

CERTIFICATION OF ENROLLMENT

SECOND SUBSTITUTE SENATE BILL 5555

Chapter 469, Laws of 2023

(partial veto)

68th Legislature
2023 Regular Session

CERTIFIED PEER SPECIALISTS

EFFECTIVE DATE: July 23, 2023—Except for section 18, which takes effect October 1, 2023.

Passed by the Senate April 18, 2023
Yeas 29 Nays 19

DENNY HECK

President of the Senate

Passed by the House April 12, 2023
Yeas 63 Nays 34

Laurie Jinkins

**Speaker of the House of
Representatives**

Approved May 15, 2023 3:19 PM with
the exception of section 4, which is
vetoed.

JAY INSLIEE

Governor of the State of Washington

CERTIFICATE

I, Sarah Bannister, Secretary of the Senate of the State of Washington, do hereby certify that the attached is **SECOND SUBSTITUTE SENATE BILL 5555** as passed by the Senate and the House of Representatives on the dates hereon set forth.

SARAH BANNISTER

Secretary

FILED

May 16, 2023

**Secretary of State
State of Washington**

SECOND SUBSTITUTE SENATE BILL 5555

AS AMENDED BY THE HOUSE

Passed Legislature - 2023 Regular Session

State of Washington 68th Legislature 2023 Regular Session

By Senate Ways & Means (originally sponsored by Senators Randall, Dhingra, Hasegawa, Keiser, Nguyen, Nobles, Valdez, and C. Wilson)

READ FIRST TIME 02/24/23.

1 AN ACT Relating to addressing the behavioral health workforce
2 shortage and expanding access to peer services by creating the
3 profession of certified peer specialists; amending RCW 18.130.040,
4 18.130.040, 18.130.175, 43.43.842, and 43.70.250; adding new sections
5 to chapter 71.24 RCW; adding a new section to chapter 48.43 RCW;
6 adding a new chapter to Title 18 RCW; creating a new section;
7 providing an effective date; and providing an expiration date.

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

9 NEW SECTION. **Sec. 1.** (1) The legislature finds that peers play
10 a critical role along the behavioral health continuum of care, from
11 outreach to treatment to recovery support. Peers deal in the currency
12 of hope and motivation and are incredibly adept at supporting people
13 with behavioral health challenges on their recovery journeys. Peers
14 represent the only segment of the behavioral health workforce where
15 there is not a shortage, but a surplus of willing workers. Peers,
16 however, are presently limited to serving only medicaid recipients
17 and working only in community behavioral health agencies. As a
18 result, youth and adults with commercial insurance have no access to
19 peer services. Furthermore, peers who work in other settings, such as
20 emergency departments and behavioral health urgent care, cannot bill
21 insurance for their services.

1 (2) Therefore, it is the intent of the legislature to address the
2 behavioral health workforce crisis, expand access to peer services,
3 eliminate financial barriers to professional licensing, and honor the
4 contributions of the peer profession by creating the profession of
5 certified peer specialists.

6 NEW SECTION. **Sec. 2.** The definitions in this section apply
7 throughout this chapter unless the context clearly requires
8 otherwise.

9 (1) "Advisory committee" means the Washington state certified
10 peer specialist advisory committee established under section 4 of
11 this act.

12 (2) "Approved supervisor" means:

13 (a) Until July 1, 2028, a behavioral health provider, as defined
14 in RCW 71.24.025 with at least two years of experience working in a
15 behavioral health practice that employs peer specialists as part of
16 treatment teams; or

17 (b) A certified peer specialist who has completed:

18 (i) At least 1,500 hours of work as a fully certified peer
19 specialist engaged in the practice of peer support services, with at
20 least 500 hours attained through the joint supervision of peers in
21 conjunction with another approved supervisor; and

22 (ii) The training developed by the health care authority under
23 section 13 of this act.

24 (3) "Certified peer specialist" means a person certified under
25 this chapter to engage in the practice of peer support services.

26 (4) "Certified peer specialist trainee" means an individual
27 working toward the supervised experience and written examination
28 requirements to become a certified peer specialist under this
29 chapter.

30 (5) "Department" means the department of health.

31 (6) "Practice of peer support services" means the provision of
32 interventions by either a person in recovery from a mental health
33 condition or substance use disorder, or both, or the parent or legal
34 guardian of a youth who is receiving or has received behavioral
35 health services. The client receiving the interventions receives them
36 from a person with a similar lived experience as either a person in
37 recovery from a mental health condition or substance use disorder, or
38 both, or the parent or legal guardian of a youth who is receiving or
39 has received behavioral health services. The person provides the

1 interventions through the use of shared experiences to assist a
2 client in the acquisition and exercise of skills needed to support
3 the client's recovery. Interventions may include activities that
4 assist clients in accessing or engaging in treatment and in symptom
5 management; promote social connection, recovery, and self-advocacy;
6 provide guidance in the development of natural community supports and
7 basic daily living skills; and support clients in engagement,
8 motivation, and maintenance related to achieving and maintaining
9 health and wellness goals.

10 (7) "Secretary" means the secretary of health.

11 NEW SECTION. **Sec. 3.** In addition to any other authority, the
12 secretary has the authority to:

13 (1) Adopt rules under chapter 34.05 RCW necessary to implement
14 this chapter;

15 (2) Establish all certification, examination, and renewal fees
16 for certified peer specialists in accordance with RCW 43.70.110 and
17 43.70.250;

18 (3) Establish forms and procedures necessary to administer this
19 chapter;

20 (4) Issue certificates to applicants who have met the education,
21 training, and examination requirements for obtaining a certificate
22 and to deny a certificate to applicants who do not meet the
23 requirements;

24 (5) Coordinate with the health care authority to confirm an
25 applicants' successful completion of the certified peer specialist
26 education course offered by the health care authority under section
27 13 of this act and successful passage of the associated oral
28 examination as proof of eligibility to take a qualifying written
29 examination for applicants for obtaining a certificate;

30 (6) Establish practice parameters consistent with the definition
31 of the practice of peer support services;

32 (7) Provide staffing and administrative support to the advisory
33 committee;

34 (8) Determine which states have credentialing requirements
35 equivalent to those of this state, and issue certificates to
36 applicants credentialed in those states without examination;

37 (9) Define and approve any supervised experience requirements for
38 certification;

1 (10) Assist the advisory committee with the review of peer
2 counselor apprenticeship program applications in the process of being
3 approved and registered under chapter 49.04 RCW;

4 (11) Adopt rules implementing a continuing competency program;
5 and

6 (12) Establish by rule the procedures for an appeal of an
7 examination failure.

