## CERTIFICATION OF ENROLLMENT

## SUBSTITUTE HOUSE BILL 2974

Chapter 99, Laws of 2006

59th Legislature 2006 Regular Session

HEALTH PROFESSIONS DISCIPLINE

EFFECTIVE DATE: 6/7/06 - Except section 7, which becomes effective 7/1/06.

Passed by the House March 4, 2006 Yeas 65 Nays 30

FRANK CHOPP

Speaker of the House of Representatives

Passed by the Senate March 3, 2006 Yeas 45 Nays 3

BRAD OWEN

## President of the Senate

Approved March 17, 2006.

CERTIFICATE

I, Richard Nafziger, Chief Clerk of the House of Representatives of the State of Washington, do hereby certify that the attached is **SUBSTITUTE HOUSE BILL 2974** as passed by the House of Representatives and the Senate on the dates hereon set forth.

RICHARD NAFZIGER

Chief Clerk

FILED

March 17, 2006 - 11:06 a.m.

CHRISTINE GREGOIRE

Governor of the State of Washington

Secretary of State State of Washington

## SUBSTITUTE HOUSE BILL 2974

AS AMENDED BY THE SENATE

Passed Legislature - 2006 Regular Session

State of Washington 59th Legislature 2006 Regular Session

**By** House Committee on Health Care (originally sponsored by Representatives Cody, Morrell and Moeller)

READ FIRST TIME 02/03/06.

AN ACT Relating to health professions discipline; amending RCW 18.130.060, 18.130.070, 18.130.050, 18.130.080, 18.130.160, and 18.130.175; adding new sections to chapter 18.130 RCW; adding a new section to chapter 43.43 RCW; repealing RCW 18.57.174 and 18.71.0193; providing an effective date; and providing an expiration date.

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

7 **Sec. 1.** RCW 18.130.060 and 2001 c 101 s 1 are each amended to read 8 as follows:

9 In addition to the authority specified in RCW 18.130.050, the 10 secretary has the following additional authority:

(1) To employ such investigative, administrative, and clericalstaff as necessary for the enforcement of this chapter;

(2) Upon the request of a board, to appoint pro tem members to participate as members of a panel of the board in connection with proceedings specifically identified in the request. Individuals so appointed must meet the same minimum qualifications as regular members of the board. Pro tem members appointed for matters under this chapter are appointed for a term of no more than one year. No pro tem member may serve more than four one-year terms. While serving as board

members pro tem, persons so appointed have all the powers, duties, and 1 2 immunities, and are entitled to the emoluments, including travel expenses in accordance with RCW 43.03.050 and 43.03.060, of regular 3 members of the board. The chairperson of a panel shall be a regular 4 5 member of the board appointed by the board chairperson. Panels have authority to act as directed by the board with respect to all matters 6 7 concerning the review, investigation, and adjudication of all complaints, allegations, charges, and matters 8 subject to the jurisdiction of the board. The authority to act through panels does 9 10 not restrict the authority of the board to act as a single body at any phase of proceedings within the board's jurisdiction. Board panels may 11 12 make interim orders and issue final decisions with respect to matters 13 and cases delegated to the panel by the board. Final decisions may be 14 appealed as provided in chapter 34.05 RCW, the <u>administrative procedure</u> 15 act;

16 (3) To establish fees to be paid for witnesses, expert witnesses, 17 and consultants used in any investigation and to establish fees to 18 witnesses in any agency adjudicative proceeding as authorized by RCW 19 34.05.446;

(4) To conduct investigations and practice reviews at the direction
of the disciplining authority and to issue subpoenas, administer oaths,
and take depositions in the course of conducting those investigations
and practice reviews at the direction of the disciplining authority;

24 (5) To have the health professions regulatory program establish a 25 recruit potential public members, to review the svstem to qualifications of such potential members, and to provide orientation to 26 27 those public members appointed pursuant to law by the governor or the the boards and commissions 28 secretary to specified in RCW 18.130.040(2)(b), and to the advisory committees and councils for 29 professions specified in RCW 18.130.040(2)(a); and 30

31 (6) To adopt rules, in consultation with the disciplining 32 authorities, requiring every license holder to report information 33 identified in RCW 18.130.070.

