

WSR 22-07-024

PROPOSED RULES

DEPARTMENT OF HEALTH

[Filed March 9, 2022, 2:11 p.m.]

Original Notice.

Preproposal statement of inquiry was filed as WSR 21-12-040.

Title of Rule and Other Identifying Information: Chapter 246-928 WAC, Respiratory care practitioners. The department of health (department) is proposing amending, repealing, and creating new rule sections to implement and align with SHB 1383 (chapter 114, Laws of 2021), which made changes to the profession including, but not limited to, the scope of practice, required qualifications, and training necessary for particular procedures. Additionally, the department is proposing changes to update, clarify, and streamline the chapter.

Hearing Location(s): On April 27, 2022, at 9:00 a.m. In response to the coronavirus disease 2019 (COVID-19), the department will not provide a physical location for this hearing to promote social distancing and the safety of the citizens of Washington state. A virtual public hearing, without a physical meeting space, will be held instead. Register in advance for this webinar https://us02web.zoom.us/webinar/register/WN_YacpcBumQBOASp2_aeXjwg. After registering, you will receive a confirmation email containing information about joining the webinar.

Date of Intended Adoption: May 4, 2022.

Submit Written Comments to: Ted Dale, Office of Health Professions, P.O. Box 47852, Olympia, WA 98504-7852, email <https://fortress.wa.gov/doh/policyreview>, ted.dale@doh.wa.gov, by April 27, 2022.

Assistance for Persons with Disabilities: Contact Ted Dale, phone 360-236-2991, TTY 711, email ted.dale@doh.wa.gov, by April 20, 2022.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: Proposed amendments to chapter 246-928 WAC implement statutory changes made necessary under SHB 1383, which significantly expanded the scope of the respiratory care practitioner profession as well as made other changes. SHB 1383 adds disease prevention to respiratory care practitioners' scope of practice, as well as authorization to perform extracorporeal membrane oxygenation, perform cardiopulmonary stress testing, and administer nitrous oxide for analgesia. Proposed amendments set standards for the increased scope of practice and defining training requirements as authorized by SHB 1383. In addition to making scope of practice changes, the proposed amendments include: (1) Expanding the list of organizations whose trainings are accepted as continuing education; (2) raising minimum education requirements; (3) raising examination requirements; (4) repealing a rule allowing new graduates to practice prior to licensure; (5) creating rules regulating training related to specific medical procedures; and (6) making other changes to update, clarify, and streamline the chapter. These amendments align the chapter [with] the statute, raising the qualifications of respiratory care practitioners in Washington and raising the standard of care that they will be able to provide their patients.

Reasons Supporting Proposal: SHB 1383 modified the respiratory care practitioner profession, including the scope of practice, education requirements, and examination requirements. These amendments are necessary to implement the bill and align the rules with statutory changes. Additionally, creating enforceable standards through rule

will allow the department to consistently monitor and enforce rules that protect patient safety.

Statutory Authority for Adoption: RCW 18.89.050.

Statute Being Implemented: SHB 1383 (chapter 114, Laws of 2021).

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

Name of Proponent: Department of health, governmental.

Name of Agency Personnel Responsible for Drafting, Implementation, and Enforcement: Ted Dale, 111 Israel Road S.E., Tumwater, WA 98501, 360-236-2991.

A school district fiscal impact statement is not required under RCW 28A.305.135.

A cost-benefit analysis is required under RCW 34.05.328. A preliminary cost-benefit analysis may be obtained by contacting Ted Dale, Office of Health Professions, P.O. Box 47852, Olympia, WA 98504-7852, phone 360-236-2991, TTY 711, email ted.dale@doh.wa.gov.

This rule proposal, or portions of the proposal, is exempt from requirements of the Regulatory Fairness Act because the proposal:

Is exempt under RCW 19.85.025(3) as the rules are adopting or incorporating 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; rules only correct typographical errors, make address or name changes, or clarify language of a rule without changing its effect; and rule content is explicitly and specifically dictated by statute.

Is exempt under RCW 19.85.025(4).

Explanation of exemptions: The proposed amendments impact rules regulating individual professional licenses, not businesses.

