there are alternative routes of entry or  
5 methods of meeting the prerequisite qualifications; whether all  
6 applicants will be required to pass an examination; and, if an  
7 examination is required, by whom it will be developed and how the costs  
8 of development will be met; and

9 (vi) What additional training programs are anticipated to be  
10 necessary to assure training accessible state-wide; the anticipated  
11 time required to establish the additional training programs; the types  
12 of institutions capable of providing the training; a description of how  
13 training programs will meet the needs of the expected work force,  
14 including reentry workers, minorities, placebound students, and others;

15 (d) Assurance of the public that practitioners have maintained  
16 their competence:

17 (i) Whether the registration, certification, or licensure will  
18 carry an expiration date; and

19 (ii) Whether renewal will be based only upon payment of a fee, or  
20 whether renewal will involve reexamination, peer review, or other  
21 enforcement;

22 (5) The extent to which regulation might harm the public:

23 (a) The extent to which regulation will restrict entry into the  
24 health profession:

25 (i) Whether the proposed standards are more restrictive than  
26 necessary to insure safe and effective performance; and

27 (ii) Whether the proposed legislation requires registered,  
28 certificated, or licensed practitioners in other jurisdictions who  
29 migrate to this state to qualify in the same manner as state applicants  
30 for registration, certification, and licensure when the other

1 jurisdiction has substantially equivalent requirements for  
2 registration, certification, or licensure as those in this state; and

3 (b) Whether there are similar professions to that of the applicant  
4 group which should be included in, or portions of the applicant group  
5 which should be excluded from, the proposed legislation;

6 (6) The maintenance of standards:

7 (a) Whether effective quality assurance standards exist in the  
8 health profession, such as legal requirements associated with specific  
9 programs that define or enforce standards, or a code of ethics; and

10 (b) How the proposed legislation will assure quality:

11 (i) The extent to which a code of ethics, if any, will be adopted;  
12 and

13 (ii) The grounds for suspension or revocation of registration,  
14 certification, or licensure;

15 (7) A description of the group proposed for regulation, including  
16 a list of associations, organizations, and other groups representing  
17 the practitioners in this state, an estimate of the number of  
18 practitioners in each group, and whether the groups represent different  
19 levels of practice; and

20 (8) The expected costs of regulation:

21 (a) The impact registration, certification, or licensure will have  
22 on the costs of the services to the public; ((and))

23 (b) The cost to the state and to the general public of implementing  
24 the proposed legislation; and

25 (c) The cost to the state and the members of the group proposed for  
26 regulation for the required education, including projected tuition and  
27 expenses and expected increases in training programs, staffing, and  
28 enrollments at state training institutions."

1 "PART 4

2 HEALTH PROFESSIONAL LOAN REPAYMENT AND SCHOLARSHIP PROGRAM"

3 "Sec. 6. RCW 18.150.020 and 1989 1st ex.s. c 9 s 717 are each  
4 amended to read as follows:

5 Unless the context clearly requires otherwise, the definitions in  
6 this section apply throughout this chapter.

7 (1) "Board" means the higher education coordinating board.

8 (2) "Department" means the state department of health.

9 (3) "Eligible education and training programs" means education and  
10 training programs approved by the department that lead to eligibility  
11 for a credential as a credentialed health care professional.

12 (4) "Eligible expenses" means reasonable expenses associated with  
13 the costs of acquiring an education such as tuition, books, equipment,  
14 fees, room and board, and other expenses determined by the board.

15 (5) "Eligible student" means a student who has been accepted into  
16 an eligible education or training program and has a declared intention  
17 to serve in a health professional shortage area upon completion of the  
18 education or training program.

19 (6) "Forgiven" or "to forgive" or "forgiveness" means to render  
20 health care services in a health professional shortage area in the  
21 state of Washington in lieu of monetary repayment.

22 (7) "Health professional shortage areas" means those geographic  
23 areas where credentialed health care professionals are in short supply  
24 as a result of geographic maldistribution or as the result of a short  
25 supply of credentialed health care professionals in specialty health  
26 care areas and where vacancies exist in serious numbers that jeopardize  
27 patient care and pose a threat to the public health and safety. The  
28 department shall determine health professional shortage areas as  
29 provided for in section 11 of this act, or until June 1, 1992, as

1 provided for in section 10 of this act. In making health professional  
2 shortage area designations in the state the department may be guided by  
3 applicable federal standards for "health manpower shortage areas," and  
4 "medically underserved areas," and "medically underserved populations."

5 (8) "Credentialed health care profession" means a health care  
6 profession regulated by a disciplining authority in the state of  
7 Washington under RCW 18.130.040 or by the state board of pharmacy under  
8 chapter 18.64 RCW and designated by the department in section 11 of  
9 this act, or until June 1, 1992, as established in section 10 of this  
10 act as a profession having shortages of credentialed health care  
11 professionals in the state.

