

CERTIFICATION OF ENROLLMENT

SUBSTITUTE SENATE BILL 5940

Chapter 217, Laws of 2024

68th Legislature
2024 Regular Session

MEDICAL ASSISTANT-EMT CERTIFICATION

EFFECTIVE DATE: June 6, 2024

Passed by the Senate February 7, 2024
Yeas 49 Nays 0

DENNY HECK

President of the Senate

Passed by the House February 29, 2024
Yeas 96 Nays 0

LAURIE JINKINS

**Speaker of the House of
Representatives**

Approved March 19, 2024 3:18 PM

JAY INSLEE

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 **SUBSTITUTE SENATE BILL 5940** as passed by the Senate and the House of Representatives on the dates hereon set forth.

SARAH BANNISTER

Secretary

FILED

March 21, 2024

**Secretary of State
State of Washington**

SUBSTITUTE SENATE BILL 5940

Passed Legislature - 2024 Regular Session

State of Washington

68th Legislature

2024 Regular Session

By Senate Health & Long Term Care (originally sponsored by Senators Van De Wege, Hasegawa, Keiser, Lovick, Muzzall, and Wagoner)

READ FIRST TIME 01/22/24.

1 AN ACT Relating to creating a medical assistant-EMT
2 certification; amending RCW 18.360.010, 18.360.020, 18.360.030,
3 18.360.040, and 18.360.050; and reenacting and amending RCW
4 18.120.020 and 18.130.040.

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

6 **Sec. 1.** RCW 18.360.010 and 2023 c 134 s 1 are each amended to
7 read as follows:

8 The definitions in this section apply throughout this chapter
9 unless the context clearly requires otherwise.

10 (1) "Administer" means the retrieval of medication, and its
11 application to a patient, as authorized in RCW 18.360.050.

12 (2) "Delegation" means direct authorization granted by a licensed
13 health care practitioner to a medical assistant to perform the
14 functions authorized in this chapter which fall within the scope of
15 practice of the health care provider and the training and experience
16 of the medical assistant.

17 (3) "Department" means the department of health.

18 (4) "Forensic phlebotomist" means a police officer, law
19 enforcement officer, or employee of a correctional facility or
20 detention facility, who is certified under this chapter and meets any
21 additional training and proficiency standards of his or her employer

1 to collect a venous blood sample for forensic testing pursuant to a
2 search warrant, a waiver of the warrant requirement, or exigent
3 circumstances.

4 (5) "Health care practitioner" means:

5 (a) A physician licensed under chapter 18.71 RCW;

6 (b) An osteopathic physician and surgeon licensed under chapter
7 18.57 RCW; or

8 (c) Acting within the scope of their respective licensure, a
9 podiatric physician and surgeon licensed under chapter 18.22 RCW, a
10 registered nurse or advanced registered nurse practitioner licensed
11 under chapter 18.79 RCW, a naturopath licensed under chapter 18.36A
12 RCW, a physician assistant licensed under chapter 18.71A RCW, or an
13 optometrist licensed under chapter 18.53 RCW.

14 (6) "Medical assistant-certified" means a person certified under
15 RCW 18.360.040 who assists a health care practitioner with patient
16 care, executes administrative and clinical procedures, and performs
17 functions as provided in RCW 18.360.050 under the supervision of the
18 health care practitioner.

19 (7) "Medical assistant-EMT" means a person certified under RCW
20 18.360.040 who performs functions as provided in RCW 18.360.050 under
21 the supervision of a health care practitioner and holds: An emergency
22 medical technician certification under RCW 18.73.081; an advanced
23 emergency medical technician certification under RCW 18.71.205; or a
24 paramedic certification under RCW 18.71.205.

25 (8) "Medical assistant-hemodialysis technician" means a person
26 certified under RCW 18.360.040 who performs hemodialysis and other
27 functions pursuant to RCW 18.360.050 under the supervision of a
28 health care practitioner.

29 ((+8)) (9) "Medical assistant-phlebotomist" means a person
30 certified under RCW 18.360.040 who performs capillary, venous, and
31 arterial invasive procedures for blood withdrawal and other functions
32 pursuant to RCW 18.360.050 under the supervision of a health care
33 practitioner.