March 7, 2022
 Kristin Peterson, JD
 Deputy Secretary
 Policy and Planning
 for Umair A. Shah, MD, MPH
 Secretary

OTS-3610.2

AMENDATORY SECTION (Amending WSR 01-11-165, filed 5/23/01, effective 6/23/01)

WAC 246-928-320 General definitions. ((This section defines terms used in the rules contained in this chapter.

(1) "~~Respiratory care practitioner~~" means a person licensed by the department of health, who is authorized under chapter 18.89 RCW and these rules to practice respiratory therapy. ~~WAC 246-928-410 explains who must be licensed as a respiratory care practitioner.~~) The

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

(1) "Analgesia" means providing pain relief or loss of physical sensation without the total loss of consciousness or physical movement, and which allows the patient to respond to verbal commands and tactile stimulation.

(2) "Applicant" means a person whose application for licensure as a respiratory care practitioner is being submitted to the department ~~((of health))~~.

(3) "Department" means the Washington state department of health.

(4) "Respiratory care practitioner" means a person licensed by the department, who is authorized under chapter 18.89 RCW and these rules to practice respiratory therapy. WAC 246-928-410 explains who must be licensed as a respiratory care practitioner.

[Statutory Authority: RCW 18.89.050(1). WSR 01-11-165, § 246-928-320, filed 5/23/01, effective 6/23/01.]

~~((PART I
DEFINITIONS AND PROCEDURES FOR LICENSING AS A RESPIRATORY CARE PRACTITIONER))~~

AMENDATORY SECTION (Amending WSR 01-11-165, filed 5/23/01, effective 6/23/01)

WAC 246-928-410 ~~((Who must be licensed as))~~ Licensure requirements for a respiratory care practitioner ~~((with the department))~~.

This section identifies who must be licensed as a respiratory care practitioner with the department and who is exempt from licensure.

(1) Any person performing or offering to perform the functions authorized in RCW 18.89.040 must be licensed as a respiratory care practitioner. A certification, registration or other credential issued by a professional organization does not substitute for licensure as a respiratory care practitioner in Washington state.

(2) The following individuals are exempt from licensure as a respiratory care practitioner ~~((with the department))~~:

(a) Any person performing or offering to perform the functions authorized in RCW 18.89.040, ~~((if that person already holds a current licensure, certification or registration that authorizes these functions))~~ who is either registered, certified, licensed, or similarly regulated under the laws of this state and is performing services within the person's authorized scope of practice;

(b) Any person employed by the United States government who is practicing respiratory care as a performance of the duties prescribed for him or her by the laws of and rules of the United States;

(c) Any person who is pursuing a supervised course of study leading to a degree or certificate in respiratory care, if the person is designated by a title that clearly indicates ~~((his or her))~~ their sta-

tus as a student or trainee and limited to the extent of demonstrated proficiency of completed curriculum, and under direct supervision;

(d) Any person who is licensed as a registered nurse under chapter 18.79 RCW;

(e) Any person who is practicing respiratory care without compensation for a family member.

[Statutory Authority: RCW 18.89.050(1). WSR 01-11-165, § 246-928-410, filed 5/23/01, effective 6/23/01.]

AMENDATORY SECTION (Amending WSR 01-11-165, filed 5/23/01, effective 6/23/01)

WAC 246-928-420 ((How to become licensed as a) Respiratory care practitioner application requirements. ((This section explains how a person may become licensed as a respiratory care practitioner with the department.

(1) The department shall provide forms for use by an applicant for licensure as a respiratory care practitioner. All applications for licensure must be submitted on these forms, with the appropriate fee required in WAC 246-928-990. The specific requirements and process for licensure is set forth in WAC 246-12-020.

(2) The applicant shall certify that all information on the application forms is accurate. The applicant is subject to investigation and discipline by the department for any apparent violation of chapters 18.130 and 18.89 RCW, or this chapter.)) To become licensed as a respiratory care practitioner, an applicant shall:

(1) Submit to the department:

(a) A completed application as provided by the department;

(b) Proof of meeting the education requirements in WAC

246-928-520;

(c) The appropriate fee required in WAC 246-928-990; and

(d) Any other information determined necessary by the department;

and

(2) Comply with the examination requirements in WAC 246-928-540.

[Statutory Authority: RCW 18.89.050(1). WSR 01-11-165, § 246-928-420, filed 5/23/01, effective 6/23/01.]

