

**WSR 21-01-041
EXPEDITED RULES
PROFESSIONAL EDUCATOR
STANDARDS BOARD**

[Filed December 8, 2020, 9:11 a.m.]

Title of Rule and Other Identifying Information: Chapter 181-97 WAC, Excellence in teacher preparation award.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: This repeals all of chapter 181-97 WAC.

Reasons Supporting Proposal: Chapter 181-97 WAC was authorized by RCW 28A.625.360. This statute was repealed in 2009. There was no other policy in chapter 181-97 WAC other than the policy that was repealed in 2009.

Statutory Authority for Adoption: Chapter 28A.410 RCW.

Statute Being Implemented: Chapter 28A.410 RCW.

Rule is not necessitated by federal law, federal or state court decision.

Name of Proponent: Professional educator standards board (PESB), governmental.

Name of Agency Personnel Responsible for Drafting, Implementation, and Enforcement: Maren Johnson, 600 Washington Street S.E., Olympia, WA 98504, 360-867-8424.

This notice meets the following criteria to use the expedited repeal process for these rules:

Other rules of the agency or of another agency govern the same activity as the rule, making the rule redundant.

Explanation of the Reason the Agency Believes the Expedited Rule-Making Process is Appropriate: This change aligns WAC to RCW.

NOTICE

THIS RULE IS BEING PROPOSED UNDER AN EXPEDITED RULE-MAKING PROCESS THAT WILL ELIMINATE THE NEED FOR THE AGENCY TO HOLD PUBLIC HEARINGS, PREPARE A SMALL BUSINESS ECONOMIC IMPACT STATEMENT, OR PROVIDE RESPONSES TO THE CRITERIA FOR A SIGNIFICANT LEGISLATIVE RULE. IF YOU OBJECT TO THIS USE OF THE EXPEDITED RULE-MAKING PROCESS, YOU MUST EXPRESS YOUR OBJECTIONS IN WRITING AND THEY MUST BE SENT TO Maren Johnson, PESB, 600 Washington Street S.E., Olympia, WA 98504, phone 360-867-8424, AND RECEIVED BY February 23, 2021.

November 30, 2020
Maren Johnson
Rules Coordinator

OTS-2788.1

REPEALER

The following chapter of the Washington Administrative Code is repealed:

- WAC 181-97-003 Purpose and authority.
- WAC 181-97-010 Definitions.

WAC 181-97-040	Selection of recipients—Nomination form.
WAC 181-97-060	Selection of recipients—Review committee.
WAC 181-97-080	Award.

WSR 21-01-045
EXPEDITED RULES
DEPARTMENT OF HEALTH
(Board of Hearing and Speech)
[Filed December 8, 2020, 10:45 a.m.]

Title of Rule and Other Identifying Information: WAC 246-828-370 HIV/AIDS prevention and information education requirements for audiologists, speech-language pathologists, speech-language pathology assistants, and hearing aid specialists. The board of hearing and speech (board) is proposing to repeal WAC 246-828-370 as a result of ESHB 1551 (chapter 76, Laws of 2020).

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: ESHB 1551 repealed statutes concerning AIDS education and training for emergency medical personnel, health professionals, and health care facility employees. The list of repealed statutes included RCW 70.24.270 (Health professionals—Rules for AIDS education and training) which involves licensees governed under the board. The board is proposing to repeal its rule as the requirement is no longer required in statute.

Reasons Supporting Proposal: The intent of ESHB 1551 was to reduce stigma towards people living with HIV/AIDS. This includes not isolating AIDS as an exceptional disease that requires specific training and education separate from other health conditions. Repealing the AIDS training requirement in WAC 246-828-370 could remove barriers from becoming licensed or renewing licensure for audiologists, hearing aid specialists, speech-language pathologists, and speech-language pathology assistants.

Statutory Authority for Adoption: RCW 18.35.161.

Statute Being Implemented: ESHB 1551 (chapter 76, Laws of 2020).