34 ((+9)) (10) "Medical assistant-registered" means a person
35 registered under RCW 18.360.040 who, pursuant to an endorsement by a
36 health care practitioner, clinic, or group practice, assists a health
37 care practitioner with patient care, executes administrative and
38 clinical procedures, and performs functions as provided in RCW
39 18.360.050 under the supervision of the health care practitioner.

1 (~~(10)~~) (11) "Secretary" means the secretary of the department
2 of health.

3 (~~(11)~~) (12)(a) "Supervision" means supervision of procedures
4 permitted pursuant to this chapter by a health care practitioner who
5 is physically present and is immediately available in the facility,
6 except as provided in (b) and (c) of this subsection.

7 (b) The health care practitioner does not need to be present
8 during procedures to withdraw blood, administer vaccines, or obtain
9 specimens for or perform diagnostic testing, but must be immediately
10 available.

11 (c) During a telemedicine visit, supervision over a medical
12 assistant assisting a health care practitioner with the telemedicine
13 visit may be provided through interactive audio and video
14 telemedicine technology.

15 **Sec. 2.** RCW 18.360.020 and 2017 c 336 s 15 are each amended to
16 read as follows:

17 (1) No person may practice as a medical assistant-certified,
18 medical assistant-hemodialysis technician, medical assistant-
19 phlebotomist, medical assistant-EMT, or forensic phlebotomist unless
20 he or she is certified under RCW 18.360.040.

21 (2) No person may practice as a medical assistant-registered
22 unless he or she is registered under RCW 18.360.040.

23 **Sec. 3.** RCW 18.360.030 and 2019 c 55 s 8 are each amended to
24 read as follows:

25 (1) The secretary shall adopt rules specifying the minimum
26 qualifications for a medical assistant-certified, medical assistant-
27 hemodialysis technician, medical assistant-phlebotomist, medical
28 assistant-EMT, and forensic phlebotomist.

29 (a) The qualifications for a medical assistant-hemodialysis
30 technician must be equivalent to the qualifications for hemodialysis
31 technicians regulated pursuant to chapter 18.135 RCW as of January 1,
32 2012.

33 (b) The qualifications for a forensic phlebotomist must include
34 training consistent with the occupational safety and health
35 administration guidelines and must include between twenty and thirty
36 hours of work in a clinical setting with the completion of more than
37 one hundred successful venipunctures. The secretary may not require

1 more than ((forty)) 40 hours of classroom training for initial
2 training, which may include online preclass homework.

3 (c) The qualifications for a medical assistant-EMT must be
4 consistent with the qualifications for the emergency medical
5 technician certification pursuant to RCW 18.73.081; the advanced
6 emergency medical technician certification pursuant to RCW 18.71.205;
7 or the paramedic certification pursuant to RCW 18.71.205. The
8 secretary must ensure that any person with an emergency medical
9 technician, advanced emergency medical technician, or paramedic
10 certification is eligible for a medical assistant-EMT certification
11 with no additional training or examination requirements if the
12 certification for the emergency medical technician, advanced
13 emergency medical technician, or a paramedic is in good standing.

14 (2) The secretary shall adopt rules that establish the minimum
15 requirements necessary for a health care practitioner, clinic, or
16 group practice to endorse a medical assistant as qualified to perform
17 the duties authorized by this chapter and be able to file an
18 attestation of that endorsement with the department.

19 ~~((3) The Washington medical commission, the board of osteopathic~~
20 ~~medicine and surgery, the podiatric medical board, the nursing care~~
21 ~~quality assurance commission, the board of naturopathy, and the~~
22 ~~optometry board shall each review and identify other specialty~~
23 ~~assistive personnel not included in this chapter and the tasks they~~
24 ~~perform. The department of health shall compile the information from~~
25 ~~each disciplining authority listed in this subsection and submit the~~
26 ~~compiled information to the legislature no later than December 15,~~
27 ~~2012.))~~

28 **Sec. 4.** RCW 18.360.040 and 2023 c 134 s 2 are each amended to
29 read as follows:

30 (1)(a) The secretary shall issue a certification as a medical
31 assistant-certified to any person who has satisfactorily completed a
32 medical assistant training program approved by the secretary, passed
33 an examination approved by the secretary, and met any additional
34 qualifications established under RCW 18.360.030.