AMENDATORY SECTION (Amending WSR 01-11-165, filed 5/23/01, effective 6/23/01)

WAC 246-928-430 ((How and when to renew a) Respiratory care practitioner license renewal. ((This section explains how and when to renew a respiratory care practitioner license.))

(1) ((Applications for renewal of the license for)) To renew a license a respiratory care practitioner shall ((be submitted on forms)) submit a renewal form provided by the department, with the appropriate fee required in WAC 246-928-990.

(2) The specific requirements and process for renewal of a license are ((set forth)) in WAC 246-12-030.

~~((2))~~ (3) Renewal fees must be postmarked on or before the renewal date or the department will charge a late renewal penalty fee and licensure reissuance fee.

[Statutory Authority: RCW 18.89.050(1). WSR 01-11-165, § 246-928-430, filed 5/23/01, effective 6/23/01.]

AMENDATORY SECTION (Amending WSR 15-24-095, filed 11/30/15, effective 12/31/15)

WAC 246-928-442 Continuing education. (~~All licensed~~) To renew a respiratory care practitioner (~~(s seeking to renew their)~~) license, the licensee shall acquire (~~(thirty)~~) 30 credit hours of continuing respiratory care education every two years as required in RCW 18.89.140. Licensees shall meet the continuing education requirement outlined in this section and report such continuing education as required in (~~(chapter 246-12 WAC, Part 7)~~) WAC 246-12-170 through 246-12-240.

(1) The following are categories of (~~(acceptable)~~) accepted continuing education activities for licensed respiratory care practitioners:

(a) A minimum of (~~(ten)~~) 10 credit hours of continuing education during each two-year reporting cycle must be earned in courses approved by the American Association for Respiratory Care (AARC).

(b) The remaining (~~(twenty)~~) 20 hours of continuing education during each two-year reporting cycle may be in any of the following areas:

(i) Sponsored courses. Courses sponsored or approved by the:

- (A) American Academy of Pediatrics;
- (B) American Academy of Physician Assistants;
- (C) American Association of Critical Care Nurses;
- (D) American Association of Respiratory Care;
- (E) American College of Chest Physicians;
- (F) American College of Emergency Physicians;
- (G) American College of Physicians;
- (H) American Medical Association;
- (I) American Nurses Association;
- (J) American Osteopathic Association;
- (K) American Thoracic Society;
- (L) Society of Critical Care Medicine;
- (M) Washington academy of physician assistants;
- (N) Washington osteopathic medicine association;
- (O) Washington state medical association; (~~(or)~~)
- (P) Washington state nurses association;
- (Q) Extracorporeal life support organization; or
- (R) American Society of Extracorporeal Technology.

(ii) ~~Certifications/examinations~~ (~~(. Licensees shall only claim credit hours in this category that were obtained during the current reporting cycle)~~) valid for continuing education credit.

(A) Ten credit hours each may be claimed for the following initial or renewal certifications:

- (I) Advanced cardiac life support (also known as ACLS);
- (II) Neonatal advanced life support (also known as NALS, or neonatal resuscitation program or NRP);
- (III) Pediatric advanced life support (also known as PALS).

(B) Five credit hours may be claimed for initial or renewal certification in basic life support (also known as BLS).

(C) Ten credit hours each may be claimed for passing either of the following National Board of Respiratory Care (NBRC) advanced practitioner examinations:

(I) The NBRC therapist multiple-choice examination combined with the clinical simulation examination that awards NBRC registration (~~((formerly known as the registered respiratory therapist, or "RRT," examination))~~); or

(II) Registered pulmonary function technologist.

(D) Five credit hours each may be claimed for passing any of the following:

(I) The NBRC therapist multiple-choice examination that awards NBRC certification (~~((formerly known as the entry level, or "CRT," examination))~~);

(II) Any NBRC specialty examination;

(III) The NBRC self-assessment competency examination with a minimum score of (~~(seventy-five))~~ 75; or

(IV) National Asthma Educator Certification Board certified asthma educator examination.

(iii) Educational settings.

(A) A licensee may claim courses completed at a regionally accredited college, university, or institute of higher education. Such courses must focus on the clinical practice of respiratory care or education related to the cardiopulmonary system. Credit hours for such courses may be claimed as either:

(I) Actual semester contact hours (such as (~~(fifteen))~~ 15 semester contact hours shall be equal to (~~(fifteen))~~ 15 continuing education credits); or

(II) An academic credit formula that multiplies the academic credits by a factor of three (such as four academic credits shall be equal to (~~(twelve))~~ 12 continuing education credits).