12 (9) "Credentialed health care professional" means a person  
13 regulated by a disciplining authority in the state of Washington to  
14 practice a health care profession under RCW 18.130.040 or by the state  
15 board of pharmacy under chapter 18.64 RCW.

16 (10) "Loan repayment" means a loan that is paid in full or in part  
17 if the participant renders health care services in a health  
18 professional shortage area ((or medically under served areas)) as  
19 defined by the department ((of health)).

20 ((+2)) (11) "Nonshortage rural area" means a nonurban area of the  
21 state of Washington that has not been designated as a rural physician  
22 shortage area. The department shall identify the nonshortage rural  
23 areas of the state.

24 (12) "Participant" means a ((licensed)) credentialed health care  
25 professional who has received a loan repayment award and has commenced  
26 practice as a ((primary)) credentialed health care provider in a  
27 designated health professional shortage area or an eligible student who  
28 has received a scholarship under this program.

29 ((-3)) "Board" means the higher education coordinating board.

1       ~~(4) "Health professional shortage areas" means those geographic~~  
2 ~~areas where health professionals are in short supply as a result of~~  
3 ~~geographic maldistribution and where vacancies exist in serious numbers~~  
4 ~~that jeopardize patient care and pose a threat to the public health and~~  
5 ~~safety. The department of health shall determine health professional~~  
6 ~~shortage areas in the state guided by federal standards of "health~~  
7 ~~manpower shortage areas," and "medically underserved areas," and~~  
8 ~~"medically underserved populations."~~

9       ~~(5))~~ (13) "Program" means the health professional loan repayment  
10 and scholarship program.

11       (14) "Required service obligation" means an obligation by the  
12 participant to provide health care services in a health professional  
13 shortage area for a period to be established as provided for in this  
14 chapter.

15       (15) "Rural physician shortage area" means rural geographic areas  
16 where primary care physicians are in short supply as a result of  
17 geographic maldistributions and where their limited numbers jeopardize  
18 patient care and pose a threat to public health and safety. The  
19 department shall designate rural physician shortage areas.

20       (16) "Satisfied" means paid-in-full.

21       ~~((6) "Licensed health professional" means a person authorized in~~  
22 ~~the state of Washington to practice medicine pursuant to chapter 18.57~~  
23 ~~or 18.57A RCW or 18.71 or 18.71A RCW, to practice nursing pursuant to~~  
24 ~~chapter 18.88 or 18.78 RCW, or to practice dentistry pursuant to~~  
25 ~~chapter 18.32 RCW.))~~ (17) "Scholarship" means a loan that is forgiven  
26 in whole or in part if the recipient renders health care services in a  
27 health professional shortage area.

28       (18) "Sponsoring community" means a rural hospital or hospitals as  
29 authorized in chapter 70.41 RCW, a rural health care facility or

1 facilities as authorized in chapter 70.175 RCW, or a city or county  
2 government or governments."

3 "Sec. 7. RCW 18.150.030 and 1989 1st ex.s. c 9 s 718 are each  
4 amended to read as follows:

5 The health professional loan repayment and scholarship program is  
6 established for (~~(licensed)~~) credentialed health professionals serving  
7 in health professional shortage areas. The program shall be  
8 administered by the higher education coordinating board. In  
9 administering this program, the board shall (~~have the following~~  
10 ~~duties~~):

11 (1) (~~It shall~~) Select (licensed) credentialed health care  
12 professionals to participate in the loan repayment portion of the loan  
13 repayment and scholarship program and select eligible students to  
14 participate in the scholarship portion of the loan repayment and  
15 scholarship program;

16 (2) (~~It shall~~) Adopt rules and develop guidelines to administer  
17 the program;

18 (3) (~~It shall~~) Collect and manage repayments from participants  
19 who do not meet their service obligations under this chapter;

20 (4) Publicize the program, particularly to maximize participation  
21 among individuals in shortage areas and among populations expected to  
22 experience the greatest growth in the work force; (and

23 ~~(4) It shall~~) (5) Solicit and accept grants and donations from  
24 public and private sources for the program; and

25 (6) Develop criteria for a contract for service in lieu of the  
26 service obligation where appropriate, that may be a combination of  
27 service and payment."

1        "NEW SECTION. Sec. 8.        The department may provide technical  
2 assistance to rural communities desiring to become sponsoring  
3 communities for the purposes of identification of prospective students  
4 for the program, assisting prospective students to apply to an eligible  
5 education and training program, making formal agreements with  
6 prospective students to provide credentialed health care services in  
7 the community, forming agreements between rural communities in a  
8 service area to share credentialed health care professionals, and  
9 fulfilling any matching requirements."

10        "Sec. 9.    RCW 18.150.040 and 1989 1st ex.s. c 9 s 719 are each  
11 amended to read as follows:

12        The board shall establish a planning committee to assist it in  
13 developing criteria for the selection of participants.    The board  
14 shall(~~(, at a minimum,)~~) include on the planning committee(~~(:~~  
15 ~~Representatives from rural hospitals; public health districts or~~  
16 ~~departments; community and migrant clinics; and private providers)~~)  
17 representatives of the department, the department of social and health  
18 services, appropriate representatives from health care facilities,  
19 provider groups, consumers, the state board of community college  
20 education, the superintendent of public instruction, and other  
21 appropriate public and private agencies and organizations.    The  
22 criteria may require that some of the participants meet the definition  
23 of "needy student" under RCW 28B.10.802."