35 (b) The secretary shall issue an interim certification to any
36 person who has met all of the qualifications in (a) of this
37 subsection, except for the passage of the examination. A person
38 holding an interim permit possesses the full scope of practice of a
39 medical assistant-certified. The interim permit expires upon passage

1 of the examination and issuance of a certification, or after one
2 year, whichever occurs first, and may not be renewed.

3 (2) (a) The secretary shall issue a certification as a medical
4 assistant-hemodialysis technician to any person who meets the
5 qualifications for a medical assistant-hemodialysis technician
6 established under RCW 18.360.030.

7 (b) In order to allow sufficient time for the processing of a
8 medical assistant-hemodialysis technician certification, applicants
9 for that credential who have completed their training program are
10 allowed to continue to work at dialysis facilities, under the level
11 of supervision required for the training program, for a period of up
12 to 180 days after filing their application, to facilitate patient
13 continuity of care.

14 (3) (a) The secretary shall issue a certification as a medical
15 assistant-phlebotomist to any person who meets the qualifications for
16 a medical assistant-phlebotomist established under RCW 18.360.030.

17 (b) In order to allow sufficient time for the processing of a
18 medical assistant-phlebotomist certification, applicants for that
19 credential who have completed their training program are allowed to
20 work, under the level of supervision required for the training
21 program, for a period of up to 180 days after filing their
22 application, to facilitate access to services.

23 (4) The secretary shall issue a certification as a medical
24 assistant-EMT to any person who meets the qualifications for a
25 medical assistant-EMT established under RCW 18.360.030.

26 (5) The secretary shall issue a certification as a forensic
27 phlebotomist to any person who meets the qualifications for a
28 forensic phlebotomist established under RCW 18.360.030.

29 ((+5+)) (6) (a) The secretary shall issue a registration as a
30 medical assistant-registered to any person who has a current
31 endorsement from a health care practitioner, clinic, or group
32 practice.

33 (b) In order to be endorsed under this subsection ((+5+)) (6), a
34 person must:

35 (i) Be endorsed by a health care practitioner, clinic, or group
36 practice that meets the qualifications established under RCW
37 18.360.030; and

38 (ii) Have a current attestation of his or her endorsement to
39 perform specific medical tasks signed by a supervising health care
40 practitioner filed with the department. A medical assistant-

1 registered may only perform the medical tasks listed in his or her
2 current attestation of endorsement.

3 (c) A registration based on an endorsement by a health care
4 practitioner, clinic, or group practice is not transferable to
5 another health care practitioner, clinic, or group practice.

6 (d) An applicant for registration as a medical assistant-
7 registered who applies to the department within seven days of
8 employment by the endorsing health care practitioner, clinic, or
9 group practice may work as a medical assistant-registered for up to
10 sixty days while the application is processed. The applicant must
11 stop working on the sixtieth day of employment if the registration
12 has not been granted for any reason.

13 ~~((+6))~~ (7) A certification issued under subsections (1) through
14 (3) of this section is transferable between different practice
15 settings. A certification under subsection (4) of this section is
16 transferable only between hospitals licensed under chapter 70.41 RCW.
17 A certification under subsection ~~((+4))~~ (5) of this section is
18 transferable between law enforcement agencies.

19 **Sec. 5.** RCW 18.360.050 and 2023 c 134 s 3 are each amended to
20 read as follows:

21 (1) A medical assistant-certified may perform the following
22 duties delegated by, and under the supervision of, a health care
23 practitioner:

24 (a) Fundamental procedures:

25 (i) Wrapping items for autoclaving;

26 (ii) Procedures for sterilizing equipment and instruments;

27 (iii) Disposing of biohazardous materials; and

28 (iv) Practicing standard precautions.

29 (b) Clinical procedures:

30 (i) Performing aseptic procedures in a setting other than a
31 hospital licensed under chapter 70.41 RCW;

32 (ii) Preparing of and assisting in sterile procedures in a
33 setting other than a hospital under chapter 70.41 RCW;

34 (iii) Taking vital signs;

35 (iv) Preparing patients for examination;

36 (v) Capillary blood withdrawal, venipuncture, and intradermal,
37 subcutaneous, and intramuscular injections; and

38 (vi) Observing and reporting patients' signs or symptoms.