34 **Sec. 2.** RCW 18.130.070 and 2005 c 470 s 2 are each amended to read 35 as follows:

36 (1)(a) The ((disciplining authority may)) secretary shall adopt 37 rules requiring ((any person, including, but not limited to, licensees,

1 corporations, organizations, health care facilities, impaired 2 practitioner programs, or voluntary substance abuse monitoring programs 3 approved by the disciplining authority and state or local governmental agencies,)) every license holder to report to the appropriate 4 disciplining authority any conviction, determination, or finding that 5 б ((a)) <u>another</u> license holder has committed an act which constitutes unprofessional conduct, or to report information to the disciplining 7 8 authority, an impaired practitioner program, or voluntary substance abuse monitoring program approved by the disciplining authority, which 9 10 indicates that the other license holder may not be able to practice his or her profession with reasonable skill and safety to consumers as a 11 12 result of a mental or physical condition.

13 (b) The secretary may adopt rules to require other persons, 14 including corporations, organizations, health care facilities, impaired 15 practitioner programs, or voluntary substance abuse monitoring programs 16 approved by a disciplining authority, and state or local government 17 agencies to report:

(i) Any conviction, determination, or finding that a license holder
 has committed an act which constitutes unprofessional conduct; or

20 (ii) Information to the disciplining authority, an impaired 21 practitioner program, or voluntary substance abuse monitoring program 22 approved by the disciplining authority, which indicates that the 23 license holder may not be able to practice his or her profession with 24 reasonable skill and safety to consumers as a result of a mental or 25 physical condition.

26 (c) If a report has been made by a hospital to the department 27 pursuant to RCW 70.41.210, a report to the disciplining authority is To facilitate meeting the intent of this section, the not required. 28 cooperation of agencies of the federal government is requested by 29 reporting any conviction, determination, or finding that a federal 30 employee or contractor regulated by the disciplining authorities 31 32 enumerated in this chapter has committed an act which constituted unprofessional conduct and reporting any information which indicates 33 that a federal employee or contractor regulated by the disciplining 34 35 authorities enumerated in this chapter may not be able to practice his 36 or her profession with reasonable skill and safety as a result of a 37 mental or physical condition.

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(d) Reporting under this section is not required by:

(i) Any entity with a peer review committee, quality improvement
 committee or other similarly designated professional review committee,
 or by a license holder who is a member of such committee, during the
 investigative phase of the respective committee's operations if the
 investigation is completed in a timely manner; or

6 <u>(ii) An impaired practitioner program or voluntary substance abuse</u> 7 monitoring program approved by a disciplining authority under RCW 8 <u>18.130.175 if the license holder is currently enrolled in the treatment</u> 9 program, so long as the license holder actively participates in the 10 <u>treatment program and the license holder's impairment does not</u> 11 <u>constitute a clear and present danger to the public health, safety, or</u> 12 <u>welfare.</u>

13 (2) If a person fails to furnish a required report, the 14 disciplining authority may petition the superior court of the county in 15 which the person resides or is found, and the court shall issue to the 16 person an order to furnish the required report. A failure to obey the 17 order is a contempt of court as provided in chapter 7.21 RCW.

18 (3) A person is immune from civil liability, whether direct or 19 derivative, for providing information to the disciplining authority 20 pursuant to the rules adopted under subsection (1) of this section.

21 (4)(a) The holder of a license subject to the jurisdiction of this 22 chapter shall report to the disciplining authority:

23 (i) Any conviction, determination, or finding that ((the licensee))
24 <u>he or she</u> has committed unprofessional conduct or is unable to practice
25 with reasonable skill or safety; and

26 (ii) Any disqualification from participation in the federal 27 medicare program, under Title XVIII of the federal social security act 28 or the federal medicaid program, under Title XIX of the federal social 29 security act.