Rule is not necessitated by federal law, federal or state court decision.

Name of Proponent: Washington state board of hearing and speech, governmental.

Name of Agency Personnel Responsible for Drafting, Implementation, and Enforcement: Kim-Boi Shadduck, 111 Israel Road S.E., Tumwater, WA 98501, 360-236-2912.

This notice meets the following criteria to use the expedited repeal process for these rules:

The statute on which the rule is based has been repealed and has not been replaced by another statute providing statutory authority for the rule.

Explanation of the Reason the Agency Believes the Expedited Rule-Making Process is Appropriate: ESHB 1551 repealed RCW 70.240.270 the statute [statute] on which the board of hearing and speech's rules concerning AIDS education for health care professionals is based on.

NOTICE

THIS RULE IS BEING PROPOSED UNDER AN EXPEDITED RULE-MAKING PROCESS THAT WILL ELIMINATE THE NEED FOR THE AGENCY TO HOLD PUBLIC HEARINGS, PREPARE A SMALL BUSINESS ECONOMIC IMPACT STATEMENT, OR PROVIDE RESPONSES TO THE CRITERIA FOR A SIGNIFICANT LEGISLATIVE RULE. IF YOU OBJECT TO THIS USE OF THE EXPEDITED RULE-MAKING PROCESS, YOU MUST EXPRESS YOUR OBJECTIONS IN WRITING AND THEY MUST BE SENT TO Kim-Boi Shadduck, Department of Health, P.O. Box 47852, Olympia, WA 98504-7852, phone 360-236-2912, fax 360-236-2901, email <https://fortress.wa.gov/doh/policyreview>, AND RECEIVED BY February 22, 2021.

November 25, 2020
Roberta A. Jackson
Chair

OTS-2705.1

REPEALER

The following section of the Washington Administrative Code is repealed:

WAC 246-828-370 HIV/AIDS prevention and information
education requirements.

WSR 21-01-123

EXPEDITED RULES

DEPARTMENT OF HEALTH

[Filed December 15, 2020, 10:48 a.m.]

Title of Rule and Other Identifying Information: WAC 246-470-030, 246-470-052, and 246-470-053, the department of health (DOH) is proposing changes to the prescription monitoring program (PMP) that would bring the rule language into alignment with statutory changes resulting from SSB 5380 (chapter 314, Laws of 2019), including amendments to timelines for submission of information by dispensers, and eliminating requirements for facilities or entities to be trading partners with the state's health information exchange.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: The proposal brings the rules into alignment with the statute. The proposed rules clarify that dispensers shall submit information to the PMP as soon as possible, but not later than one business day. The proposal also removes language that requires a facility or entity to be a trading partner with the state's health information exchange (HIE) in order to have access to the PMP.

Reasons Supporting Proposal: The proposed changes are necessary in order to bring rules into alignment with statutory changes. In SSB 5380, section 23, the legislature removed the requirement for a facility or entity to be a trading partner with the HIE in order for DOH to share data with them. Furthermore, section 21 of SSB 5380 makes edits that clarify that a dispenser shall submit information to the PMP as soon as possible, but not later than one business day.

Statutory Authority for Adoption: RCW 70.225.025.

Statute Being Implemented: RCW 70.25.040 and 70.225.020 as amended by SSB 5380.

Rule is not necessitated by federal law, federal or state court decision.

Name of Proponent: DOH, governmental.

Name of Agency Personnel Responsible for Drafting, Implementation, and Enforcement: Carly Bartz-Overman, 111 Israel Road S.W., Tumwater, WA 98501, 360-236-3044.

This notice meets the following criteria to use the expedited adoption process for these rules:

Adopts or incorporates by reference without material change federal statutes or regulations, Washington state statutes, rules of other Washington state agencies, shoreline master programs other than those programs governing shorelines of statewide significance, or, as referenced by Washington state law, national consensus codes that generally establish industry standards, if the material adopted or incorporated regulates the same subject matter and conduct as the adopting or incorporating rule.