24        "NEW SECTION. Sec. 10.    ELIGIBLE CREDENTIALLED HEALTH PROFESSIONS  
25 AND REQUIRED SERVICE OBLIGATIONS.    Until June 1, 1992, the board, in  
26 consultation with the department, shall:

27        (1) Establish loan repayments for persons authorized to practice  
28 one of the following credentialed health care professions:    Medicine



1 pursuant to chapter 18.57, 18.57A, 18.71 or 18.71A RCW, nursing  
2 pursuant to chapter 18.78 or 18.88 RCW, or dentistry pursuant to  
3 chapter 18.32 RCW. The amount of the loan repayment shall not exceed  
4 fifteen thousand dollars per year for a maximum of five years per  
5 individual. The required service obligation in a health professional  
6 shortage area for loan repayment shall be three years;

7 (2) Establish a scholarship program for eligible students who have  
8 been accepted into an eligible education or training program leading to  
9 a credential in one of the following credentialed health care  
10 professions: Nursing pursuant to chapter 18.78 or 18.88 RCW who  
11 declare the intent to serve in a nurse shortage area as defined by the  
12 department upon completion of an education or training program and  
13 agree to a five-year service obligation. The amount of the scholarship  
14 shall not exceed three thousand dollars per year for a maximum of five  
15 years;

16 (3) Establish a scholarship program for eligible students who have  
17 been accepted into an eligible education or training program leading to  
18 a credential in one of the following credentialed health care  
19 professions: Medicine pursuant to chapter 18.57 or 18.71 RCW who  
20 declare an intent to serve as a primary care physician in a rural area  
21 in the state of Washington upon completion of the education program and  
22 agree to a five-year service obligation and who may receive a  
23 scholarship of no more than fifteen thousand dollars per year for five  
24 years.

25 In determining scholarship awards for prospective physicians, the  
26 selection criteria shall include requirements that recipients declare  
27 an interest in serving in rural areas of the state of Washington.  
28 Preference for scholarships shall be given to students who reside in a  
29 rural physician shortage area or a nonshortage rural area of the state  
30 prior to admission to the eligible education and training program in

1 medicine. Highest preference shall be given to students seeking  
2 admission who are recommended by sponsoring communities and who declare  
3 the intent of serving as a physician in a rural area. The board may  
4 require the sponsoring community located in a nonshortage rural area to  
5 financially contribute to the eligible expenses of a medical student if  
6 the student will serve in the nonshortage rural area;

7 (4) Establish a scholarship program for eligible students who have  
8 been accepted into an eligible education or training program leading to  
9 a credential in one of the following credentialed health care  
10 professions: Midwifery pursuant to chapter 18.50 RCW or advanced  
11 registered nurse practitioner certified nurse midwifery under chapter  
12 18.88 RCW who declare an intent to serve as a midwife in a midwifery  
13 shortage area in the state of Washington, as defined by the department,  
14 upon completion of the education program and agree to a five-year  
15 service obligation and who may receive a scholarship of no more than  
16 four thousand dollars per year for three years;

17 (5) Establish a scholarship program for eligible students who have  
18 been accepted into an eligible education or training program leading to  
19 a credential in the following credentialed health care profession:  
20 Pharmacy pursuant to chapter 18.64 RCW who declare an intent to serve  
21 as a pharmacist in a pharmacy shortage area in the state of Washington,  
22 as defined by the department, upon completion of the education program  
23 and agree to a five-year service obligation and who may receive a  
24 scholarship of no more than four thousand dollars per year for three  
25 years;

26 (6) Honor loan repayment and scholarship contract terms negotiated  
27 between the board and participants prior to the effective date of this  
28 act concerning loan repayment and scholarship award amounts and service  
29 obligations authorized under chapter 18.150, 28B.104, or 70.180 RCW."

1           "NEW SECTION.   **Sec. 11.**   ELIGIBLE CREDENTIALLED HEALTH PROFESSIONS.

2    After June 1, 1992, the department, in consultation with the board and  
3    the department of social and health services, shall:

4           (1) Determine eligible credentialed health care professions for the  
5    purposes of the loan repayment and scholarship program authorized by  
6    this chapter.    Eligibility shall be based upon an assessment that  
7    determines that there is a shortage or insufficient availability of a  
8    credentialed profession so as to jeopardize patient care and pose a  
9    threat to the public health and safety.    The department shall consider  
10   the relative degree of shortages among professions when determining  
11   eligibility.    This determination shall be based upon health  
12   professional shortage needs identified in the health personnel resource  
13   plan authorized by section 4 of this act.    The department may add or  
14   remove professions from eligibility based upon the determination that  
15   a profession is no longer in shortage as determined by the health  
16   personnel resource plan.    Should a profession no longer be eligible,  
17   participants or eligible students who have received scholarships shall  
18   be eligible to continue to receive scholarships or loan repayments  
19   until they are no longer eligible or until their service obligation has  
20   been completed;

21           (2) Determine health professional shortage areas for each of the  
22   eligible credentialed health care professions."