30 (b) Failure to report within thirty days of notice of the 31 conviction, determination, ((or)) finding, or disqualification 32 constitutes grounds for disciplinary action.

33 <u>NEW SECTION.</u> Sec. 3. A new section is added to chapter 18.130 RCW 34 to read as follows:

35 Any individual who applies for a license or temporary practice 36 permit or holds a license or temporary practice permit and is 37 prohibited from practicing a health care profession in another state

because of an act of unprofessional conduct that is substantially equivalent to an act of unprofessional conduct prohibited by this chapter or any of the chapters specified in RCW 18.130.040 is prohibited from practicing a health care profession in this state until proceedings of the appropriate disciplining authority have been completed under RCW 18.130.050.

7 **Sec. 4.** RCW 18.130.050 and 1995 c 336 s 4 are each amended to read 8 as follows:

9 The disciplining authority has the following authority:

10 (1) To adopt, amend, and rescind such rules as are deemed necessary11 to carry out this chapter;

12 (2) To investigate all complaints or reports of unprofessional 13 conduct as defined in this chapter and to hold hearings as provided in 14 this chapter;

(3) To issue subpoenas and administer oaths in connection with anyinvestigation, hearing, or proceeding held under this chapter;

17 (4) To take or cause depositions to be taken and use other 18 discovery procedures as needed in any investigation, hearing, or 19 proceeding held under this chapter;

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(5) To compel attendance of witnesses at hearings;

21 (6) In the course of investigating a complaint or report of 22 unprofessional conduct, to conduct practice reviews;

23 (7) To take emergency action ordering summary suspension of a license, or restriction or limitation of the ((licensee's)) license 24 25 holder's practice pending proceedings by the disciplining authority. 26 Consistent with section 3 of this act, a disciplining authority shall issue a summary suspension of the license or temporary practice permit 27 of a license holder prohibited from practicing a health care profession 28 in another state, federal, or foreign jurisdiction because of an act of 29 unprofessional conduct that is substantially equivalent to an act of 30 unprofessional conduct prohibited by this chapter or any of the 31 chapters specified in RCW 18.130.040. The summary suspension remains 32 in effect until proceedings by the Washington disciplining authority 33 34 have been completed;

(8) To use a presiding officer as authorized in RCW 18.130.095(3)
 or the office of administrative hearings as authorized in chapter 34.12
 RCW to conduct hearings. The disciplining authority shall make the

1 final decision regarding disposition of the license unless the 2 disciplining authority elects to delegate in writing the final decision 3 to the presiding officer;

4 (9) To use individual members of the boards to direct
5 investigations. However, the member of the board shall not
6 subsequently participate in the hearing of the case;

7 (10) To enter into contracts for professional services determined
8 to be necessary for adequate enforcement of this chapter;

9 (11) To contract with licensees or other persons or organizations 10 to provide services necessary for the monitoring and supervision of 11 licensees who are placed on probation, whose professional activities 12 are restricted, or who are for any authorized purpose subject to 13 monitoring by the disciplining authority;

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(12) To adopt standards of professional conduct or practice;

15 (13) To grant or deny license applications, and in the event of a 16 finding of unprofessional conduct by an applicant or license holder, to 17 impose any sanction against a license applicant or license holder 18 provided by this chapter;

19 (14) To designate individuals authorized to sign subpoenas and 20 statements of charges;

(15) To establish panels consisting of three or more members of the board to perform any duty or authority within the board's jurisdiction under this chapter;

24 (16) To review and audit the records of licensed health facilities' 25 services' quality assurance committee decisions in which a or licensee's practice privilege or employment 26 is terminated or 27 restricted. Each health facility or service shall produce and make accessible to the disciplining authority the appropriate records and 28 otherwise facilitate the review and audit. Information so gained shall 29 30 not be subject to discovery or introduction into evidence in any civil 31 action pursuant to RCW 70.41.200(3).