This notice meets the following criteria to use the expedited repeal process for these rules:

The statute on which the rule is based has been repealed and has not been replaced by another statute providing statutory authority for the rule.

Explanation of the Reason the Agency Believes the Expedited Rule-Making Process is Appropriate: This proposal qualifies for expedited rule making under RCW 34.05.353 (1)(b) as it adopts without material change language from Washington state statute. The proposed rule also qualifies under RCW 34.05.353 (2)(a) because it repeals requirements

that are based on statutory requirements that have been repealed in SSB 5380.

NOTICE

THIS RULE IS BEING PROPOSED UNDER AN EXPEDITED RULE-MAKING PROCESS THAT WILL ELIMINATE THE NEED FOR THE AGENCY TO HOLD PUBLIC HEARINGS, PREPARE A SMALL BUSINESS ECONOMIC IMPACT STATEMENT, OR PROVIDE RESPONSES TO THE CRITERIA FOR A SIGNIFICANT LEGISLATIVE RULE. IF YOU OBJECT TO THIS USE OF THE EXPEDITED RULE-MAKING PROCESS, YOU MUST EXPRESS YOUR OBJECTIONS IN WRITING AND THEY MUST BE SENT TO Carly Bartz-Overman, DOH, P.O. Box 47852, Olympia, WA 98504, phone 360-236-3044, email <https://fortress.wa.gov/doh/policyreview>, AND RECEIVED BY February 22, 2021.

December 14, 2020
Jessica Todorovich
Chief of Staff
for John Wiesman, DrPH, MPH
Secretary

OTS-2599.1

AMENDATORY SECTION (Amending WSR 16-15-014, filed 7/8/16, effective 8/8/16)

WAC 246-470-030 Data submission requirements for dispensers.

(1) A dispenser shall provide to the department the dispensing information required by RCW 70.225.020 and this section for all scheduled II, III, IV, and V controlled substances and for drugs identified by the pharmacy quality assurance commission under WAC 246-470-020. Only drugs dispensed for more than one day use must be reported.

(2) Dispenser identification number. A dispenser shall acquire and maintain an identification number issued to dispensing pharmacies by the National Council for Prescription Drug Programs or a prescriber identifier issued to authorized prescribers of controlled substances by the Drug Enforcement Administration, United States Department of Justice.

(3) Submitting data. A dispenser shall submit data to the department electronically, (~~not~~) as soon as readily available, but no later than one business day from the date of dispensing, and in the format required by the department. When the dispenser has not dispensed any drugs during a business day which require reporting, then within seven days the dispenser shall report that no drugs requiring reporting were dispensed. The notification shall be in a format established by the department.

(a) A dispenser shall submit for each dispensing the following information and any additional information required by the department:

(i) Patient identifier. A patient identifier is the unique identifier assigned to a particular patient by the dispenser;

(ii) Name of the patient for whom the prescription is ordered including first name, middle initial, last name, and generational suffixes, if any;

(iii) Patient date of birth;

- (iv) Patient address;
 - (v) Patient gender and species code;
 - (vi) Drug dispensed;
 - (vii) Date of dispensing;
 - (viii) Quantity and days supply dispensed;
 - (ix) Refill and partial fill information;
 - (x) Prescriber identifiers including the National Provider Identifier and the Drug Enforcement Administration number including any suffix used;
 - (xi) Prescription issued date;
 - (xii) Dispenser identifiers including the Drug Enforcement Administration number and the National Provider Identifier;
 - (xiii) Prescription fill date and number;
 - (xiv) Source of payment indicated by one of the following:
 - (A) Private pay (cash, change, credit card, check);
 - (B) Medicaid;
 - (C) Medicare;
 - (D) Commercial insurance;
 - (E) Military installations and veterans affairs;
 - (F) Workers compensation;
 - (G) Indian nations;
 - (H) Other;
 - (xv) When practicable, the name of the person picking up or dropping off the prescription as verified by valid photographic identification; and
 - (xvi) The prescriber's and dispenser's business phone numbers.
- (b) A nonresident, licensed pharmacy that delivers controlled substances, as defined in RCW 18.64.360, is required to submit only the transactions for patients with a Washington state zip code.
- (c) Data submission requirements do not apply to:
- (i) The department of corrections or pharmacies operated by a county for the purpose of providing medications to offenders in state or county correctional institutions who are receiving pharmaceutical services from a state or county correctional institution's pharmacy. A state or county correctional institution's pharmacy must submit data to the program related to each offender's current prescriptions for controlled substances upon the offender's release from a state or county correctional institution.
 - (ii) Medications provided to patients receiving inpatient services provided at hospitals licensed under chapter 70.41 RCW or patients of such hospitals receiving services at the clinics, day surgery areas, or other settings within the hospital's license where the medications are administered in single doses; or medications provided to patients receiving outpatient services provided at ambulatory surgical facilities licensed under chapter 70.230 RCW.