39 (c) Specimen collection:

1 (i) Capillary puncture and venipuncture;
2 (ii) Obtaining specimens for microbiological testing; and
3 (iii) Instructing patients in proper technique to collect urine
4 and fecal specimens.
5 (d) Diagnostic testing:
6 (i) Electrocardiography;
7 (ii) Respiratory testing; and
8 (iii)(A) Tests waived under the federal clinical laboratory
9 improvement amendments program on July 1, 2013. The department shall
10 periodically update the tests authorized under this subsection (1)(d)
11 based on changes made by the federal clinical laboratory improvement
12 amendments program; and
13 (B) Moderate complexity tests if the medical assistant-certified
14 meets standards for personnel qualifications and responsibilities in
15 compliance with federal regulation for nonwaived testing.
16 (e) Patient care:
17 (i) Telephone and in-person screening limited to intake and
18 gathering of information without requiring the exercise of judgment
19 based on clinical knowledge;
20 (ii) Obtaining vital signs;
21 (iii) Obtaining and recording patient history;
22 (iv) Preparing and maintaining examination and treatment areas;
23 (v) Preparing patients for, and assisting with, routine and
24 specialty examinations, procedures, treatments, and minor office
25 surgeries;
26 (vi) Maintaining medication and immunization records; and
27 (vii) Screening and following up on test results as directed by a
28 health care practitioner.
29 (f)(i) Administering medications. A medical assistant-certified
30 may only administer medications if the drugs are:
31 (A) Administered only by unit or single dosage, or by a dosage
32 calculated and verified by a health care practitioner. For purposes
33 of this section, a combination or multidose vaccine shall be
34 considered a unit dose;
35 (B) Limited to legend drugs, vaccines, and Schedule III-V
36 controlled substances as authorized by a health care practitioner
37 under the scope of his or her license and consistent with rules
38 adopted by the secretary under (f)(ii) of this subsection; and
39 (C) Administered pursuant to a written order from a health care
40 practitioner.

1 (ii) A medical assistant-certified may not administer
2 experimental drugs or chemotherapy agents. The secretary may, by
3 rule, further limit the drugs that may be administered under this
4 subsection (1)(f). The rules adopted under this subsection must limit
5 the drugs based on risk, class, or route.

6 (g) Intravenous injections. A medical assistant-certified may
7 establish intravenous lines for diagnostic or therapeutic purposes,
8 without administering medications, under the supervision of a health
9 care practitioner, and administer intravenous injections for
10 diagnostic or therapeutic agents under the direct visual supervision
11 of a health care practitioner if the medical assistant-certified
12 meets minimum standards established by the secretary in rule. The
13 minimum standards must be substantially similar to the qualifications
14 for category D and F health care assistants as they exist on July 1,
15 2013.

16 (h) Urethral catheterization when appropriately trained.

17 (2) A medical assistant-hemodialysis technician may perform
18 hemodialysis when delegated and supervised by a health care
19 practitioner. A medical assistant-hemodialysis technician may also
20 administer drugs and oxygen to a patient when delegated and
21 supervised by a health care practitioner and pursuant to rules
22 adopted by the secretary.

23 (3) A medical assistant-phlebotomist may perform:

24 (a) Capillary, venous, or arterial invasive procedures for blood
25 withdrawal when delegated and supervised by a health care
26 practitioner and pursuant to rules adopted by the secretary;

27 (b) Tests waived under the federal clinical laboratory
28 improvement amendments program on July 1, 2013. The department shall
29 periodically update the tests authorized under this section based on
30 changes made by the federal clinical laboratory improvement
31 amendments program;

32 (c) Moderate and high complexity tests if the medical assistant-
33 phlebotomist meets standards for personnel qualifications and
34 responsibilities in compliance with federal regulation for nonwaived
35 testing; and

36 (d) Electrocardiograms.