23           "NEW SECTION.   **Sec. 12.**   REQUIRED SERVICE OBLIGATIONS.   After June

24   1, 1992, the board, in consultation with the department and the  
25   department of social and health services, shall:

26           (1) Establish the annual award amount for each credentialed health  
27   care profession which shall be based upon an assessment of reasonable  
28   annual eligible expenses involved in training and education for each  
29   credentialed health care profession.    The annual award amount may be

1 established at a level less than annual eligible expenses. The annual  
2 award amount shall not be less than three thousand dollars per year nor  
3 more than fifteen thousand dollars per year. The awards shall not be  
4 paid for more than a maximum of five years per individual;

5 (2) Determine any scholarship awards for prospective physicians in  
6 such a manner to require the recipients declare an interest in serving  
7 in rural areas of the state of Washington. Preference for scholarships  
8 shall be given to students who reside in a rural physician shortage  
9 area or a nonshortage rural area of the state prior to admission to the  
10 eligible education and training program in medicine. Highest  
11 preference shall be given to students seeking admission who are  
12 recommended by sponsoring communities and who declare the intent of  
13 serving as a physician in a rural area. The board may require the  
14 sponsoring community located in a nonshortage rural area to financially  
15 contribute to the eligible expenses of a medical student if the student  
16 will serve in the nonshortage rural area;

17 (3) Establish the required service obligation for each credentialed  
18 health care profession, which shall be no less than three years or no  
19 more than five years. The required service obligation may be based  
20 upon the amount of the scholarship or loan repayment award such that  
21 higher awards involve longer service obligations on behalf of the  
22 participant;

23 (4) Determine eligible education and training programs for purposes  
24 of the scholarship portion of the program;

25 (5) Honor loan repayment and scholarship contract terms negotiated  
26 between the board and participants prior to the effective date of this  
27 section concerning loan repayment and scholarship award amounts and  
28 service obligations authorized under chapter 18.150, 28B.104, or 70.180  
29 RCW."

1       **"Sec. 13.** RCW 18.150.050 and 1989 1st ex.s. c 9 s 720 are each  
2 amended to read as follows:

3       (1) The board may grant loan repayment and scholarship awards to  
4 eligible participants from the funds appropriated for this purpose, or  
5 from any private or public funds given to the board for this purpose.  
6 ~~((The amount of the loan repayment shall not exceed fifteen thousand~~  
7 ~~dollars per year for a maximum of five years. The board may establish~~  
8 ~~awards of less than fifteen thousand dollars per year based upon~~  
9 ~~reasonable levels of expenditures for each of the health professions~~  
10 ~~covered by this chapter.)) Participants ((in the conditional~~  
11 ~~scholarship program authorized by chapter 28B.104 RCW are ineligible to~~  
12 ~~receive assistance from the program authorized by this chapter)) are~~  
13 ineligible to receive loan repayment if they have received a  
14 scholarship from programs authorized under this chapter or chapter  
15 28B.104 or 70.180 RCW or are ineligible to receive a scholarship if  
16 they have received loan repayment authorized under this chapter or  
17 chapter 18.150 RCW.

18       (2) Funds appropriated for the program, including reasonable  
19 administrative costs, may be used by the board for the purposes of loan  
20 repayments or scholarships. The board shall annually establish the  
21 total amount of funding to be awarded for loan repayments and  
22 scholarships and such allocations shall be established based upon the  
23 best utilization of funding for that year and based upon the health  
24 personnel resource plan authorized in section 4 of this act.

25       (3) One portion of the funding shall be used by the board as a  
26 recruitment incentive for recruitment activities in state-operated  
27 institutions, county public health departments and districts, county  
28 human service agencies, federal and state contracted community health  
29 clinics, and other health care facilities, such as rural hospitals that  
30 have been identified by the department, as providing substantial

1 amounts of charity care or publicly subsidized health care; one portion  
2 of the funding shall be used by the board for all other awards. The  
3 board shall determine the amount of total funding to be distributed  
4 between the two portions."

5 "NEW SECTION. Sec. 14. PARTICIPANT REQUIREMENT TO ACCEPT PAYMENT.