(B) A licensee may claim respiratory care educational offerings provided by hospitals or health organizations.

(C) A licensee may claim continuing education credit hours for serving as an instructor of educational offerings in respiratory care provided by hospitals or health organizations; or at a regionally accredited college, university, or institute of higher education. Such educational offerings must include learning objectives. The number of credit hours claimed for serving as an instructor shall be the same number as those earned by attendees. The credit hours for presenting a specific topic, lecture, or education course may only be used for continuing education once during each reporting cycle.

(c) No more than (~~(ten))~~ 10 credit hours of continuing education during a two-year reporting cycle may be in any of the following areas:

(i) Self-study. Journal reading of publications related to respiratory care;

(ii) Practice related topics. Formal, internet-based, or video-format courses offered by organizations not listed in (b) of this subsection including, but not limited to, the American Association of Cardiovascular and Pulmonary Rehabilitation, the Association for the Treatment of Tobacco Use and Dependence, or the Council for Tobacco Treatment Training Programs; or

(iii) Nonclinical practice topics. Courses or activities including, but not limited to, health promotion, health care cost manage-

ment, mandatory reporting, professional ethics, and regulatory affairs.

(2) Documentation. (~~Licensees are~~) A licensee is responsible for acquiring and maintaining all acceptable documentation of their continuing education activities, as required in (~~chapter 246-12 WAC, Part 7~~) WAC 246-12-170 through 246-12-240. Acceptable documentation (~~shall~~) must include transcripts, letters from course instructors, or certificates of completion or other formal certifications provided by hospitals, course instructors, and health organizations. In all cases other than transcripts, the documentation must show the participant's name, activity title, number of continuing education credit hours, date(s) of activity, instructor's name(s) and degree and the signature of the verifying individual program sponsor.

[Statutory Authority: RCW 18.89.050 and 19.89.140 [18.89.140]. WSR 15-24-095, § 246-928-442, filed 11/30/15, effective 12/31/15. Statutory Authority: RCW 18.89.050(1) and 18.89.140. WSR 01-21-136, § 246-928-442, filed 10/24/01, effective 11/24/01.]

AMENDATORY SECTION (Amending WSR 01-21-136, filed 10/24/01, effective 11/24/01)

WAC 246-928-443 Verification of continuing education. (1) The licensee shall:

(a) Verify on renewal forms provided by the department, that the minimum continuing education has been completed within the two-year renewal cycle prior to the licensee's renewal date; and

(b) Keep records for four years as required in (~~chapter 246-12 WAC, Part 7~~) WAC 246-12-200.

(2) (~~Audits.~~) The department may conduct random compliance audits of continuing education records (~~, as described in chapter 246-12 WAC, Part 7~~) in compliance with WAC 246-12-170 through 246-12-240.

(3) (~~Exemptions.~~) In certain emergency situations, the department may excuse all or part of the continuing education requirement (~~as described in chapter 246-12 WAC, Part 7~~) in compliance with WAC 246-12-210. The department may require verification of the emergency.

[Statutory Authority: RCW 18.89.050(1) and 18.89.140. WSR 01-21-136, § 246-928-443, filed 10/24/01, effective 11/24/01.]

AMENDATORY SECTION (Amending WSR 01-11-165, filed 5/23/01, effective 6/23/01)

WAC 246-928-450 (~~How to reinstate an~~) Expired respiratory care practitioner license. (~~This section explains the process for reinstatement of an expired respiratory care practitioner license. Applications for reinstatement of an expired license may be submitted on forms provided by the department, with the appropriate fee required in WAC 246-928-990. The specific requirements and process for reinstatement of an expired license is set forth in~~) To return an expired license to active status, the applicant shall meet the requirements in WAC 246-12-040.

[Statutory Authority: RCW 18.89.050(1). WSR 01-11-165, § 246-928-450, filed 5/23/01, effective 6/23/01.]