8 ***NEW SECTION. Sec. 4. (1) The Washington state certified peer**
9 **specialist advisory committee is established.**

10 (2) (a) **The advisory committee shall consist of 11 members. Nine**
11 **members must be certified peer specialists. Those nine members shall**
12 **be inclusive of mental health peers, substance use disorder peers,**
13 **community-based peers, peers who work in clinical settings, youth**
14 **peers, adult peers, parent or family peers, and peer supervisors. One**
15 **member must represent community behavioral health agencies. One**
16 **member must represent the public at large and may not be a**
17 **credentialed behavioral health provider. The advisory committee shall**
18 **be reflective of the community who receives peer services, including**
19 **people who are Black, indigenous, people of color, and individuals**
20 **who identify as LGBTQ. All members of the advisory committee must be**
21 **residents of Washington state. Members may not hold an office in a**
22 **professional association for peer specialists or be employed by the**
23 **state. A majority of the members currently serving shall constitute a**
24 **quorum.**

25 (b) **The members shall be appointed by the secretary to serve**
26 **three-year terms which may be renewed. Initial members shall be**
27 **appointed to staggered terms which may be less than three years.**
28 **Initial membership may vary from the requirements in (a) of this**
29 **subsection to account for the lack of an available credential for**
30 **certified peer specialists at the time the advisory committee is**
31 **established. The advisory committee shall select a chair and vice**
32 **chair.**

33 (3) **The department and the health care authority, as appropriate,**
34 **are encouraged to adopt recommendations as submitted by the advisory**
35 **committee on topics related to the administration of this chapter and**
36 **provide their rationale for any formal recommendations of the**
37 **advisory committee that either agency does not adopt, including:**

38 (a) **Advice and recommendations regarding the establishment or**
39 **implementation of rules related to this chapter;**

1 (b) Advice, recommendations, and consultation regarding
2 professional boundaries, customary practices, and other aspects of
3 peer support as it relates to complaints, investigations, and other
4 disciplinary actions;

5 (c) Assistance and recommendations to enhance patient and client
6 education;

7 (d) Assistance and recommendations regarding the written and oral
8 examination to become a certified peer specialist and the examiners
9 conducting the examinations, including recommendations to assure that
10 the examinations, and the manner in which the examinations are
11 administered, are culturally appropriate;

12 (e) Assistance and recommendations regarding any continuing
13 education and continuing competency programs administered under the
14 provisions of this chapter;

15 (f) Advice and guidance regarding criteria for certification
16 based on prior experience as a peer specialist attained before July
17 1, 2025, as described in section 7(2) of this act;

18 (g) Recommendations for additional supports that may help those
19 practicing as peer counselors as of the effective date of this
20 section to become certified peer specialists;

21 (h) Advice and guidance on the feasibility and design of a two-
22 phase certification program for peer specialists;

23 (i) Review of existing health care authority policies and
24 procedures related to peer counselors;

25 (j) Advice on approving additional education and training
26 entities, other than the health care authority, to conduct the course
27 of instruction in section 13(1)(a) of this act to expand availability
28 of the course, particularly among black, indigenous, people of color,
29 and individuals who identify as LGBTQ;

30 (k) Advice on approving additional testing entities, other than
31 the health care authority to administer the written and oral
32 examination, including entities owned by black, indigenous, and
33 people of color;

34 (l) Advice on long-term planning and growth for the future
35 advancement of the peer specialist profession;

36 (m) Recommendations on recruitment and retention in the peer
37 specialist profession, including among black, indigenous, people of
38 color, and individuals who identify as LGBTQ; and

39 (n) Recommendations on strategies to eliminate financial barriers
40 to licensing as a certified peer specialist.

1 (4) *Committee members are immune from suit in an action, civil or*
2 *criminal, based on the department's disciplinary proceedings or other*
3 *official acts performed in good faith.*

4 (5) *Committee members shall be compensated in accordance with RCW*
5 *43.03.240, including travel expenses in carrying out his or her*
6 *authorized duties in accordance with RCW 43.03.050 and 43.03.060.*

**Sec. 4 was vetoed. See message at end of chapter.*

7 NEW SECTION. **Sec. 5.** Beginning July 1, 2025, except as provided
8 in section 13 of this act, the decision of a person practicing peer
9 support services to become certified under this chapter is voluntary.
10 A person may not use the title certified peer specialist unless the
11 person holds a credential under this chapter.

12 NEW SECTION. **Sec. 6.** Nothing in this chapter may be construed
13 to prohibit or restrict:

14 (1) An individual who holds a credential issued by this state,
15 other than as a certified peer specialist or certified peer
16 specialist trainee, to engage in the practice of an occupation or
17 profession without obtaining an additional credential from the state.
18 The individual may not use the title certified peer specialist unless
19 the individual holds a credential under this chapter; or

20 (2) The practice of peer support services by a person who is
21 employed by the government of the United States while engaged in the
22 performance of duties prescribed by the laws of the United States.

23 NEW SECTION. **Sec. 7.** (1) Beginning July 1, 2025, except as
24 provided in subsections (2) and (3) of this section, the secretary
25 shall issue a certificate to practice as a certified peer specialist
26 to any applicant who demonstrates to the satisfaction of the
27 secretary that the applicant meets the following requirements:

28 (a) Submission of an attestation to the department that the
29 applicant self-identifies as:

30 (i) A person with one or more years of recovery from a mental
31 health condition, substance use disorder, or both; or

32 (ii) The parent or legal guardian of a youth who is receiving or
33 has received behavioral health services;

34 (b) Successful completion of the education course developed and
35 offered by the health care authority under section 13 of this act;

1 (c) Successful passage of an oral examination administered by the
2 health care authority upon completion of the education course offered
3 by the health care authority under section 13 of this act;

4 (d) Successful passage of a written examination administered by
5 the health care authority upon completion of the education course
6 offered by the health care authority under section 13 of this act;

7 (e) Successful completion of an experience requirement of at
8 least 1,000 supervised hours as a certified peer specialist trainee
9 engaged in the volunteer or paid practice of peer support services,
10 in accordance with the standards in section 8 of this act; and

11 (f) Payment of the appropriate fee required under this chapter.

12 (2) The secretary, with the recommendation of the advisory
13 committee, shall establish criteria for the issuance of a certificate
14 to engage in the practice of peer support services based on prior
15 experience as a peer specialist attained before July 1, 2025. The
16 criteria shall establish equivalency standards necessary to be deemed
17 to have met the requirements of subsection (1) of this section. An
18 applicant under this subsection shall have until July 1, 2026, to
19 complete any standards in which the applicant is determined to be
20 deficient.

21 (3) The secretary, with the recommendation of the advisory
22 committee, shall issue a certificate to engage in the practice of
23 peer support services based on completion of an apprenticeship
24 program registered and approved under chapter 49.04 RCW and reviewed
25 by the advisory committee under section 3 of this act.