6 In providing health care services the participant shall not  
7 discriminate against a person on the basis of the person's ability to  
8 pay for such services or because payment for the health care services  
9 provided to such persons will be made under the insurance program  
10 established under part A or B of Title XVIII of the federal social  
11 security act or under a state plan for medical assistance including  
12 Title XIX of the federal social security act or under the state medical  
13 assistance program authorized by chapter 74.09 RCW and agrees to accept  
14 assignment under section 18.42(b)(3)(B)(ii) of the federal social  
15 security act for all services for which payment may be made under part  
16 B of Title XVIII of the federal social security act and enters into an  
17 appropriate agreement with the department of social and health services  
18 for medical assistance under Title XIX of the federal social security  
19 act to provide services to individuals entitled to medical assistance  
20 under the plan and enters into appropriate agreements with the  
21 department of social and health services for medical care services  
22 under chapter 74.09 RCW. Participants found by the board or the  
23 department in violation of this section shall be declared ineligible  
24 for receiving assistance under the program authorized by this chapter."

25 "Sec. 15. RCW 18.150.060 and 1989 1st ex.s. c 9 s 721 are each  
26 amended to read as follows:

27 Participants in the health professional loan repayment and  
28 scholarship program who are awarded loan repayments shall receive

1 payment from the program for the purpose of repaying educational loans  
2 secured while attending a program of health professional training which  
3 led to (~~licensure as a licensed~~) a credential as a credentialed  
4 health professional in the state of Washington.

5 (1) Participants shall agree to (~~serve at least three years~~) meet  
6 the required service obligation in a designated health professional  
7 shortage area.

8 (2) (~~In providing health care services the participant shall not~~  
9 ~~discriminate against any person on the basis of the person's ability to~~  
10 ~~pay for such services or because payment for the health care services~~  
11 ~~provided to such persons will be made under the insurance program~~  
12 ~~established under part A or B of Title XVIII of the federal social~~  
13 ~~security act or under a state plan for medical assistance approved~~  
14 ~~under Title XIX of the federal social security act and agrees to accept~~  
15 ~~assignment under section 18.42(b)(3)(B)(ii) of such act for all~~  
16 ~~services for which payment may be made under part B of Title XVIII and~~  
17 ~~enters into an appropriate agreement with the department of social and~~  
18 ~~health services for medical assistance under Title XIX to provide~~  
19 ~~services to individuals entitled to medical assistance under the plan.~~  
20 ~~Participants found by the board in violation of this section shall be~~  
21 ~~declared ineligible for receiving assistance under the program~~  
22 ~~authorized by this chapter.~~

23 (~~3~~) Repayment shall be limited to (~~reasonable~~) eligible  
24 educational and living expenses as determined by the board and shall  
25 include principal and interest.

26 (~~4~~) (3) Loans from both government and private sources may be  
27 repaid by the program. Participants shall agree to allow the board  
28 access to loan records and to acquire information from lenders  
29 necessary to verify eligibility and to determine payments. Loans may  
30 not be renegotiated with lenders to accelerate repayment.

1        ~~((+5))~~ (4) Repayment of loans established pursuant to this program  
2 shall begin no later than ninety days after the individual has become  
3 a participant. Payments shall be made quarterly, or more frequently if  
4 deemed appropriate by the board, to the participant until the loan is  
5 repaid or the participant becomes ineligible due to discontinued  
6 service in a health professional shortage area or after the ~~((fifth  
7 year of services))~~ required service obligation when eligibility  
8 discontinues, whichever comes first.

9        ~~((+6))~~ (5) Should the participant discontinue service in a health  
10 professional shortage area payments against the loans of the  
11 participants shall cease to be effective on the date that the  
12 participant discontinues service.

13        ~~((+7))~~ (6) Except for circumstances beyond their control,  
14 participants who serve less than ~~((three years))~~ the required service  
15 obligation shall be obligated to repay to the program an amount equal  
16 to twice the total amount paid by the program on their behalf in  
17 addition to any payments on the unsatisfied portion of the principal  
18 and interest. The board shall determine the applicability of this  
19 subsection.

20        ~~((+8))~~ (7) The board is responsible for the collection of payments  
21 made on behalf of participants from the participants who discontinue  
22 service before ~~((their three-year))~~ completion of the required service  
23 obligation. The board shall exercise due diligence in such collection,  
24 maintaining all necessary records to ensure that the maximum amount of  
25 payment made on behalf of the participant is recovered. Collection  
26 under this section shall be pursued using the full extent of the law,  
27 including wage garnishment if necessary.

28        ~~((+9))~~ (8) The board shall not be held responsible for any  
29 outstanding payments on principal and interest to any lenders once a  
30 participant's eligibility expires."



1           "NEW SECTION.   **Sec. 16.**    PARTICIPANT OBLIGATION--SCHOLARSHIPS.(1)

2 Participants in the health professional loan repayment and scholarship  
3 program who are awarded scholarships incur an obligation to repay the  
4 scholarship, with interest, unless they serve the required service  
5 obligation in a health professional shortage area in the state of  
6 Washington.

7           (2) The terms of the repayment, including deferral and rate of  
8 interest, shall be consistent with the terms of the federal guaranteed  
9 student loan program.

10          (3) The period for repayment shall coincide with the required  
11 service obligation, with payments accruing quarterly commencing no  
12 later than nine months from the date the participant completes or  
13 discontinues the course of study or completes or discontinues the  
14 required residency.