32 Sec. 5. RCW 18.130.080 and 1998 c 132 s 9 are each amended to read 33 as follows:

34 (1) A person, including but not limited to consumers, licensees, 35 corporations, organizations, health care facilities, impaired 36 practitioner programs, or voluntary substance abuse monitoring programs 37 approved by disciplining authorities, and state and local governmental

agencies, may submit a written complaint to the disciplining authority 1 2 charging a license holder or applicant with unprofessional conduct and specifying the grounds therefor or to report information to the 3 disciplining authority, or voluntary substance abuse monitoring 4 impaired practitioner program approved by the 5 program, or an disciplining authority, which indicates that the license holder may not 6 7 be able to practice his or her profession with reasonable skill and 8 safety to consumers as a result of a mental or physical condition. Ιf the disciplining authority determines that the complaint merits 9 10 investigation, or if the disciplining authority has reason to believe, without a formal complaint, that a license holder or applicant may have 11 12 engaged in unprofessional conduct, the disciplining authority shall 13 investigate to determine whether there has been unprofessional conduct. 14 In determining whether or not to investigate, the disciplining authority shall consider any prior complaints received by the 15 disciplining authority, any prior findings of fact under RCW 16 18.130.110, any stipulations to informal disposition under RCW 17 18.130.172, and any comparable action taken by other state disciplining 18 19 authorities.

20 (2) Notwithstanding subsection (1) of this section, the 21 disciplining authority shall initiate an investigation in every 22 instance where the disciplining authority receives information that a 23 health care provider has been disqualified from participating in the 24 federal medicare program, under Title XVIII of the federal social 25 security act, or the federal medicaid program, under Title XIX of the 26 federal social security act.

27 <u>(3)</u> A person who files a complaint or reports information under 28 this section in good faith is immune from suit in any civil action 29 related to the filing or contents of the complaint.

30 Sec. 6. RCW 18.130.160 and 2001 c 195 s 1 are each amended to read 31 as follows:

32 Upon a finding, after hearing, that a license holder or applicant 33 has committed unprofessional conduct or is unable to practice with 34 reasonable skill and safety due to a physical or mental condition, the 35 disciplining authority may issue an order providing for one or any 36 combination of the following:

37 (1) Revocation of the license;

- (2) Suspension of the license for a fixed or indefinite term;
  - (3) Restriction or limitation of the practice;

3 (4) Requiring the satisfactory completion of a specific program of
4 remedial education or treatment;

5 (5) The monitoring of the practice by a supervisor approved by the 6 disciplining authority;

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(6) Censure or reprimand;

8 (7) Compliance with conditions of probation for a designated period 9 of time;

10 (8) Payment of a fine for each violation of this chapter, not to 11 exceed five thousand dollars per violation. Funds received shall be 12 placed in the health professions account;

13 (9) Denial of the license request;

14 (10) Corrective action;

15 (11) Refund of fees billed to and collected from the consumer;

16 (12) A surrender of the practitioner's license in lieu of other 17 sanctions, which must be reported to the federal data bank.

Any of the actions under this section may be totally or partly 18 stayed by the disciplining authority. <u>Safequarding the public's health</u> 19 and safety is the paramount responsibility of every disciplining 20 21 authority and in determining what action is appropriate, the 22 disciplining authority must first consider what sanctions are necessary to protect or compensate the public. Only after such provisions have 23 24 been made may the disciplining authority consider and include in the 25 order requirements designed to rehabilitate the license holder or applicant. All costs associated with compliance with orders issued 26 27 under this section are the obligation of the license holder or applicant. 28

The licensee or applicant may enter into a stipulated disposition 29 of charges that includes one or more of the sanctions of this section, 30 but only after a statement of charges has been issued and the licensee 31 32 has been afforded the opportunity for a hearing and has elected on the record to forego such a hearing. The stipulation shall either contain 33 one or more specific findings of unprofessional conduct or inability to 34 practice, or a statement by the licensee acknowledging that evidence is 35 36 sufficient to justify one or more specified findings of unprofessional 37 conduct or inability to practice. The stipulation entered into

pursuant to this subsection shall be considered formal disciplinary
 action for all purposes.