[Statutory Authority: RCW 70.225.020, 70.225.025, and 70.225.040. WSR 16-15-014, § 246-470-030, filed 7/8/16, effective 8/8/16. Statutory Authority: RCW 70.225.020 and 70.225.025. WSR 14-07-099, § 246-470-030, filed 3/18/14, effective 4/18/14; WSR 13-12-025, § 246-470-030, filed 5/28/13, effective 6/28/13. Statutory Authority: Chapter 70.225 RCW and 2007 c 259. WSR 11-16-041, § 246-470-030, filed 7/27/11, effective 8/27/11.]

AMENDATORY SECTION (Amending WSR 18-17-048, filed 8/8/18, effective 9/8/18)

WAC 246-470-052 Facility and provider group access to information from the program. (1) Access.

(a) A health care facility or entity may have access to prescription monitoring information for the purpose of providing medical or pharmaceutical care to the patients of the facility or entity or for quality improvement purposes (~~(only under the following conditions:~~

~~(i))~~, provided that the facility or entity is licensed by the department, operated by the federal government, or a federally recognized Indian tribe (~~(and~~

~~(ii) The facility or entity is a trading partner with the state's health information exchange)~~.

(b) A health care provider group of five or more prescribers may have access to prescription monitoring information for the purpose of providing medical or pharmaceutical care to the patients, or for quality improvement purposes, (~~(only under the following conditions:~~

~~(i))~~ provided that all prescribers in the provider group are licensed by the department, the provider group is operated by the federal government or a federally recognized Indian tribe (~~(and~~

~~(ii) The provider group is a trading partner with the state's health information exchange)~~.

(2) Registration for access. A facility or entity identified in subsection (1)(a) of this section or a provider group of five or more prescribers identified in subsection (1)(b) of this section may register for access by using the registration process established by the department.

(3) Verification by the department. The department or its designee shall verify the authentication and identity of the facility, entity, or provider group before allowing access to any prescription monitoring information.

(4) Procedure for accessing prescription information. A facility, entity, or provider group identified in subsection (1) of this section must access information from the program electronically through (~~the state health information exchange)~~ a method approved by the department.

(5) If the connection between the facility, entity, or provider group and the (~~health information exchange)~~ program is compromised, the facility, entity, or provider group shall notify the department's designee by telephone and in writing as soon as reasonably possible.

(6) All requests for, uses of, and disclosures of prescription monitoring information by authorized persons must be consistent with the mandate as outlined in RCW 70.225.040 and this chapter.

[Statutory Authority: RCW 70.225.020, 70.225.025, 70.225.040, and 2017 c 297. WSR 18-17-048, § 246-470-052, filed 8/8/18, effective 9/8/18. Statutory Authority: Chapter 70.225 RCW and 2016 c 104, and 2015 c 259. WSR 17-18-103, § 246-470-052, filed 9/6/17, effective 10/7/17.]