15          (4) The entire principal and interest of each payment shall be  
16 forgiven for each payment period in which the participant serves in a  
17 health professional shortage area until the entire repayment obligation  
18 is satisfied or the borrower ceases to so serve.   Should the  
19 participant cease to serve in a health professional shortage area of  
20 this state before the participant's repayment obligation is completed,  
21 payments on the unsatisfied portion of the principal and interest shall  
22 begin the next payment period and continue until the remainder of the  
23 participant's repayment obligation is satisfied.   Except for  
24 circumstances beyond their control, participants who serve less than  
25 the required service obligation shall be obliged to repay to the  
26 program an amount equal to twice the total amount paid by the program  
27 on their behalf.

28          (5) The board is responsible for collection of repayments made  
29 under this section and shall exercise due diligence in such collection,  
30 maintaining all necessary records to ensure that maximum repayments are

1 made. Collection and servicing of repayments under this section shall  
2 be pursued using the full extent of the law, including wage garnishment  
3 if necessary, and shall be performed by entities approved for such  
4 servicing by the Washington student loan guaranty association or its  
5 successor agency. The board is responsible to forgive all or parts of  
6 such repayments under the criteria established in this section and  
7 shall maintain all necessary records of forgiven payments.

8 (6) Receipts from the payment of principal or interest or any other  
9 subsidies to which the board as administrator is entitled, which are  
10 paid by or on behalf of participants under this section, shall be  
11 deposited with the board and shall be used to cover the costs of  
12 granting the scholarships, maintaining necessary records, and making  
13 collections under subsection (5) of this section. The board shall  
14 maintain accurate records of these costs, and all receipts beyond those  
15 necessary to pay such costs shall be used to grant scholarships to  
16 eligible students.

17 (7) Sponsoring communities who financially contribute to the  
18 eligible financial expenses of eligible medical students may enter into  
19 agreements with the student to require repayment should the student not  
20 serve the required service obligation in the community as a primary  
21 care physician. The board may develop criteria for the content of such  
22 agreements with respect to reasonable provisions and obligations  
23 between communities and eligible students.

24 (8) The board may make exceptions to the conditions for  
25 participation and repayment obligations should circumstances beyond the  
26 control of individual participants warrant such exceptions."

27 **"Sec. 17.** RCW 28B.20.500 and 1990 c 271 s 9 are each amended to  
28 read as follows:

1       The school of medicine at the University of Washington shall  
2 develop and implement a policy to grant admission preference to  
3 prospective medical students from rural areas of the state who agree to  
4 serve for at least five years as primary care physicians in rural areas  
5 of Washington after completion of their medical education and have  
6 applied for and meet the qualifications of the program under ((RCW  
7 70.180.050)) chapter 28B.50 (codified pursuant to section 26 of this  
8 act). Should the school of medicine be unable to fill any or all of  
9 the admission openings due to a lack of applicants from rural areas who  
10 meet minimum qualifications for study at the medical school, it may  
11 admit students not eligible for preferential admission under this  
12 section."

13       "**Sec. 18.** RCW 70.180.005 and 1990 c 271 s 1 are each amended to  
14 read as follows:

15       The legislature finds that a health care access problem exists in  
16 rural areas of the state ((~~due to a lack of practicing physicians,~~  
17 ~~physician assistants, pharmacists, and advanced registered nurse~~  
18 ~~practitioners. In addition, many of these~~)) because rural health care  
19 providers are unable to leave the community for short-term periods of  
20 time to attend required continuing education training or for personal  
21 matters because their absence would leave the community without  
22 adequate medical care coverage. The lack of adequate medical coverage  
23 in geographically remote rural communities constitutes a threat to the  
24 health and safety of the people in those communities.

25       The legislature declares that it is in the public interest to  
26 recruit and maintain a pool of physicians, physician assistants,  
27 pharmacists, and advanced registered nurse practitioners willing and  
28 able on short notice to practice in rural communities on a short-term  
29 basis to meet the medical needs of the community."



1 state's credentialing standards are substantially equivalent to the  
2 standards in this state."

3 "NEW SECTION. **Sec. 22.** A new section is added to chapter 18.35  
4 RCW to read as follows:

5 CREDENTIALING BY ENDORSEMENT--HEARING AIDE DISPENSERS. An  
6 applicant holding a credential in another state may be credentialed to  
7 practice in this state without examination if the board determines that  
8 the other state's credentialing standards are substantially equivalent  
9 to the standards in this state."

10 "NEW SECTION. **Sec. 23.** A new section is added to chapter 18.50  
11 RCW to read as follows:

12 CREDENTIALING BY ENDORSEMENT--MIDWIFERY. An applicant holding a  
13 credential in another state may be credentialed to practice in this  
14 state without examination if the secretary determines that the other  
15 state's credentialing standards are substantially equivalent to the  
16 standards in this state."