26 (4) A certificate to engage in the practice of peer support
27 services is valid for two years. A certificate may be renewed upon
28 demonstrating to the department that the certified peer specialist
29 has successfully completed 30 hours of continuing education approved
30 by the department. As part of the continuing education requirement,
31 every six years the applicant must submit proof of successful
32 completion of at least three hours of suicide prevention training and
33 at least six hours of coursework in professional ethics and law,
34 which may include topics under RCW 18.130.180.

35 NEW SECTION. **Sec. 8.** (1) Beginning July 1, 2025, the secretary
36 shall issue a certificate to practice as a certified peer specialist
37 trainee to any applicant who demonstrates to the satisfaction of the
38 secretary that:

1 (a) The applicant meets the requirements of section 7 (1)(a),
2 (b), (c), (d), and (4) of this act and is working toward the
3 supervised experience requirements to become a certified peer
4 specialist under this chapter; or

5 (b) The applicant is enrolled in an apprenticeship program
6 registered and approved under chapter 49.04 RCW and approved by the
7 secretary under section 3 of this act.

8 (2) An applicant seeking to become a certified peer specialist
9 trainee under this section shall submit to the secretary for approval
10 an attestation, in accordance with rules adopted by the department,
11 that the certified peer specialist trainee is actively pursuing the
12 supervised experience requirements of section 7(1)(d) of this act.
13 This attestation must be updated with the trainee's annual renewal.

14 (3) A certified peer specialist trainee certified under this
15 section may practice only under the supervision of an approved
16 supervisor. Supervision may be provided through distance supervision.
17 Supervision may be provided by an approved supervisor who is employed
18 by the same employer that employs the certified peer specialist
19 trainee or by an arrangement made with a third-party approved
20 supervisor to provide supervision, or a combination of both types of
21 approved supervisors.

22 (4) A certified peer specialist trainee certificate is valid for
23 one year and may only be renewed four times.

24 NEW SECTION. **Sec. 9.** (1) The date and location of written
25 examinations must be established by the health care authority.
26 Applicants who have been found by the health care authority to meet
27 other requirements for obtaining a certificate must be scheduled for
28 the next examination following the filing of the application. The
29 health care authority shall establish by rule the examination
30 application deadline.

31 (2) The health care authority shall administer written
32 examinations to each applicant, by means determined most effective,
33 on subjects appropriate to the scope of practice, as applicable. The
34 examinations must be limited to the purpose of determining whether
35 the applicant possesses the minimum skill and knowledge necessary to
36 practice competently.

37 (3) The examination materials, all grading of the materials, and
38 the grading of any practical work must be preserved for a period of
39 not less than one year after the health care authority has made and

1 published the decisions. All examinations must be conducted under
2 fair and wholly impartial methods.

3 (4) Any applicant failing to make the required grade in the first
4 written examination may take up to three subsequent written
5 examinations as the applicant desires upon prepaying a fee determined
6 by the health care authority for each subsequent written examination.
7 Upon failing four written examinations, the health care authority may
8 invalidate the original application and require remedial education
9 before the person may take future written examinations.

10 (5) The health care authority may approve a written examination
11 prepared or administered by a private organization that credentials
12 and renews credentials for peer counselors, or an association of
13 credentialing agencies, for use by an applicant in meeting the
14 credentialing requirements.

15 NEW SECTION. **Sec. 10.** The secretary shall establish, by rule,
16 the requirements and fees for renewal of a certificate issued
17 pursuant to this chapter. Fees must be established in accordance with
18 RCW 43.70.110 and 43.70.250. Failure to renew the certificate
19 invalidates the certificate and all privileges granted by the
20 certificate. If a certificate has lapsed for a period longer than
21 three years, the person shall demonstrate competence to the
22 satisfaction of the secretary by completing continuing competency
23 requirements or meeting other standards determined by the secretary.

24 NEW SECTION. **Sec. 11.** (1) The department, in consultation with
25 the advisory committee, shall conduct an assessment and submit a
26 report to the governor and the committees of the legislature with
27 jurisdiction over health policy issues by December 1, 2027.

28 (2) The report in subsection (1) of this section shall provide:

29 (a) An analysis of the adequacy of the supply of certified peer
30 specialists serving as approved supervisors pursuant to section
31 2(2)(b) of this act with respect to the ability to meet the
32 anticipated supervision needs of certified peer specialist trainees
33 upon the expiration of behavioral health providers serving as
34 approved supervisors pursuant to section 2(2)(a) of this act;

35 (b) An assessment of whether or not it is necessary to extend the
36 expiration of behavioral health providers serving as approved
37 supervisors pursuant to section 2(2)(a) of this act in order to meet

1 the anticipated supervision needs of certified peer specialist
2 trainees;

3 (c) Recommendations for increasing the supply of certified peer
4 specialists serving as approved supervisors pursuant to section
5 2(2)(b) of this act, including any potential modifications to the
6 requirements to become an approved supervisor; and

7 (d) Recommendations for alternative methods of providing
8 supervision to certified peer specialist trainees, including options
9 for team-based supervision that incorporate supervision from both
10 behavioral health providers serving as approved supervisors pursuant
11 to section 2(2)(a) of this act and certified peer specialists serving
12 as approved supervisors pursuant to section 2(2)(b) of this act.

13 NEW SECTION. **Sec. 12.** The uniform disciplinary act, chapter
14 18.130 RCW, governs uncertified practice of peer support services,
15 the issuance and denial of certificates, and the discipline of
16 certified peer specialists and certified peer specialist trainees
17 under this chapter.

18 NEW SECTION. **Sec. 13.** A new section is added to chapter 71.24
19 RCW to read as follows:

20 (1)(a) By January 1, 2025, the authority must develop a course of
21 instruction to become a certified peer specialist under chapter
22 18.--- RCW (the new chapter created in section 22 of this act). The
23 course must be approximately 80 hours in duration and based upon the
24 curriculum offered by the authority in its peer counselor training as
25 of the effective date of this section, as well as additional
26 instruction in the principles of recovery coaching and suicide
27 prevention. The authority shall establish a peer engagement process
28 to receive suggestions regarding subjects to be covered in the 80-
29 hour curriculum beyond those addressed in the peer counselor training
30 curriculum and recovery coaching and suicide prevention curricula,
31 including the cultural appropriateness of the 80-hour training. The
32 education course must be taught by certified peer specialists. The
33 education course must be offered by the authority with sufficient
34 frequency to accommodate the demand for training and the needs of the
35 workforce. The authority must establish multiple configurations for
36 offering the education course, including offering the course as an
37 uninterrupted course with longer class hours held on consecutive days
38 for students seeking accelerated completion of the course and as an

1 extended course with reduced daily class hours, possibly with
2 multiple days between classes, to accommodate students with other
3 commitments. Upon completion of the education course, the student
4 must pass an oral examination administered by the course trainer.

