
SUBSTITUTE HOUSE BILL 1718

State of Washington

69th Legislature

2025 Regular Session

By House Health Care & Wellness (originally sponsored by Representatives Thai, Shavers, Parshley, Zahn, and Scott)

READ FIRST TIME 02/21/25.

1 AN ACT Relating to well-being programs for certain health care
2 professionals; amending RCW 18.130.020 and 18.130.070; and adding a
3 new section to chapter 18.130 RCW.

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

5 **Sec. 1.** RCW 18.130.020 and 2018 c 300 s 3 are each amended to
6 read as follows:

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

9 (1) "Board" means any of those boards specified in RCW
10 18.130.040.

11 (2) "Clinical expertise" means the proficiency or judgment that a
12 license holder in a particular profession acquires through clinical
13 experience or clinical practice and that is not possessed by a lay
14 person.

15 (3) "Commission" means any of the commissions specified in RCW
16 18.130.040.

17 (4)(a) "Conversion therapy" means a regime that seeks to change
18 an individual's sexual orientation or gender identity. The term
19 includes efforts to change behaviors or gender expressions, or to
20 eliminate or reduce sexual or romantic attractions or feelings toward

1 individuals of the same sex. The term includes, but is not limited
2 to, practices commonly referred to as "reparative therapy."

3 (b) "Conversion therapy" does not include counseling or
4 psychotherapies that provide acceptance, support, and understanding
5 of clients or the facilitation of clients' coping, social support,
6 and identity exploration and development that do not seek to change
7 sexual orientation or gender identity.

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

9 (6) "Disciplinary action" means sanctions identified in RCW
10 18.130.160.

11 (7) "Disciplining authority" means the agency, board, or
12 commission having the authority to take disciplinary action against a
13 holder of, or applicant for, a professional or business license upon
14 a finding of a violation of this chapter or a chapter specified under
15 RCW 18.130.040.

16 (8) "Health agency" means city and county health departments and
17 the department of health.

18 (9) "License," "licensing," and "licensure" shall be deemed
19 equivalent to the terms "license," "licensing," "licensure,"
20 "certificate," "certification," and "registration" as those terms are
21 defined in RCW 18.120.020.

22 (10)(a) "Physician well-being program" means a formal program
23 established for the purpose of addressing issues related to career
24 fatigue and well-being in physicians licensed under chapter 18.71
25 RCW, osteopathic physicians and surgeons licensed under chapter 18.57
26 RCW, and physician assistants licensed under chapter 18.71A RCW,
27 that:

28 (i) Uses one-on-one, peer-to-peer interactions and connects
29 participants to physical and behavioral health resources and
30 professional supports when appropriate;

31 (ii) Is limited to no more than three sessions per participant
32 every 12 months;

33 (iii) May include discussions pertaining to general career
34 fatigue and well-being arising from the physician's or physician
35 assistant's professional obligations, but not for other purposes such
36 as evaluation, discipline, quality improvement, or the identification
37 and prevention of medical malpractice;

38 (iv) Is established in writing and contracted for, in advance of
39 any peer-to-peer interactions or referrals, by an employer of
40 physicians and physician assistants, a nonprofit professional medical

1 organization representing a specialty of physicians, or a statewide
2 organization representing physicians and physician assistants;

3 (v) Does not allow as participants any person employed by, or
4 with a financial ownership interest in, the program; and

5 (vi) Does not include the monitoring of physicians or physician
6 assistants who may be unable to practice medicine with reasonable
7 skill and safety.

8 (b) A quality improvement plan established under RCW 43.70.510 or
9 70.41.200 is not a physician well-being program for purposes of this
10 section. RCW 43.70.510 and 70.41.200 therefore do not apply to a
11 physician well-being program established under this section.

12 (11) "Practice review" means an investigative audit of records
13 related to the complaint, without prior identification of specific
14 patient or consumer names, or an assessment of the conditions,
15 circumstances, and methods of the professional's practice related to
16 the complaint, to determine whether unprofessional conduct may have
17 been committed.

18 ~~((11))~~ (12) "Secretary" means the secretary of health or the
19 secretary's designee.

20 ~~((12))~~ (13) "Standards of practice" means the care, skill, and
21 learning associated with the practice of a profession.

22 ~~((13))~~ (14) "Unlicensed practice" means:

23 (a) Practicing a profession or operating a business identified in
24 RCW 18.130.040 without holding a valid, unexpired, unrevoked, and
25 unsuspended license to do so; or

26 (b) Representing to a consumer, through offerings,
27 advertisements, or use of a professional title or designation, that
28 the individual is qualified to practice a profession or operate a
29 business identified in RCW 18.130.040, without holding a valid,
30 unexpired, unrevoked, and unsuspended license to do so.