37 (4) A medical assistant-registered may perform the following
38 duties delegated by, and under the supervision of, a health care
39 practitioner:

40 (a) Fundamental procedures:

1 (i) Wrapping items for autoclaving;
2 (ii) Procedures for sterilizing equipment and instruments;
3 (iii) Disposing of biohazardous materials; and
4 (iv) Practicing standard precautions.
5 (b) Clinical procedures:
6 (i) Preparing for sterile procedures;
7 (ii) Taking vital signs;
8 (iii) Preparing patients for examination; and
9 (iv) Observing and reporting patients' signs or symptoms.
10 (c) Specimen collection:
11 (i) Obtaining specimens for microbiological testing; and
12 (ii) Instructing patients in proper technique to collect urine
13 and fecal specimens.
14 (d) Patient care:
15 (i) Telephone and in-person screening limited to intake and
16 gathering of information without requiring the exercise of judgment
17 based on clinical knowledge;
18 (ii) Obtaining vital signs;
19 (iii) Obtaining and recording patient history;
20 (iv) Preparing and maintaining examination and treatment areas;
21 (v) Preparing patients for, and assisting with, routine and
22 specialty examinations, procedures, treatments, and minor office
23 surgeries, including those with minimal sedation. The department may,
24 by rule, prohibit duties authorized under this subsection (4)(d)(v)
25 if performance of those duties by a medical assistant-registered
26 would pose an unreasonable risk to patient safety;
27 (vi) Maintaining medication and immunization records; and
28 (vii) Screening and following up on test results as directed by a
29 health care practitioner.
30 (e) Diagnostic testing and electrocardiography.
31 (f)(i) Tests waived under the federal clinical laboratory
32 improvement amendments program on July 1, 2013. The department shall
33 periodically update the tests authorized under subsection (1)(d) of
34 this section based on changes made by the federal clinical laboratory
35 improvement amendments program.
36 (ii) Moderate complexity tests if the medical assistant-
37 registered meets standards for personnel qualifications and
38 responsibilities in compliance with federal regulation for nonwaived
39 testing.

1 (g) Administering eye drops, topical ointments, and vaccines,
2 including combination or multidose vaccines.

3 (h) Urethral catheterization when appropriately trained.

4 (i) Administering medications:

5 (i) A medical assistant-registered may only administer
6 medications if the drugs are:

7 (A) Administered only by unit or single dosage, or by a dosage
8 calculated and verified by a health care practitioner. For purposes
9 of this section, a combination or multidose vaccine shall be
10 considered a unit dose;

11 (B) Limited to legend drugs, vaccines, and Schedule III through V
12 controlled substances as authorized by a health care practitioner
13 under the scope of his or her license and consistent with rules
14 adopted by the secretary under (i)(ii) of this subsection; and

15 (C) Administered pursuant to a written order from a health care
16 practitioner.

17 (ii) A medical assistant-registered may only administer
18 medication for intramuscular injections. A medical assistant-
19 registered may not administer experimental drugs or chemotherapy
20 agents. The secretary may, by rule, further limit the drugs that may
21 be administered under this subsection (4)(i). The rules adopted under
22 this subsection must limit the drugs based on risk, class, or route.

23 (j) Intramuscular injections. A medical assistant-registered may
24 administer intramuscular injections for diagnostic or therapeutic
25 agents under the immediate supervision of a health care practitioner
26 if the medical assistant-registered meets minimum standards
27 established by the secretary in rule.

28 (5)(a) A medical assistant-EMT may perform the following duties
29 delegated by, and under the supervision of, a health care
30 practitioner if the duties are within the scope, training, and
31 endorsements of the medical assistant-EMT's emergency medical
32 technician, advanced emergency medical technician, or paramedic
33 certification:

34 (i) Fundamental procedures:

35 (A) Disposing of biohazardous materials; and

36 (B) Practicing standard precautions;

37 (ii) Clinical procedures:

38 (A) Taking vital signs;

39 (B) Preparing patients for examination;

40 (C) Observing and reporting patients' signs or symptoms;