5 (b) The authority shall develop an expedited course of
6 instruction that consists of only those portions of the curriculum
7 required under (a) of this subsection that exceed the authority's
8 certified peer counselor training curriculum as it exists on the
9 effective date of this section. The expedited training shall focus on
10 assisting persons who completed the authority's certified peer
11 counselor training as it exists on the effective date of this section
12 to meet the education requirements for certification under section 7
13 of this act.

14 (2) By January 1, 2025, the authority must develop a training
15 course for certified peer specialists providing supervision to
16 certified peer specialist trainees under section 8 of this act.

17 (3)(a) By July 1, 2025, the authority shall offer a 40-hour
18 specialized training course in peer crisis response services for
19 individuals employed as peers who work with individuals who may be
20 experiencing a behavioral health crisis. When offering the training
21 course, priority for enrollment must be given to certified peer
22 specialists employed in a crisis-related setting, including entities
23 identified in (b) of this subsection. The training shall incorporate
24 best practices for responding to 988 behavioral health crisis line
25 calls, as well as processes for co-response with law enforcement when
26 necessary.

27 (b) Beginning July 1, 2025, any entity that uses certified peer
28 specialists as peer crisis responders, may only use certified peer
29 specialists who have completed the training course established by (a)
30 of this subsection. A behavioral health agency that uses certified
31 peer specialists to work as peer crisis responders must maintain the
32 records of the completion of the training course for those certified
33 peer specialists who provide these services and make the records
34 available to the state agency for auditing or certification purposes.

35 (4) By July 1, 2025, the authority shall offer a course designed
36 to inform licensed or certified behavioral health agencies of the
37 benefits of incorporating certified peer specialists and certified
38 peer specialist trainees into their clinical staff and best practices
39 for incorporating their services. The authority shall encourage
40 entities that hire certified peer specialists and certified peer

1 specialist trainees, including licensed or certified behavioral
2 health agencies, hospitals, primary care offices, and other entities,
3 to have appropriate staff attend the training by making it available
4 in multiple formats.

5 (5) The authority shall:

6 (a) Hire clerical, administrative, investigative, and other staff
7 as needed to implement this section to serve as examiners for any
8 practical oral or written examination and assure that the examiners
9 are trained to administer examinations in a culturally appropriate
10 manner and represent the diversity of applicants being tested. The
11 authority shall adopt procedures to allow for appropriate
12 accommodations for persons with a learning disability, other
13 disabilities, and other needs and assure that staff involved in the
14 administration of examinations are trained on those procedures;

15 (b) Develop oral and written examinations required under this
16 section. The initial examinations shall be adapted from those used by
17 the authority as of the effective date of this section and modified
18 pursuant to input and comments from the Washington state peer
19 specialist advisory committee. The authority shall assure that the
20 examinations are culturally appropriate;

21 (c) Prepare, grade, and administer, or supervise the grading and
22 administration of written examinations for obtaining a certificate;

23 (d) Approve entities to provide the educational courses required
24 by this section and approve entities to prepare, grade, and
25 administer written examinations for the educational courses required
26 by this section. In establishing approval criteria, the authority
27 shall consider the recommendations of the Washington state peer
28 specialist advisory committee;

29 (e) Develop examination preparation materials and make them
30 available to students enrolled in the courses established under this
31 section in multiple formats, including specialized examination
32 preparation support for students with higher barriers to passing the
33 written examination; and

34 (f) The authority shall administer, through contract, a program
35 to link eligible persons in recovery from behavioral health
36 challenges who are seeking employment as peers with employers seeking
37 to hire peers, including certified peer specialists. The authority
38 must contract for this program with an organization that provides
39 peer workforce development, peer coaching, and other peer supportive
40 services. The contract must require the organization to create and

1 maintain a statewide database which is easily accessible to eligible
2 persons in recovery who are seeking employment as peers and potential
3 employers seeking to hire peers, including certified peer
4 specialists. The program must be fully implemented by July 1, 2024.

5 (6) For the purposes of this section, the term "peer crisis
6 responder" means a peer specialist certified under chapter 18.--- RCW
7 (the new chapter created in section 22 of this act) who has completed
8 the training under subsection (3) of this section whose job involves
9 responding to behavioral health emergencies, including those
10 dispatched through a 988 crisis hotline or the 911 system.

11 NEW SECTION. **Sec. 14.** A new section is added to chapter 71.24
12 RCW to read as follows:

13 Behavioral health agencies must reduce the caseload for approved
14 supervisors who are providing supervision to certified peer
15 specialist trainees seeking certification under chapter 18.--- RCW
16 (the new chapter created in section 22 of this act), in accordance
17 with standards established by the Washington state certified peer
18 specialist advisory committee.

19 NEW SECTION. **Sec. 15.** A new section is added to chapter 71.24
20 RCW to read as follows:

21 (1) Beginning January 1, 2027, a person who engages in the
22 practice of peer support services and who bills a health carrier or
23 medical assistance or whose employer bills a health carrier or
24 medical assistance for those services must hold an active credential
25 as a certified peer specialist or certified peer specialist trainee
26 under chapter 18.--- RCW (the new chapter created in section 22 of
27 this act).

28 (2) A person who is registered as an agency-affiliated counselor
29 under chapter 18.19 RCW who engages in the practice of peer support
30 services and whose agency, as defined in RCW 18.19.020, bills medical
31 assistance for those services must hold a certificate as a certified
32 peer specialist or certified peer specialist trainee under chapter
33 18.--- RCW (the new chapter created in section 22 of this act) no
34 later than January 1, 2027.

35 NEW SECTION. **Sec. 16.** A new section is added to chapter 48.43
36 RCW to read as follows:

1 By July 1, 2026, each carrier shall provide access to services
2 provided by certified peer specialists and certified peer specialist
3 trainees in a manner sufficient to meet the network access standards
4 set forth in rules established by the office of the insurance
5 commissioner.

6 **Sec. 17.** RCW 18.130.040 and 2021 c 179 s 7 are each amended to
7 read as follows:

8 (1) This chapter applies only to the secretary and the boards and
9 commissions having jurisdiction in relation to the professions
10 licensed under the chapters specified in this section. This chapter
11 does not apply to any business or profession not licensed under the
12 chapters specified in this section.