3 **Sec. 7.** RCW 18.130.175 and 2005 c 274 s 233 are each amended to 4 read as follows:

5 (1) In lieu of disciplinary action under RCW 18.130.160 and if the 6 disciplining authority determines that the unprofessional conduct may 7 be the result of substance abuse, the disciplining authority may refer 8 the license holder to a voluntary substance abuse monitoring program 9 approved by the disciplining authority.

The cost of the treatment shall be the responsibility of the 10 11 license holder, but the responsibility does not preclude payment by an 12 employer, existing insurance coverage, or other sources. Primary alcoholism or other drug addiction treatment shall be provided by 13 approved treatment programs under RCW 70.96A.020 or by any other 14 provider approved by the entity or the commission. However, nothing 15 16 shall prohibit the disciplining authority from approving additional 17 services and programs as an adjunct to primary alcoholism or other drug addiction treatment. The disciplining authority may also approve the 18 use of out-of-state programs. Referral of the license holder to the 19 20 program shall be done only with the consent of the license holder. 21 Referral to the program may also include probationary conditions for a designated period of time. If the license holder does not consent to 22 23 be referred to the program or does not successfully complete the 24 program, the disciplining authority may take appropriate action under 25 RCW 18.130.160 which includes suspension of the license unless or until 26 the disciplining authority, in consultation with the director of the voluntary substance abuse monitoring program, determines the license 27 holder is able to practice safely. The secretary shall adopt uniform 28 rules for the evaluation by the disciplinary authority of a relapse or 29 program violation on the part of a license holder in the substance 30 31 abuse monitoring program. The evaluation shall encourage program participation with additional conditions, in lieu of disciplinary 32 33 action, when the disciplinary authority determines that the license 34 holder is able to continue to practice with reasonable skill and 35 safety.

36 (2) In addition to approving substance abuse monitoring programs 37 that may receive referrals from the disciplining authority, the

disciplining authority may establish by rule requirements 1 for 2 participation of license holders who are not being investigated or monitored by the disciplining authority for substance abuse. License 3 holders voluntarily participating in the approved programs without 4 being referred by the disciplining authority shall not be subject to 5 disciplinary action under RCW 18.130.160 for their substance abuse, and 6 7 shall not have their participation made known to the disciplining authority, if they meet the requirements of this section and the 8 program in which they are participating. 9

(3) The license holder shall sign a waiver allowing the program to 10 release information to the disciplining authority if the licensee does 11 12 not comply with the requirements of this section or is unable to 13 practice with reasonable skill or safety. The substance abuse program 14 shall report to the disciplining authority any license holder who fails to comply with the requirements of this section or the program or who, 15 in the opinion of the program, is unable to practice with reasonable 16 17 skill or safety. License holders shall report to the disciplining authority if they fail to comply with this section or do not complete 18 the program's requirements. License holders may, upon the agreement of 19 the program and disciplining authority, reenter the program if they 20 21 have previously failed to comply with this section.

22 (4) The treatment and pretreatment records of license holders referred to or voluntarily participating in approved programs shall be 23 24 confidential, shall be exempt from chapter 42.56 RCW, and shall not be 25 subject to discovery by subpoena or admissible as evidence except for 26 monitoring records reported to the disciplining authority for cause as 27 defined in subsection (3) of this section. Monitoring records relating to license holders referred to the program by the disciplining 28 authority or relating to license holders reported to the disciplining 29 authority by the program for cause, shall be released to the 30 disciplining authority at the request of the disciplining authority. 31 32 Records held by the disciplining authority under this section shall be exempt from chapter 42.56 RCW and shall not be subject to discovery by 33 subpoena except by the license holder. 34

35 (5) "Substance abuse," as used in this section, means the 36 impairment, as determined by the disciplining authority, of a license 37 holder's professional services by an addiction to, a dependency on, or 38 the use of alcohol, legend drugs, or controlled substances.

(6) This section does not affect an employer's right or ability to
 make employment-related decisions regarding a license holder. This
 section does not restrict the authority of the disciplining authority
 to take disciplinary action for any other unprofessional conduct.