1 (D) Simple eye irrigation;
2 (E) Hemorrhage control with direct pressure or hemostatic gauze;
3 (F) Spinal and extremity motion restriction and immobilization;
4 (G) Oxygen administration;
5 (H) Airway maintenance, stabilization, and suctioning;
6 (I) Cardiopulmonary resuscitation; and
7 (J) Use of automated external defibrillators and semiautomated
8 external defibrillators;
9 (iii) Specimen collection:
10 (A) Capillary puncture and venipuncture; and
11 (B) Instructing patients in proper technique to collect urine and
12 fecal specimens;
13 (iv) Diagnostic testing:
14 (A) Electrocardiography; and
15 (B) Respiratory testing, including nasopharyngeal swabbing for
16 COVID-19;
17 (v) Patient care:
18 (A) Telephone and in-person screening, limited to intake and
19 gathering of information without requiring the exercise of judgment
20 based on clinical knowledge;
21 (B) Obtaining vital signs;
22 (C) Obtaining and recording patient history; and
23 (D) Preparing and maintaining examination and treatment areas;
24 (vi) Administering medications: A medical assistant-EMT may only
25 administer medications if the drugs are:
26 (A) Administered only by unit or single dosage, or by a dosage
27 calculated and verified by a health care practitioner. For purposes
28 of this subsection, a combination or multidose vaccine shall be
29 considered a unit dose;
30 (B) Limited to vaccines, opioid antagonists, and oral glucose, as
31 authorized by a health care practitioner under the scope of his or
32 her license and consistent with rules adopted by the secretary under
33 (b) of this subsection; and
34 (C) Administered pursuant to a written order from a health care
35 practitioner; and
36 (vii) Establishing intravenous lines: A medical assistant-EMT may
37 establish intravenous lines for diagnostic or therapeutic purposes,
38 without administering medications, and remove intravenous lines under
39 the supervision of a health care practitioner.

1 (b) The secretary may, by rule, further limit the drugs that may
2 be administered under this subsection. The rules adopted under this
3 subsection must limit the drugs based on risk, class, or route.

4 **Sec. 6.** RCW 18.120.020 and 2023 c 460 s 14 and 2023 c 175 s 9
5 are each reenacted and amended to read as follows:

6 The definitions in this section apply throughout this chapter
7 unless the context clearly requires otherwise.

8 (1) "Applicant group" includes any health professional group or
9 organization, any individual, or any other interested party which
10 proposes that any health professional group not presently regulated
11 be regulated or which proposes to substantially increase the scope of
12 practice of the profession.

13 (2) "Certificate" and "certification" mean a voluntary process by
14 which a statutory regulatory entity grants recognition to an
15 individual who (a) has met certain prerequisite qualifications
16 specified by that regulatory entity, and (b) may assume or use
17 "certified" in the title or designation to perform prescribed health
18 professional tasks.

19 (3) "Grandfather clause" means a provision in a regulatory
20 statute applicable to practitioners actively engaged in the regulated
21 health profession prior to the effective date of the regulatory
22 statute which exempts the practitioners from meeting the prerequisite
23 qualifications set forth in the regulatory statute to perform
24 prescribed occupational tasks.

25 (4) "Health professions" means and includes the following health
26 and health-related licensed or regulated professions and occupations:
27 Podiatric medicine and surgery under chapter 18.22 RCW; chiropractic
28 under chapter 18.25 RCW; dental hygiene under chapter 18.29 RCW;
29 dentistry under chapter 18.32 RCW; denturism under chapter 18.30 RCW;
30 dental anesthesia assistants under chapter 18.350 RCW; dispensing
31 opticians under chapter 18.34 RCW; hearing instruments under chapter
32 18.35 RCW; naturopaths under chapter 18.36A RCW; embalming and
33 funeral directing under chapter 18.39 RCW; midwifery under chapter
34 18.50 RCW; nursing home administration under chapter 18.52 RCW;
35 optometry under chapters 18.53 and 18.54 RCW; ocularists under
36 chapter 18.55 RCW; osteopathic medicine and surgery under chapter
37 18.57 RCW; pharmacy under chapters 18.64 and 18.64A RCW; medicine
38 under chapters 18.71 and 18.71A RCW; emergency medicine under chapter
39 18.73 RCW; physical therapy under chapter 18.74 RCW; practical nurses

1 under chapter 18.79 RCW; psychologists under chapter 18.83 RCW;
2 registered nurses under chapter 18.79 RCW; occupational therapists
3 licensed under chapter 18.59 RCW; respiratory care practitioners
4 licensed under chapter 18.89 RCW; veterinarians and veterinary
5 technicians under chapter 18.92 RCW; massage therapists under chapter
6 18.108 RCW; acupuncturists or acupuncture and Eastern medicine
7 practitioners licensed under chapter 18.06 RCW; persons registered
8 under chapter 18.19 RCW; persons licensed as mental health
9 counselors, marriage and family therapists, and social workers under
10 chapter 18.225 RCW; dietitians and nutritionists certified by chapter
11 18.138 RCW; radiologic technicians under chapter 18.84 RCW; nursing
12 assistants registered or certified under chapter 18.88A RCW;
13 reflexologists certified under chapter 18.108 RCW; medical
14 assistants-certified, medical assistants-hemodialysis technician,
15 medical assistants-phlebotomist, forensic phlebotomist, medical
16 assistant-EMT, and medical assistants-registered certified and
17 registered under chapter 18.360 RCW; licensed behavior analysts,
18 licensed assistant behavior analysts, and certified behavior
19 technicians under chapter 18.380 RCW; music therapists licensed under
20 chapter 18.233 RCW; and dental therapists licensed under chapter
21 18.265 RCW.