13 (2) (a) The secretary has authority under this chapter in relation
14 to the following professions:

15 (i) Dispensing opticians licensed and designated apprentices
16 under chapter 18.34 RCW;

17 (ii) Midwives licensed under chapter 18.50 RCW;

18 (iii) Ocularists licensed under chapter 18.55 RCW;

19 (iv) Massage therapists and businesses licensed under chapter
20 18.108 RCW;

21 (v) Dental hygienists licensed under chapter 18.29 RCW;

22 (vi) Acupuncturists or acupuncture and Eastern medicine
23 practitioners licensed under chapter 18.06 RCW;

24 (vii) Radiologic technologists certified and X-ray technicians
25 registered under chapter 18.84 RCW;

26 (viii) Respiratory care practitioners licensed under chapter
27 18.89 RCW;

28 (ix) Hypnotherapists and agency affiliated counselors registered
29 and advisors and counselors certified under chapter 18.19 RCW;

30 (x) Persons licensed as mental health counselors, mental health
31 counselor associates, marriage and family therapists, marriage and
32 family therapist associates, social workers, social work associates—
33 advanced, and social work associates—independent clinical under
34 chapter 18.225 RCW;

35 (xi) Persons registered as nursing pool operators under chapter
36 18.52C RCW;

37 (xii) Nursing assistants registered or certified or medication
38 assistants endorsed under chapter 18.88A RCW;

1 (xiii) Dietitians and nutritionists certified under chapter
2 18.138 RCW;

3 (xiv) Substance use disorder professionals, substance use
4 disorder professional trainees, or co-occurring disorder specialists
5 certified under chapter 18.205 RCW;

6 (xv) Sex offender treatment providers and certified affiliate sex
7 offender treatment providers certified under chapter 18.155 RCW;

8 (xvi) Persons licensed and certified under chapter 18.73 RCW or
9 RCW 18.71.205;

10 (xvii) Orthotists and prosthetists licensed under chapter 18.200
11 RCW;

12 (xviii) Surgical technologists registered under chapter 18.215
13 RCW;

14 (xix) Recreational therapists under chapter 18.230 RCW;

15 (xx) Animal massage therapists certified under chapter 18.240
16 RCW;

17 (xxi) Athletic trainers licensed under chapter 18.250 RCW;

18 (xxii) Home care aides certified under chapter 18.88B RCW;

19 (xxiii) Genetic counselors licensed under chapter 18.290 RCW;

20 (xxiv) Reflexologists certified under chapter 18.108 RCW;

21 (xxv) Medical assistants-certified, medical assistants-
22 hemodialysis technician, medical assistants-phlebotomist, forensic
23 phlebotomist, and medical assistants-registered certified and
24 registered under chapter 18.360 RCW; (~~and~~)

25 (xxvi) Behavior analysts, assistant behavior analysts, and
26 behavior technicians under chapter 18.380 RCW; and

27 (xxvii) Certified peer specialists and certified peer specialist
28 trainees under chapter 18.--- RCW (the new chapter created in section
29 22 of this act).

30 (b) The boards and commissions having authority under this
31 chapter are as follows:

32 (i) The podiatric medical board as established in chapter 18.22
33 RCW;

34 (ii) The chiropractic quality assurance commission as established
35 in chapter 18.25 RCW;

36 (iii) The dental quality assurance commission as established in
37 chapter 18.32 RCW governing licenses issued under chapter 18.32 RCW,
38 licenses and registrations issued under chapter 18.260 RCW, and
39 certifications issued under chapter 18.350 RCW;

- 1 (iv) The board of hearing and speech as established in chapter
2 18.35 RCW;
- 3 (v) The board of examiners for nursing home administrators as
4 established in chapter 18.52 RCW;
- 5 (vi) The optometry board as established in chapter 18.54 RCW
6 governing licenses issued under chapter 18.53 RCW;
- 7 (vii) The board of osteopathic medicine and surgery as
8 established in chapter 18.57 RCW governing licenses issued under
9 chapter 18.57 RCW;
- 10 (viii) The pharmacy quality assurance commission as established
11 in chapter 18.64 RCW governing licenses issued under chapters 18.64
12 and 18.64A RCW;
- 13 (ix) The Washington medical commission as established in chapter
14 18.71 RCW governing licenses and registrations issued under chapters
15 18.71 and 18.71A RCW;
- 16 (x) The board of physical therapy as established in chapter 18.74
17 RCW;
- 18 (xi) The board of occupational therapy practice as established in
19 chapter 18.59 RCW;
- 20 (xii) The nursing care quality assurance commission as
21 established in chapter 18.79 RCW governing licenses and registrations
22 issued under that chapter;
- 23 (xiii) The examining board of psychology and its disciplinary
24 committee as established in chapter 18.83 RCW;
- 25 (xiv) The veterinary board of governors as established in chapter
26 18.92 RCW;
- 27 (xv) The board of naturopathy established in chapter 18.36A RCW,
28 governing licenses and certifications issued under that chapter; and
- 29 (xvi) The board of denturists established in chapter 18.30 RCW.
- 30 (3) In addition to the authority to discipline license holders,
31 the disciplining authority has the authority to grant or deny
32 licenses. The disciplining authority may also grant a license subject
33 to conditions.
- 34 (4) All disciplining authorities shall adopt procedures to ensure
35 substantially consistent application of this chapter, the uniform
36 disciplinary act, among the disciplining authorities listed in
37 subsection (2) of this section.

38 **Sec. 18.** RCW 18.130.040 and 2022 c 217 s 5 are each amended to
39 read as follows:

1 (1) This chapter applies only to the secretary and the boards and
2 commissions having jurisdiction in relation to the professions
3 licensed under the chapters specified in this section. This chapter
4 does not apply to any business or profession not licensed under the
5 chapters specified in this section.

6 (2) (a) The secretary has authority under this chapter in relation
7 to the following professions:

8 (i) Dispensing opticians licensed and designated apprentices
9 under chapter 18.34 RCW;

10 (ii) Midwives licensed under chapter 18.50 RCW;

11 (iii) Ocularists licensed under chapter 18.55 RCW;

12 (iv) Massage therapists and businesses licensed under chapter
13 18.108 RCW;

14 (v) Dental hygienists licensed under chapter 18.29 RCW;

15 (vi) Acupuncturists or acupuncture and Eastern medicine
16 practitioners licensed under chapter 18.06 RCW;

17 (vii) Radiologic technologists certified and X-ray technicians
18 registered under chapter 18.84 RCW;

19 (viii) Respiratory care practitioners licensed under chapter
20 18.89 RCW;

21 (ix) Hypnotherapists and agency affiliated counselors registered
22 and advisors and counselors certified under chapter 18.19 RCW;

23 (x) Persons licensed as mental health counselors, mental health
24 counselor associates, marriage and family therapists, marriage and
25 family therapist associates, social workers, social work associates—
26 advanced, and social work associates—independent clinical under
27 chapter 18.225 RCW;

28 (xi) Persons registered as nursing pool operators under chapter
29 18.52C RCW;

30 (xii) Nursing assistants registered or certified or medication
31 assistants endorsed under chapter 18.88A RCW;

32 (xiii) Dietitians and nutritionists certified under chapter
33 18.138 RCW;

34 (xiv) Substance use disorder professionals, substance use
35 disorder professional trainees, or co-occurring disorder specialists
36 certified under chapter 18.205 RCW;