AMENDATORY SECTION (Amending WSR 18-17-048, filed 8/8/18, effective 9/8/18)

WAC 246-470-053 The coordinated care electronic tracking program access to information from the program. (1) Access. The coordinated

care electronic tracking program may have access to data for the purposes of:

(a) Providing program data to emergency department personnel when the patient registers in the emergency department; and

(b) Providing notice to the patient's providers, appropriate care coordination staff, and prescribers listed in the patient's prescription monitoring program record when the patient has experienced a controlled substance overdose event.

(2) Registration for access. The coordinated care electronic tracking program may register for access by using the registration process established by the department.

(3) Verification by the department. The department or its designee shall verify the authentication and identity of the coordinated care electronic tracking program before allowing access to any prescription monitoring information.

(4) Procedure for accessing prescription data. The coordinated care electronic tracking program must access data from the program electronically through ~~((the state health information exchange))~~ a method approved by the department. The data shall only be retained long enough by the tracking program to create the report needed by emergency department personnel when the patient registered or to provide notice of an overdose event.

(5) If the secure connection between the coordinated care electronic tracking program and the ~~((state health information exchange))~~ program is compromised, the coordinated care electronic tracking program shall notify the department's designee by telephone and in writing as soon as reasonably possible.

(6) All requests for, uses of, and disclosures of prescription monitoring information by authorized persons must be consistent with the mandate as outlined in RCW 70.225.040 and this chapter.

[Statutory Authority: RCW 70.225.020, 70.225.025, 70.225.040, and 2017 c 297. WSR 18-17-048, § 246-470-053, filed 8/8/18, effective 9/8/18.]

WSR 21-01-213

EXPEDITED RULES

DEPARTMENT OF HEALTH

(Washington Medical Commission)

[Filed December 23, 2020, 10:42 a.m.]

Title of Rule and Other Identifying Information: WAC 246-919-380 (allopathic physicians) AIDS prevention and information education requirements and WAC 246-918-080 (allopathic physician assistants) requirements for licensure. The Washington medical commission (commission) proposes repealing WAC 246-919-380 and amending WAC 246-918-080 to repeal subsection (2)(d) to implement ESHB 1551, modernizing the control of certain communicable diseases (chapter 76, Laws of 2020), which repealed specific statutory authority.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: Section 22(11) of ESHB 1551 repeals RCW 70.24.270 Health professionals—Rules for AIDS education and training, to no longer require health professionals to obtain AIDS education and training. As a result of this law being repealed, the commission proposes to repeal requirements for AIDS training included in WAC 246-919-380 and 246-918-080 (2)(d).

The intent of ESHB 1551 is to help reduce stigma towards people living with HIV/AIDS by not singling out AIDS as an exceptional disease that requires specific training and education separate from other health conditions.

Reasons Supporting Proposal: When Washington adopted statutes concerning AIDS, very little was known about the disease compared to today. Now, AIDS is very treatable and preventable. In 2014, Governor Inslee issued a proclamation including efforts to reduce stigma, which included updating state law. ESHB 1551 repeals statutes concerning AIDS education and training for emergency medical personnel, health professionals, and health care facility employees, which helps reduce stigma towards people living with HIV/AIDS by not singling out AIDS as an exceptional disease that requires specific training and education separate from other health conditions.

Statutory Authority for Adoption: RCW 18.71.017, 18.130.050.

Statute Being Implemented: ESHB 1551 (chapter 76, Laws of 2020).

Rule is not necessitated by federal law, federal or state court decision.

Name of Proponent: Washington medical commission, governmental.

Name of Agency Personnel Responsible for Drafting: Amelia Boyd, 111 Israel Road S.E., Tumwater, WA 98501, 360-236-2727; Implementation and Enforcement: Melanie de Leon, 111 Israel Road S.E., Tumwater, WA 98501, 360-236-2755.

This notice meets the following criteria to use the expedited repeal process for these rules:

The statute on which the rule is based has been repealed and has not been replaced by another statute providing statutory authority for the rule.