17 "NEW SECTION. **Sec. 24.** A new section is added to chapter 18.34  
18 RCW to read as follows:

19 CREDENTIALING BY ENDORSEMENT--DISPENSING OPTICIANS. An applicant  
20 holding a credential in another state may be credentialed to practice  
21 in this state without examination if the secretary determines that the  
22 other state's credentialing standards are substantially equivalent to  
23 the standards in this state."

24 "PART 6  
25 MISCELLANEOUS"

1        "NEW SECTION.   **Sec. 25.**   The following acts or parts of acts are  
2 each repealed:

- 3        (1) RCW 18.150.080 and 1989 1st ex.s. c 9 s 723;
- 4        (2) RCW 28B.102.010 and 1987 c 437 s 1;
- 5        (3) RCW 28B.102.020 and 1987 c 437 s 2;
- 6        (4) RCW 28B.102.030 and 1987 c 437 s 3;
- 7        (5) RCW 28B.102.040 and 1987 c 437 s 4;
- 8        (6) RCW 28B.102.045 and 1988 c 125 s 7;
- 9        (7) RCW 28B.102.050 and 1987 c 437 s 5;
- 10       (8) RCW 28B.102.060 and 1987 c 437 s 6;
- 11       (9) RCW 28B.102.070 and 1987 c 437 s 7;
- 12       (10) RCW 28B.102.900 and 1987 c 437 s 9;
- 13       (11) RCW 28B.102.905 and 1987 c 437 s 10;
- 14       (12) RCW 70.180.007 and 1990 c 271 s 5;
- 15       (13) RCW 70.180.010 and 1990 c 271 s 6;
- 16       (14) RCW 70.180.050 and 1990 c 271 s 7;
- 17       (15) RCW 70.180.060 and 1990 c 271 s 8;
- 18       (16) RCW 70.180.070 and 1990 c 271 s 10;
- 19       (17) RCW 70.180.080 and 1990 c 271 s 11;
- 20       (18) RCW 70.180.090 and 1990 c 271 s 12;
- 21       (19) RCW 70.180.100 and 1990 c 271 s 13; and
- 22       (20) RCW 70.180.910 and 1990 c 271 s 19."

23        "NEW SECTION.   **Sec. 26.**   RCW 18.150.010, 18.150.020, 18.150.030,  
24 18.150.040, 18.150.050, 18.150.060, 18.150.070, 18.150.900, and  
25 18.150.910 are each recodified as a new chapter in Title 28B RCW."

26        "NEW SECTION.   **Sec. 27.**   Sections 8, 10, 11, 12, 14, 16, and 19 of  
27 this act are each added to the new chapter in Title 28B RCW created by  
28 section 26 of this act."

1        "NEW SECTION.    **Sec. 28.**    Sections 3 and 4 of this act shall  
2    constitute a new chapter in Title 28B RCW."

3        "**Sec. 29.**    RCW 18.130.180 and 1989 c 270 s 33 are each amended to  
4    read as follows:

5        The following conduct, acts, or conditions constitute  
6    unprofessional conduct for any license holder or applicant under the  
7    jurisdiction of this chapter:

8        (1) The commission of any act involving moral turpitude,  
9    dishonesty, or corruption relating to the practice of the person's  
10   profession, whether the act constitutes a crime or not. If the act  
11   constitutes a crime, conviction in a criminal proceeding is not a  
12   condition precedent to disciplinary action. Upon such a conviction,  
13   however, the judgment and sentence is conclusive evidence at the  
14   ensuing disciplinary hearing of the guilt of the license holder or  
15   applicant of the crime described in the indictment or information, and  
16   of the person's violation of the statute on which it is based. For the  
17   purposes of this section, conviction includes all instances in which a  
18   plea of guilty or nolo contendere is the basis for the conviction and  
19   all proceedings in which the sentence has been deferred or suspended.  
20   Nothing in this section abrogates rights guaranteed under chapter 9.96A  
21   RCW;

22        (2) Misrepresentation or concealment of a material fact in  
23   obtaining a license or in reinstatement thereof;

24        (3) All advertising which is false, fraudulent, or misleading;

25        (4) Incompetence, negligence, or malpractice which results in  
26   injury to a patient or which creates an unreasonable risk that a  
27   patient may be harmed. The use of a nontraditional treatment by itself  
28   shall not constitute unprofessional conduct, provided that it does not

1 result in injury to a patient or create an unreasonable risk that a  
2 patient may be harmed;

3 (5) Suspension, revocation, or restriction of the individual's  
4 license to practice the profession by competent authority in any state,  
5 federal, or foreign jurisdiction, a certified copy of the order,  
6 stipulation, or agreement being conclusive evidence of the revocation,  
7 suspension, or restriction;

8 (6) The possession, use, prescription for use, or distribution of  
9 controlled substances or legend drugs in any way other than for  
10 legitimate or therapeutic purposes, diversion of controlled substances  
11 or legend drugs, the violation of any drug law, or prescribing  
12 controlled substances for oneself;

13 (7) Violation of any state or federal statute or administrative  
14 rule regulating the profession in question, including any statute or  
15 rule defining or establishing standards of patient care or professional  
16 conduct or practice;