37 (xv) Sex offender treatment providers and certified affiliate sex
38 offender treatment providers certified under chapter 18.155 RCW;

39 (xvi) Persons licensed and certified under chapter 18.73 RCW or
40 RCW 18.71.205;

1 (xvii) Orthotists and prosthetists licensed under chapter 18.200
2 RCW;

3 (xviii) Surgical technologists registered under chapter 18.215
4 RCW;

5 (xix) Recreational therapists under chapter 18.230 RCW;

6 (xx) Animal massage therapists certified under chapter 18.240
7 RCW;

8 (xxi) Athletic trainers licensed under chapter 18.250 RCW;

9 (xxii) Home care aides certified under chapter 18.88B RCW;

10 (xxiii) Genetic counselors licensed under chapter 18.290 RCW;

11 (xxiv) Reflexologists certified under chapter 18.108 RCW;

12 (xxv) Medical assistants-certified, medical assistants-
13 hemodialysis technician, medical assistants-phlebotomist, forensic
14 phlebotomist, and medical assistants-registered certified and
15 registered under chapter 18.360 RCW;

16 (xxvi) Behavior analysts, assistant behavior analysts, and
17 behavior technicians under chapter 18.380 RCW; (~~and~~)

18 (xxvii) Birth doulas certified under chapter 18.47 RCW; and
19 (xxviii) Certified peer specialists and certified peer specialist
20 trainees under chapter 18.--- RCW (the new chapter created in section
21 22 of this act).

22 (b) The boards and commissions having authority under this
23 chapter are as follows:

24 (i) The podiatric medical board as established in chapter 18.22
25 RCW;

26 (ii) The chiropractic quality assurance commission as established
27 in chapter 18.25 RCW;

28 (iii) The dental quality assurance commission as established in
29 chapter 18.32 RCW governing licenses issued under chapter 18.32 RCW,
30 licenses and registrations issued under chapter 18.260 RCW, and
31 certifications issued under chapter 18.350 RCW;

32 (iv) The board of hearing and speech as established in chapter
33 18.35 RCW;

34 (v) The board of examiners for nursing home administrators as
35 established in chapter 18.52 RCW;

36 (vi) The optometry board as established in chapter 18.54 RCW
37 governing licenses issued under chapter 18.53 RCW;

38 (vii) The board of osteopathic medicine and surgery as
39 established in chapter 18.57 RCW governing licenses issued under
40 chapter 18.57 RCW;

1 (viii) The pharmacy quality assurance commission as established
2 in chapter 18.64 RCW governing licenses issued under chapters 18.64
3 and 18.64A RCW;

4 (ix) The Washington medical commission as established in chapter
5 18.71 RCW governing licenses and registrations issued under chapters
6 18.71 and 18.71A RCW;

7 (x) The board of physical therapy as established in chapter 18.74
8 RCW;

9 (xi) The board of occupational therapy practice as established in
10 chapter 18.59 RCW;

11 (xii) The nursing care quality assurance commission as
12 established in chapter 18.79 RCW governing licenses and registrations
13 issued under that chapter;

14 (xiii) The examining board of psychology and its disciplinary
15 committee as established in chapter 18.83 RCW;

16 (xiv) The veterinary board of governors as established in chapter
17 18.92 RCW;

18 (xv) The board of naturopathy established in chapter 18.36A RCW,
19 governing licenses and certifications issued under that chapter; and

20 (xvi) The board of denturists established in chapter 18.30 RCW.

21 (3) In addition to the authority to discipline license holders,
22 the disciplining authority has the authority to grant or deny
23 licenses. The disciplining authority may also grant a license subject
24 to conditions.

25 (4) All disciplining authorities shall adopt procedures to ensure
26 substantially consistent application of this chapter, the uniform
27 disciplinary act, among the disciplining authorities listed in
28 subsection (2) of this section.

29 **Sec. 19.** RCW 18.130.175 and 2022 c 43 s 10 are each amended to
30 read as follows:

31 (1) In lieu of disciplinary action under RCW 18.130.160 and if
32 the disciplining authority determines that the unprofessional conduct
33 may be the result of an applicable impairing or potentially impairing
34 health condition, the disciplining authority may refer the license
35 holder to a physician health program or a voluntary substance use
36 disorder monitoring program approved by the disciplining authority.

37 The cost of evaluation and treatment shall be the responsibility
38 of the license holder, but the responsibility does not preclude
39 payment by an employer, existing insurance coverage, or other

1 sources. Evaluation and treatment shall be provided by providers
2 approved by the entity or the commission. The disciplining authority
3 may also approve the use of out-of-state programs. Referral of the
4 license holder to the physician health program or voluntary substance
5 use disorder monitoring program shall be done only with the consent
6 of the license holder. Referral to the physician health program or
7 voluntary substance use disorder monitoring program may also include
8 probationary conditions for a designated period of time. If the
9 license holder does not consent to be referred to the program or does
10 not successfully complete the program, the disciplining authority may
11 take appropriate action under RCW 18.130.160 which includes
12 suspension of the license unless or until the disciplining authority,
13 in consultation with the director of the applicable program,
14 determines the license holder is able to practice safely. The
15 secretary shall adopt uniform rules for the evaluation by the
16 disciplining authority of return to substance use or program
17 violation on the part of a license holder in the program. The
18 evaluation shall encourage program participation with additional
19 conditions, in lieu of disciplinary action, when the disciplining
20 authority determines that the license holder is able to continue to
21 practice with reasonable skill and safety.

22 (2) In addition to approving the physician health program or the
23 voluntary substance use disorder monitoring program that may receive
24 referrals from the disciplining authority, the disciplining authority
25 may establish by rule requirements for participation of license
26 holders who are not being investigated or monitored by the
27 disciplining authority. License holders voluntarily participating in
28 the approved programs without being referred by the disciplining
29 authority shall not be subject to disciplinary action under RCW
30 18.130.160 for their impairing or potentially impairing health
31 condition, and shall not have their participation made known to the
32 disciplining authority, if they meet the requirements of this section
33 and the program in which they are participating.

34 (3) The license holder shall sign a waiver allowing the program
35 to release information to the disciplining authority if the licensee
36 does not comply with the requirements of this section or is unable to
37 practice with reasonable skill or safety. The physician health
38 program or voluntary substance use disorder program shall report to
39 the disciplining authority any license holder who fails to comply
40 with the requirements of this section or the program or who, in the

1 opinion of the program, is unable to practice with reasonable skill
2 or safety. License holders shall report to the disciplining authority
3 if they fail to comply with this section or do not complete the
4 program's requirements. License holders may, upon the agreement of
5 the program and disciplining authority, reenter the program if they
6 have previously failed to comply with this section.