Explanation of the Reason the Agency Believes the Expedited Rule-Making Process is Appropriate: ESHB 1551 (chapter 76, Laws of 2020) repeals RCW 70.240.270, the statutes [statutes] in which the commission rules are based.

NOTICE

THIS RULE IS BEING PROPOSED UNDER AN EXPEDITED RULE-MAKING PROCESS THAT WILL ELIMINATE THE NEED FOR THE AGENCY TO HOLD PUBLIC HEAR-

INGS, PREPARE A SMALL BUSINESS ECONOMIC IMPACT STATEMENT, OR PROVIDE RESPONSES TO THE CRITERIA FOR A SIGNIFICANT LEGISLATIVE RULE. IF YOU OBJECT TO THIS USE OF THE EXPEDITED RULE-MAKING PROCESS, YOU MUST EXPRESS YOUR OBJECTIONS IN WRITING AND THEY MUST BE SENT TO Amelia Boyd, Program Manager, Department of Health, P.O. Box 47866, phone 360-236-2727, email <https://fortress.wa.gov/doh/policyreview> AND RECEIVED BY March 8, 2021.

December 22, 2020
Melanie de Leon
Executive Director

OTS-2753.1

AMENDATORY SECTION (Amending WSR 15-04-122, filed 2/3/15, effective 3/6/15)

WAC 246-918-080 Physician assistant—Requirements for licensure.

(1) Except for a physician assistant licensed prior to July 1, 1999, individuals applying to the commission for licensure as a physician assistant must have graduated from an accredited commission approved physician assistant program and successfully passed the NCCPA examination.

(2) An applicant for licensure as a physician assistant must submit to the commission:

- (a) A completed application on forms provided by the commission;
- (b) Proof the applicant has completed an accredited commission approved physician assistant program and successfully passed the NCCPA examination;
- (c) All applicable fees as specified in WAC 246-918-990; and
- (d) ~~((Proof of completion of four clock hours of AIDS education as required in chapter 246-12 WAC, Part 8; and~~
- ~~(e))~~ Other information required by the commission.

(3) The commission will only consider complete applications with all supporting documents for licensure.

(4) A physician assistant may not begin practicing without written commission approval of a delegation agreement.

[Statutory Authority: RCW 18.71.017, 18.130.050, chapter 18.71A RCW, and 2013 c 203. WSR 15-04-122, § 246-918-080, filed 2/3/15, effective 3/6/15. Statutory Authority: RCW 18.71.017, 18.71.050 and chapter 18.71 RCW. WSR 01-18-085, § 246-918-080, filed 9/5/01, effective 10/6/01. Statutory Authority: RCW 43.70.280. WSR 98-05-060, § 246-918-080, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 18.71.017 and 18.71A.020. WSR 96-03-073, § 246-918-080, filed 1/17/96, effective 2/17/96. Statutory Authority: RCW 18.71.017. WSR 91-06-030 (Order 147B), recodified as § 246-918-080, filed 2/26/91, effective 3/29/91. Statutory Authority: RCW 18.71A.020. WSR 89-06-077 (Order PM 822), § 308-52-139, filed 3/1/89. Statutory Authority: RCW 18.71.017 and 18.71A.020. WSR 88-21-047 (Order PM 782), § 308-52-139, filed 10/13/88. Statutory Authority: RCW 18.71A.020. WSR 88-06-008 (Order PM 706), § 308-52-139, filed 2/23/88; WSR 86-12-031 (Order PM 599), § 308-52-139, filed 5/29/86; WSR 82-24-013 (Order PL 412), §

308-52-139, filed 11/19/82; WSR 81-03-078 (Order PL 368), §
308-52-139, filed 1/21/81; WSR 80-15-031 (Order PL-353), § 308-52-139,
filed 10/8/80; WSR 78-04-029 (Order PL 285, Resolution No. 78-140), §
308-52-139, filed 3/14/78.]

OTS-2756.1

REPEALER

The following section of the Washington Administrative Code is repealed:

WAC 246-919-380 AIDS prevention and information
education requirements.