31 **Sec. 2.** RCW 18.130.070 and 2022 c 43 s 9 are each amended to
32 read as follows:

33 (1)(a) The secretary shall adopt rules requiring every license
34 holder to report to the appropriate disciplining authority any
35 conviction, determination, or finding that another license holder has
36 committed an act which constitutes unprofessional conduct, or to
37 report information to the disciplining authority, physician health
38 program, or voluntary substance use disorder monitoring program
39 approved by the disciplining authority, which indicates that the

1 other license holder may not be able to practice his or her
2 profession with reasonable skill and safety to consumers as a result
3 of a mental or physical condition.

4 (b) The secretary may adopt rules to require other persons,
5 including corporations, organizations, health care facilities,
6 physician health programs, or voluntary substance use disorder
7 monitoring programs approved by the disciplining authority, and state
8 or local government agencies, to report:

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

12 (ii) Information to the disciplining authority, physician health
13 program, or voluntary substance use disorder monitoring program
14 approved by the disciplining authority, which indicates that the
15 license holder may not be able to practice his or her profession with
16 reasonable skill and safety to consumers as a result of a mental or
17 physical condition.

18 (c) If a report has been made by a hospital to the department
19 pursuant to RCW 70.41.210 or by an ambulatory surgical facility
20 pursuant to RCW 70.230.110, a report to the disciplining authority is
21 not required. To facilitate meeting the intent of this section, the
22 cooperation of agencies of the federal government is requested by
23 reporting any conviction, determination, or finding that a federal
24 employee or contractor regulated by the disciplining authorities
25 enumerated in this chapter has committed an act which constituted
26 unprofessional conduct and reporting any information which indicates
27 that a federal employee or contractor regulated by the disciplining
28 authorities enumerated in this chapter may not be able to practice
29 his or her profession with reasonable skill and safety as a result of
30 a mental or physical condition.

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

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

38 (ii) A physician health program or voluntary substance use
39 disorder monitoring program approved by a disciplining authority
40 under RCW 18.130.175 if the license holder is currently enrolled in

1 the program, so long as the license holder actively participates in
2 the program and the license holder's impairment does not constitute a
3 clear and present danger to the public health, safety, or welfare; or
4 (iii) A physician well-being program, so long as the license
5 holder is competent to practice with reasonable skill and safety. If
6 the license holder is not competent to practice with reasonable skill
7 and safety, or if a patient has been harmed, the license holder shall
8 be reported by the physician well-being program medical director or
9 other licensee to the disciplining authority according to
10 requirements established and adopted in rule by the Washington
11 medical commission or, if permitted by rule, referred to a physicians
12 health program or voluntary substance use disorder monitoring program
13 approved under RCW 18.130.175.

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

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

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

24 (i) Any conviction, determination, or finding that he or she has
25 committed unprofessional conduct or is unable to practice with
26 reasonable skill or safety; and

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

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

34 NEW SECTION. Sec. 3. A new section is added to chapter 18.130
35 RCW to read as follows:

36 (1) (a) Physician well-being program records relating to well-
37 being program participants created specifically for, and collected
38 and maintained by the physician well-being program, are confidential
39 and exempt from disclosure under chapter 42.56 RCW and shall not be

1 subject to discovery by subpoena or admissible as evidence. This
2 privilege does not protect facts, information, communications, or
3 documents available from other original sources and does not protect
4 any document outside the scope of the privilege established under
5 this section.

6 (b) This section does not apply to the organizing documents or
7 contracts establishing a physician well-being program or to records
8 created prior to the establishment of the physician well-being
9 program.

10 (c) Nothing in this section precludes introduction into evidence
11 information about a license holder collected and maintained in a
12 physician well-being program in any civil action by the license
13 holder regarding:

14 (i) The individual's participation in the program;

15 (ii) The restriction of the license holder's clinical or staff
16 privileges when a report has been made under RCW
17 18.130.070(1)(d)(iii); or

18 (iii) Termination of the license holder's employment when a
19 report has been made under RCW 18.130.070(1)(d)(iii).

20 (d) The information admitted under (c) of this subsection must
21 not be reasonably discoverable, given the scope and limits of
22 discovery, from other nonprivileged sources.

23 (2) In the case that the license holder is unable to practice
24 with reasonable skill and safety or a patient has been harmed, a
25 report must be made to the disciplinary authority or the physicians
26 health program or voluntary substance use disorder monitoring program
27 approved by a disciplining authority under RCW 18.130.175 in
28 accordance with RCW 18.130.070(1)(d)(iii) and rules adopted by the
29 Washington medical commission.

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