5 (7) A person who, in good faith, reports information or takes 6 action in connection with this section is immune from civil liability 7 for reporting information or taking the action.

8 (a) The immunity from civil liability provided by this section 9 shall be liberally construed to accomplish the purposes of this section 10 and the persons entitled to immunity shall include:

(i) An approved monitoring treatment program;

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12 (ii) The professional association operating the program;

(iii) Members, employees, or agents of the program or association;
 (iv) Persons reporting a license holder as being possibly impaired
 or providing information about the license holder's impairment; and

16 (v) Professionals supervising or monitoring the course of the 17 impaired license holder's treatment or rehabilitation.

(b) The courts are strongly encouraged to impose sanctions on clients and their attorneys whose allegations under this subsection are not made in good faith and are without either reasonable objective, substantive grounds, or both.

(c) The immunity provided in this section is in addition to anyother immunity provided by law.

24 <u>NEW SECTION.</u> **Sec. 8.** A new section is added to chapter 43.43 RCW 25 to read as follows:

(1) Upon a guilty plea or conviction of a person for any felony
crime involving homicide under chapter 9A.32 RCW, assault under chapter
9A.36 RCW, kidnapping under chapter 9A.40 RCW, or sex offenses under
chapter 9A.44 RCW, the prosecuting attorney shall notify the state
patrol of such guilty pleas or convictions.

(2) When the state patrol receives information that a person has pled guilty to or been convicted of one of the felony crimes under subsection (1) of this section, the state patrol shall transmit that information to the department of health. It is the duty of the department of health to identify whether the person holds a credential issued by a disciplining authority listed under RCW 18.130.040, and

provide this information to the disciplining authority that issued the credential to the person who pled guilty or was convicted of a crime listed in subsection (1) of this section.

4 <u>NEW SECTION.</u> Sec. 9. A new section is added to chapter 18.130 RCW 5 to read as follows:

6 (1) When developing its biennial budget request for appropriation 7 of the health professions account created in RCW 43.70.320, beginning in the 2007-2009 budget and continuing in subsequent biennia, the 8 9 department shall specify the number of full-time employees designated 10 as investigators and attorneys and the costs associated with supporting 11 their activities. The department shall also specify the additional 12 full-time employees designated as investigators and attorneys that are 13 required to achieve a staffing level that is able to respond promptly, 14 competently, and appropriately to the workload associated with health professions disciplinary activities and the costs associated with 15 16 supporting disciplinary activities. In identifying the need for 17 additional staff, the department shall develop a formula based on its prior experience with staff levels compared to the number of providers, 18 complaints, investigations, and other criteria that the department 19 20 determines is relevant to staffing level decisions. The department 21 must request additional funds for activities that most critically impact public health and safety. The budget request must specify the 22 23 methodology used for each biennium.

joint legislative audit and review committee, 24 (2) The in 25 consultation with the department, shall report to the legislature by 26 December 1, 2010, with recommendations for formulas for determining 27 appropriate staffing levels for investigators and attorneys at the department of health involved in the health professions disciplinary 28 process to achieve prompt, competent, and appropriate responses to 29 complaints of unprofessional conduct. The report must be based upon 30 31 the department's prior experience with staff levels compared to the number of providers, complaints, investigations, and other criteria 32 33 that the department finds are relevant to determining appropriate 34 staffing levels.

35 (3) This section expires July 1, 2011.

1 <u>NEW SECTION.</u> Sec. 10. The following acts or parts of acts are 2 each repealed:

3 (1) RCW 18.57.174 (Duty to report unprofessional conduct--4 Exceptions) and 2000 c 171 s 20 & 1986 c 300 s 9; and

5 (2) RCW 18.71.0193 (Duty to report unprofessional conduct--6 Exceptions) and 1994 sp.s. c 9 s 327 & 1986 c 300 s 5.

NEW SECTION. Sec. 11. Section 7 of this act takes effect July 1,
2006.

Passed by the House March 4, 2006. Passed by the Senate March 3, 2006. Approved by the Governor March 17, 2006. Filed in Office of Secretary of State March 17, 2006.