7 (4) Program records including, but not limited to, case notes,
8 progress notes, laboratory reports, evaluation and treatment records,
9 electronic and written correspondence within the program, and between
10 the program and the participant or other involved entities including,
11 but not limited to, employers, credentialing bodies, referents, or
12 other collateral sources, relating to license holders referred to or
13 voluntarily participating in approved programs are confidential and
14 exempt from disclosure under chapter 42.56 RCW and shall not be
15 subject to discovery by subpoena or admissible as evidence except:

16 (a) To defend any civil action by a license holder regarding the
17 restriction or revocation of that individual's clinical or staff
18 privileges, or termination of a license holder's employment. In such
19 an action, the program will, upon subpoena issued by either party to
20 the action, and upon the requesting party seeking a protective order
21 for the requested disclosure, provide to both parties of the action
22 written disclosure that includes the following information:

23 (i) Verification of a health care professional's participation in
24 the physician health program or voluntary substance use disorder
25 monitoring program as it relates to aspects of program involvement at
26 issue in the civil action;

27 (ii) The dates of participation;

28 (iii) Whether or not the program identified an impairing or
29 potentially impairing health condition;

30 (iv) Whether the health care professional was compliant with the
31 requirements of the physician health program or voluntary substance
32 use disorder monitoring program; and

33 (v) Whether the health care professional successfully completed
34 the physician health program or voluntary substance use disorder
35 monitoring program; and

36 (b) Records provided to the disciplining authority for cause as
37 described in subsection (3) of this section. Program records relating
38 to license holders mandated to the program, through order or by
39 stipulation, by the disciplining authority or relating to license
40 holders reported to the disciplining authority by the program for

1 cause, must be released to the disciplining authority at the request
2 of the disciplining authority. Records held by the disciplining
3 authority under this section are exempt from chapter 42.56 RCW and
4 are not subject to discovery by subpoena except by the license
5 holder.

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

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

13 (a) The immunity from civil liability provided by this section
14 shall be liberally construed to accomplish the purposes of this
15 section, and applies to both license holders and students and
16 trainees when students and trainees of the applicable professions are
17 served by the program. The persons entitled to immunity shall
18 include:

19 (i) An approved physician health program or voluntary substance
20 use disorder monitoring program;

21 (ii) The professional association affiliated with the program;

22 (iii) Members, employees, or agents of the program or
23 associations;

24 (iv) Persons reporting a license holder as being possibly
25 impaired or providing information about the license holder's
26 impairment; and

27 (v) Professionals supervising or monitoring the course of the
28 program participant's treatment or rehabilitation.

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

33 (c) The immunity provided in this section is in addition to any
34 other immunity provided by law.

35 (7) In the case of a person who is applying to be a substance use
36 disorder professional or substance use disorder professional trainee
37 certified under chapter 18.205 RCW, an agency affiliated counselor
38 registered under chapter 18.19 RCW, or a peer specialist or peer
39 specialist trainee certified under chapter 18.--- RCW (the new
40 chapter created in section 22 of this act), if the person is:

1 (a) Less than one year in recovery from a substance use disorder,
2 the duration of time that the person may be required to participate
3 in an approved substance use disorder monitoring program may not
4 exceed the amount of time necessary for the person to achieve one
5 year in recovery; or

6 (b) At least one year in recovery from a substance use disorder,
7 the person may not be required to participate in the approved
8 substance use disorder monitoring program.

9 ~~((In the case of a person who is applying to be an agency
10 affiliated counselor registered under chapter 18.19 RCW and practices
11 or intends to practice as a peer counselor in an agency, as defined
12 in RCW 18.19.020, if the person is:~~

13 ~~(a) Less than one year in recovery from a substance use disorder,
14 the duration of time that the person may be required to participate
15 in the approved substance use disorder monitoring program may not
16 exceed the amount of time necessary for the person to achieve one
17 year in recovery; or~~

18 ~~(b) At least one year in recovery from a substance use disorder,
19 the person may not be required to participate in the approved
20 substance use disorder monitoring program))~~ The provisions of
21 subsection (7) of this section apply to any person employed as a peer
22 specialist as of July 1, 2025, participating in a program under this
23 section as of July 1, 2025, and applying to become a certified peer
24 specialist under section 7 of this act, regardless of when the
25 person's participation in a program began. To this extent, subsection
26 (7) of this section applies retroactively, but in all other respects
27 it applies prospectively.

28 **Sec. 20.** RCW 43.43.842 and 2021 c 215 s 150 are each amended to
29 read as follows:

30 (1)(a) The secretary of social and health services and the
31 secretary of health shall adopt additional requirements for the
32 licensure or relicensure of agencies, facilities, and licensed
33 individuals who provide care and treatment to vulnerable adults,
34 including nursing pools registered under chapter 18.52C RCW. These
35 additional requirements shall ensure that any person associated with
36 a licensed agency or facility having unsupervised access with a
37 vulnerable adult shall not be the respondent in an active vulnerable
38 adult protection order under chapter 7.105 RCW, nor have been: (i)
39 Convicted of a crime against children or other persons as defined in

1 RCW 43.43.830, except as provided in this section; (ii) convicted of
2 crimes relating to financial exploitation as defined in RCW
3 43.43.830, except as provided in this section; or (iii) found in any
4 disciplinary board final decision to have abused a vulnerable adult
5 as defined in RCW 43.43.830.

6 (b) A person associated with a licensed agency or facility who
7 has unsupervised access with a vulnerable adult shall make the
8 disclosures specified in RCW 43.43.834(2). The person shall make the
9 disclosures in writing, sign, and swear to the contents under penalty
10 of perjury. The person shall, in the disclosures, specify all crimes
11 against children or other persons, all crimes relating to financial
12 exploitation, and all crimes relating to drugs as defined in RCW
13 43.43.830, committed by the person.

14 (2) The rules adopted under this section shall permit the
15 licensee to consider the criminal history of an applicant for
16 employment in a licensed facility when the applicant has one or more
17 convictions for a past offense and:

18 (a) The offense was simple assault, assault in the fourth degree,
19 or the same offense as it may be renamed, and three or more years
20 have passed between the most recent conviction and the date of
21 application for employment;

22 (b) The offense was prostitution, or the same offense as it may
23 be renamed, and three or more years have passed between the most
24 recent conviction and the date of application for employment;

25 (c) The offense was theft in the third degree, or the same
26 offense as it may be renamed, and three or more years have passed
27 between the most recent conviction and the date of application for
28 employment;

29 (d) The offense was theft in the second degree, or the same
30 offense as it may be renamed, and five or more years have passed
31 between the most recent conviction and the date of application for
32 employment;

33 (e) The offense was forgery, or the same offense as it may be
34 renamed, and five or more years have passed between the most recent
35 conviction and the date of application for employment;

36 (f) The department of social and health services reviewed the
37 employee's otherwise disqualifying criminal history through the
38 department of social and health services' background assessment
39 review team process conducted in 2002, and determined that such
40 employee could remain in a position covered by this section; or

1 (g) The otherwise disqualifying conviction or disposition has
2 been the subject of a pardon, annulment, or other equivalent
3 procedure.