17 (8) Failure to cooperate with the disciplining authority by:

18 (a) Not furnishing any papers or documents;

19 (b) Not furnishing in writing a full and complete explanation  
20 covering the matter contained in the complaint filed with the  
21 disciplining authority; or

22 (c) Not responding to subpoenas issued by the disciplining  
23 authority, whether or not the recipient of the subpoena is the accused  
24 in the proceeding;

25 (9) Failure to comply with an order issued by the disciplining  
26 authority or an assurance of discontinuance entered into with the  
27 disciplining authority;

28 (10) Aiding or abetting an unlicensed person to practice when a  
29 license is required;

30 (11) Violations of rules established by any health agency;



1 (12) Practice beyond the scope of practice as defined by law or  
2 rule;

3 (13) Misrepresentation or fraud in any aspect of the conduct of the  
4 business or profession;

5 (14) Failure to adequately supervise auxiliary staff to the extent  
6 that the consumer's health or safety is at risk;

7 (15) Engaging in a profession involving contact with the public  
8 while suffering from a contagious or infectious disease involving  
9 serious risk to public health;

10 (16) Promotion for personal gain of any unnecessary or  
11 inefficacious drug, device, treatment, procedure, or service;

12 (17) Conviction of any gross misdemeanor or felony relating to the  
13 practice of the person's profession. For the purposes of this  
14 subsection, conviction includes all instances in which a plea of guilty  
15 or nolo contendere is the basis for conviction and all proceedings in  
16 which the sentence has been deferred or suspended. Nothing in this  
17 section abrogates rights guaranteed under chapter 9.96A RCW;

18 (18) The procuring, or aiding or abetting in procuring, a criminal  
19 abortion;

20 (19) The offering, undertaking, or agreeing to cure or treat  
21 disease by a secret method, procedure, treatment, or medicine, or the  
22 treating, operating, or prescribing for any health condition by a  
23 method, means, or procedure which the licensee refuses to divulge upon  
24 demand of the disciplining authority;

25 (20) The willful betrayal of a practitioner-patient privilege as  
26 recognized by law;

27 (21) Violation of chapter 19.68 RCW;

28 (22) Interference with an investigation or disciplinary proceeding  
29 by willful misrepresentation of facts before the disciplining authority  
30 or its authorized representative, or by the use of threats or

1 harassment against any patient or witness to prevent them from  
2 providing evidence in a disciplinary proceeding or any other legal  
3 action;

4 (23) Current misuse of:

5 (a) Alcohol;

6 (b) Controlled substances; or

7 (c) Legend drugs;

8 (24) Abuse of a client or patient or sexual contact with a client  
9 or patient."

10 "NEW SECTION. **Sec. 30.** Section captions and part headings as used  
11 in sections 3, 4, 10 through 12, 14, 16, 19 through 24, and 25 through  
12 30 of this act constitute no part of the law."

13 "NEW SECTION. **Sec. 31.** This act is necessary for the immediate  
14 preservation of the public peace, health, or safety, or support of the  
15 state government and its existing public institutions, and shall take  
16 effect immediately."

17 "NEW SECTION. **Sec. 32.** If funding for the purposes of sections 1  
18 through 28 this act, referencing sections 1 through 28 of this act by  
19 bill number, is not provided by June 30, 1991, in the omnibus  
20 appropriations act, sections 1 through 28 of this act shall be null and  
21 void."

22 "NEW SECTION. **Sec. 33.** Nothing in this act is intended to change  
23 the scope of practice of any health care profession referred to in this  
24 act."

1 **SHB 1960** - H AMD  
2 By Representative

3

4 On page 1, line 1 of the title, after "regulation;" strike the  
5 remainder of the title and insert "amending RCW 18.130.010, 18.120.030,  
6 18.150.020, 18.150.030, 18.150.040, 18.150.050, 18.150.060, 28B.20.500,  
7 70.180.005, and 18.130.180; adding a new section to chapter 18.130 RCW;  
8 adding a new section to chapter 70.180 RCW; adding a new section to  
9 chapter 18.53 RCW; adding a new section to chapter 18.35 RCW; adding a  
10 new section to chapter 18.50 RCW; adding a new section to chapter 18.34  
11 RCW; adding new chapters to Title 28B RCW; creating new sections;  
12 recodifying RCW 18.150.010, 18.150.020, 18.150.030, 18.150.040,  
13 18.150.050, 18.150.060, 18.150.070, 18.150.900, and 18.150.910;  
14 repealing RCW 18.150.080, 28B.102.010, 28B.102.020, 28B.102.030,  
15 28B.102.040, 28B.102.045, 28B.102.050, 28B.102.060, 28B.102.070,  
16 28B.102.900, 28B.102.905, 70.180.007, 70.180.010, 70.180.050,  
17 70.180.060, 70.180.070, 70.180.080, 70.180.090, 70.180.100, and  
18 70.180.910; prescribing penalties; and declaring an emergency."