22 (5) "Inspection" means the periodic examination of practitioners
23 by a state agency in order to ascertain whether the practitioners'
24 occupation is being carried out in a fashion consistent with the
25 public health, safety, and welfare.

26 (6) "Legislative committees of reference" means the standing
27 legislative committees designated by the respective rules committees
28 of the senate and house of representatives to consider proposed
29 legislation to regulate health professions not previously regulated.

30 (7) "License," "licensing," and "licensure" mean permission to
31 engage in a health profession which would otherwise be unlawful in
32 the state in the absence of the permission. A license is granted to
33 those individuals who meet prerequisite qualifications to perform
34 prescribed health professional tasks and for the use of a particular
35 title.

36 (8) "Practitioner" means an individual who (a) has achieved
37 knowledge and skill by practice, and (b) is actively engaged in a
38 specified health profession.

39 (9) "Professional license" means an individual, nontransferable
40 authorization to carry on a health activity based on qualifications

1 which include: (a) Graduation from an accredited or approved program,
2 and (b) acceptable performance on a qualifying examination or series
3 of examinations.

4 (10) "Public member" means an individual who is not, and never
5 was, a member of the health profession being regulated or the spouse
6 of a member, or an individual who does not have and never has had a
7 material financial interest in either the rendering of the health
8 professional service being regulated or an activity directly related
9 to the profession being regulated.

10 (11) "Registration" means the formal notification which, prior to
11 rendering services, a practitioner shall submit to a state agency
12 setting forth the name and address of the practitioner; the location,
13 nature and operation of the health activity to be practiced; and, if
14 required by the regulatory entity, a description of the service to be
15 provided.

16 (12) "Regulatory entity" means any board, commission, agency,
17 division, or other unit or subunit of state government which
18 regulates one or more professions, occupations, industries,
19 businesses, or other endeavors in this state.

20 (13) "State agency" includes every state office, department,
21 board, commission, regulatory entity, and agency of the state, and,
22 where provided by law, programs and activities involving less than
23 the full responsibility of a state agency.

24 **Sec. 7.** RCW 18.130.040 and 2023 c 469 s 18, 2023 c 460 s 15,
25 2023 c 425 s 27, 2023 c 270 s 14, 2023 c 175 s 11, and 2023 c 123 s
26 21 are each reenacted and amended to read as follows:

27 (1) This chapter applies only to the secretary and the boards and
28 commissions having jurisdiction in relation to the professions
29 licensed under the chapters specified in this section. This chapter
30 does not apply to any business or profession not licensed under the
31 chapters specified in this section.

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

34 (i) Dispensing opticians licensed and designated apprentices
35 under chapter 18.34 RCW;

36 (ii) Midwives licensed under chapter 18.50 RCW;

37 (iii) Ocularists licensed under chapter 18.55 RCW;

38 (iv) Massage therapists and businesses licensed under chapter
39 18.108 RCW;