4 The offenses set forth in (a) through (g) of this subsection do
5 not automatically disqualify an applicant from employment by a
6 licensee. Nothing in this section may be construed to require the
7 employment of any person against a licensee's judgment.

8 (3) The rules adopted pursuant to subsection (2) of this section
9 may not allow a licensee to automatically deny an applicant with a
10 conviction for an offense set forth in subsection (2) of this section
11 for a position as a substance use disorder professional or substance
12 use disorder professional trainee certified under chapter 18.205 RCW,
13 as an agency affiliated counselor registered under chapter 18.19 RCW
14 practicing as a peer counselor in an agency or facility, or as a peer
15 specialist or peer specialist trainee certified under chapter 18.---
16 RCW (the new chapter created in section 22 of this act), if:

17 (a) At least one year has passed between the applicant's most
18 recent conviction for an offense set forth in subsection (2) of this
19 section and the date of application for employment;

20 (b) The offense was committed as a result of the applicant's
21 substance use or untreated mental health symptoms; and

22 (c) The applicant is at least one year in recovery from a
23 substance use disorder, whether through abstinence or stability on
24 medication-assisted therapy, or in recovery from a mental health
25 disorder.

26 ~~(4) ((The rules adopted pursuant to subsection (2) of this~~
27 ~~section may not allow a licensee to automatically deny an applicant~~
28 ~~with a conviction for an offense set forth in subsection (2) of this~~
29 ~~section for a position as an agency affiliated counselor registered~~
30 ~~under chapter 18.19 RCW practicing as a peer counselor in an agency~~
31 ~~or facility if:~~

32 ~~(a) At least one year has passed between the applicant's most~~
33 ~~recent conviction for an offense set forth in subsection (2) of this~~
34 ~~section and the date of application for employment;~~

35 ~~(b) The offense was committed as a result of the person's~~
36 ~~substance use or untreated mental health symptoms; and~~

37 ~~(c) The applicant is at least one year in recovery from a~~
38 ~~substance use disorder, whether through abstinence or stability on~~
39 ~~medication-assisted therapy, or in recovery from mental health~~
40 ~~challenges.~~

1 ~~(5))~~) In consultation with law enforcement personnel, the
2 secretary of social and health services and the secretary of health
3 shall investigate, or cause to be investigated, the conviction record
4 and the protection proceeding record information under this chapter
5 of the staff of each agency or facility under their respective
6 jurisdictions seeking licensure or relicensure. An individual
7 responding to a criminal background inquiry request from his or her
8 employer or potential employer shall disclose the information about
9 his or her criminal history under penalty of perjury. The secretaries
10 shall use the information solely for the purpose of determining
11 eligibility for licensure or relicensure. Criminal justice agencies
12 shall provide the secretaries such information as they may have and
13 that the secretaries may require for such purpose.

14 **Sec. 21.** RCW 43.70.250 and 2019 c 415 s 966 are each amended to
15 read as follows:

16 (1) It shall be the policy of the state of Washington that the
17 cost of each professional, occupational, or business licensing
18 program be fully borne by the members of that profession, occupation,
19 or business.

20 (2) The secretary shall from time to time establish the amount of
21 all application fees, license fees, registration fees, examination
22 fees, permit fees, renewal fees, and any other fee associated with
23 licensing or regulation of professions, occupations, or businesses
24 administered by the department. Any and all fees or assessments, or
25 both, levied on the state to cover the costs of the operations and
26 activities of the interstate health professions licensure compacts
27 with participating authorities listed under chapter 18.130 RCW shall
28 be borne by the persons who hold licenses issued pursuant to the
29 authority and procedures established under the compacts. In fixing
30 said fees, the secretary shall set the fees for each program at a
31 sufficient level to defray the costs of administering that program
32 and the cost of regulating licensed volunteer medical workers in
33 accordance with RCW 18.130.360, except as provided in RCW 18.79.202.
34 In no case may the secretary (~~increase a licensing fee for an~~
35 ~~ambulatory surgical facility licensed under chapter 70.230 RCW during~~
36 ~~the 2019-2021 fiscal biennium, nor may he or she commence the~~
37 ~~adoption of rules to increase a licensing fee during the 2019-2021~~
38 ~~fiscal biennium)) impose any certification, examination, or renewal
39 fee upon a person seeking certification as a certified peer~~

1 specialist trainee under chapter 18.--- RCW (the new chapter created
2 in section 22 of this act) or, between July 1, 2025, and July 1,
3 2030, impose a certification, examination, or renewal fee of more
4 than \$100 upon any person seeking certification as a certified peer
5 specialist under chapter 18.--- RCW (the new chapter created in
6 section 22 of this act).

7 (3) All such fees shall be fixed by rule adopted by the secretary
8 in accordance with the provisions of the administrative procedure
9 act, chapter 34.05 RCW.

10 NEW SECTION. Sec. 22. Sections 1 through 12 of this act
11 constitute a new chapter in Title 18 RCW.

12 NEW SECTION. Sec. 23. Section 17 of this act expires October 1,
13 2023.

14 NEW SECTION. Sec. 24. Section 18 of this act takes effect
15 October 1, 2023.

16 NEW SECTION. Sec. 25. If specific funding for the purposes of
17 this act, referencing this act by bill or chapter number, is not
18 provided by June 30, 2023, in the omnibus appropriations act, this
19 act is null and void.

Passed by the Senate April 18, 2023.

Passed by the House April 12, 2023.

Approved by the Governor May 15, 2023, with the exception of
certain items that were vetoed.

Filed in Office of Secretary of State May 16, 2023.

Note: Governor's explanation of partial veto is as follows:

"I am returning herewith, without my approval as to Section 4, Second
Substitute Senate Bill No. 5555 entitled:

"AN ACT Relating to addressing the behavioral health workforce
shortage and expanding access to peer services by creating the
profession of certified peer specialists."

This bill is incredibly important for the development of our peer
workforce. Creating the credentialing process is one that we have
done for many professions and it is equally important here.

Section 4 creates a state certified peer specialist advisory
committee. However, though most professions do include an advisory
committee or board, the advisory committee in section 4 goes too far
into the roles and responsibilities of the authorized agency and
places agency responsibilities with an outside entity.

I will note that one of the advisory committee's responsibilities
outlined in section 4 is to advise on rulemaking. I am instructing

the Department of Health to ensure that there is extensive community engagement through the rulemaking process as this new credential is being developed.

For these reasons I have vetoed Section 4 of Second Substitute Senate Bill No. 5555.

With the exception of Section 4, Second Substitute Senate Bill No. 5555 is approved."

--- END ---