1 (v) Dental hygienists licensed under chapter 18.29 RCW;
2 (vi) Acupuncturists or acupuncture and Eastern medicine
3 practitioners licensed under chapter 18.06 RCW;
4 (vii) Radiologic technologists certified and X-ray technicians
5 registered under chapter 18.84 RCW;
6 (viii) Respiratory care practitioners licensed under chapter
7 18.89 RCW;
8 (ix) Hypnotherapists registered, agency affiliated counselors
9 registered, certified, or licensed, and advisors and counselors
10 certified under chapter 18.19 RCW;
11 (x) Persons licensed as mental health counselors, mental health
12 counselor associates, marriage and family therapists, marriage and
13 family therapist associates, social workers, social work associates—
14 advanced, and social work associates—independent clinical under
15 chapter 18.225 RCW;
16 (xi) Persons registered as nursing pool operators under chapter
17 18.52C RCW;
18 (xii) Nursing assistants registered or certified or medication
19 assistants endorsed under chapter 18.88A RCW;
20 (xiii) Dietitians and nutritionists certified under chapter
21 18.138 RCW;
22 (xiv) Substance use disorder professionals, substance use
23 disorder professional trainees, or co-occurring disorder specialists
24 certified under chapter 18.205 RCW;
25 (xv) Sex offender treatment providers and certified affiliate sex
26 offender treatment providers certified under chapter 18.155 RCW;
27 (xvi) Persons licensed and certified under chapter 18.73 RCW or
28 RCW 18.71.205;
29 (xvii) Orthotists and prosthetists licensed under chapter 18.200
30 RCW;
31 (xviii) Surgical technologists registered under chapter 18.215
32 RCW;
33 (xix) Recreational therapists under chapter 18.230 RCW;
34 (xx) Animal massage therapists certified under chapter 18.240
35 RCW;
36 (xxi) Athletic trainers licensed under chapter 18.250 RCW;
37 (xxii) Home care aides certified under chapter 18.88B RCW;
38 (xxiii) Genetic counselors licensed under chapter 18.290 RCW;
39 (xxiv) Reflexologists certified under chapter 18.108 RCW;

1 (xxv) Medical assistants-certified, medical assistants-
2 hemodialysis technician, medical assistants-phlebotomist, forensic
3 phlebotomist, medical-assistant-EMT, and medical assistants-
4 registered certified and registered under chapter 18.360 RCW;

5 (xxvi) Behavior analysts, assistant behavior analysts, and
6 behavior technicians under chapter 18.380 RCW;

7 (xxvii) Birth doulas certified under chapter 18.47 RCW;

8 (xxviii) Music therapists licensed under chapter 18.233 RCW;

9 (xxix) Behavioral health support specialists certified under
10 chapter 18.227 RCW; and

11 (xxx) Certified peer specialists and certified peer specialist
12 trainees under chapter 18.420 RCW.

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

15 (i) The podiatric medical board as established in chapter 18.22
16 RCW;

17 (ii) The chiropractic quality assurance commission as established
18 in chapter 18.25 RCW;

19 (iii) The dental quality assurance commission as established in
20 chapter 18.32 RCW governing licenses issued under chapter 18.32 RCW,
21 licenses and registrations issued under chapter 18.260 RCW, licenses
22 issued under chapter 18.265 RCW, and certifications issued under
23 chapter 18.350 RCW;

24 (iv) The board of hearing and speech as established in chapter
25 18.35 RCW;

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

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

30 (vii) The board of osteopathic medicine and surgery as
31 established in chapter 18.57 RCW governing licenses issued under
32 chapter 18.57 RCW;

33 (viii) The pharmacy quality assurance commission as established
34 in chapter 18.64 RCW governing licenses issued under chapters 18.64
35 and 18.64A RCW;

36 (ix) The Washington medical commission as established in chapter
37 18.71 RCW governing licenses and registrations issued under chapters
38 18.71 and 18.71A RCW;

39 (x) The board of physical therapy as established in chapter 18.74
40 RCW;

- 1 (xi) The board of occupational therapy practice as established in
2 chapter 18.59 RCW;
- 3 (xii) The board of nursing as established in chapter 18.79 RCW
4 governing licenses and registrations issued under that chapter and
5 under chapter 18.80 RCW;
- 6 (xiii) The examining board of psychology and its disciplinary
7 committee as established in chapter 18.83 RCW;
- 8 (xiv) The veterinary board of governors as established in chapter
9 18.92 RCW;
- 10 (xv) The board of naturopathy established in chapter 18.36A RCW,
11 governing licenses and certifications issued under that chapter; and
- 12 (xvi) The board of denturists established in chapter 18.30 RCW.
- 13 (3) In addition to the authority to discipline license holders,
14 the disciplining authority has the authority to grant or deny
15 licenses. The disciplining authority may also grant a license subject
16 to conditions.
- 17 (4) All disciplining authorities shall adopt procedures to ensure
18 substantially consistent application of this chapter, the uniform
19 disciplinary act, among the disciplining authorities listed in
20 subsection (2) of this section.

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