~~((PART II
REQUIREMENTS FOR LICENSURE AS A RESPIRATORY CARE PRACTITIONER))~~

AMENDATORY SECTION (Amending WSR 01-11-165, filed 5/23/01, effective 6/23/01)

WAC 246-928-520 Minimum educational qualifications for licensure as a respiratory care practitioner. ~~((This section provides the minimum educational qualifications for licensure as a respiratory care practitioner.))~~

(1) To meet the educational requirements required by RCW 18.89.090, an applicant must be a graduate of at least a two-year respiratory therapy educational program. ~~((Programs))~~ The program must be accredited by:

~~((Accredited by))~~ (a) The Committee on Accreditation for Respiratory Care ((COARC) or accredited by) (CoARC);

(b) The American Medical Association's (AMA) Committee on Allied Health Education and Accreditation (CAHEA) ((, or its successor,)); or

(c) The Commission on Accreditation of Allied Health Education Program (CAAHEP).

(2) An official transcript indicating completion of at least a two-year program must be provided as evidence of fulfillment of the required education.

[Statutory Authority: RCW 18.89.050(1). WSR 01-11-165, § 246-928-520, filed 5/23/01, effective 6/23/01.]

AMENDATORY SECTION (Amending WSR 01-11-165, filed 5/23/01, effective 6/23/01)

WAC 246-928-540 Examination requirements for licensure as a respiratory care practitioner. ~~((This section provides the minimum examination requirements for licensure as a respiratory care practitioner.))~~

(1) An applicant who has taken and passed both the therapist multiple choice examination and the clinical simulation examination for the registered respiratory therapist credential provided by the National Board for Respiratory Care (NBRC) ((entry level examination)), has met the minimum examination requirements of RCW 18.89.090 (1)(b). Applicants shall request the NBRC ~~((to))~~ verify to the department that the applicant has successfully passed the NBRC examinations.

(2) An active registered respiratory therapist credential with NBRC is considered proof of meeting the minimum examination requirements.

[Statutory Authority: RCW 18.89.050(1). WSR 01-11-165, § 246-928-540, filed 5/23/01, effective 6/23/01.]

AMENDATORY SECTION (Amending WSR 01-11-165, filed 5/23/01, effective 6/23/01)

WAC 246-928-560 ((How to apply for)) Licensure for persons credentialed out-of-state. ((This section explains how a person holding a license in another state or jurisdiction may apply for licensure.

~~(1))~~ An applicant who is currently or was previously credentialed in another state or jurisdiction may qualify for licensure in Washington state. ((Applicants must submit the following documentation)) To be considered for licensure:

(1) The applicant shall submit to the department:

(a) ~~((An))~~ A completed application on forms provided by the department;

(b) Proof of meeting the education requirements in WAC 246-928-520 or subsection (4) of this section; and

(c) A fee ((and forms)) as specified in WAC ((246-928-420 and)) 246-928-990 ((; and

~~(b) Written).~~

(2) The applicant shall comply with the examination requirements in WAC 246-928-540 or subsection (4) of this section.

(3) The applicant shall request written verification directly from all states in which the applicant is or was credentialed, attesting that the applicant has or had a license in good standing and is not subject to charges or disciplinary action for unprofessional conduct or impairment ~~((; and~~

~~(c) Verification of completion of the required education and examination as specified in WAC 246-928-520)).~~

~~((2))~~ (4) Applicants who have completed at least a two-year program recognized by the Canadian Society of Respiratory Therapists (CSRT) in their current list, or any previous lists, and ((are eligible to sit for)) have passed the CSRT registry examination; or have been issued a registration by the CSRT are considered to have met the educational and examination requirements in this chapter. Canadian applicants are required to submit verification directly from CSRT, as well as all of the information listed above for applicants licensed in another jurisdiction.

[Statutory Authority: RCW 18.89.050(1). WSR 01-11-165, § 246-928-560, filed 5/23/01, effective 6/23/01.]

AMENDATORY SECTION (Amending WSR 01-11-165, filed 5/23/01, effective 6/23/01)

WAC 246-928-570 ((How to apply for)) Temporary practice permits for ((persons)) applicants credentialed out-of-state. ((This section

~~explains how a person holding a license in another state or jurisdiction may apply for a temporary practice permit.))~~

(1) An applicant who is currently or was previously credentialed in another state or jurisdiction may qualify for licensure in Washington state. Applicants must submit the following documentation to be considered for a temporary practice permit:

(a) A completed application on forms provided by the department with the request for a temporary practice permit indicated;

(b) An application fee and a temporary practice permit fee as specified in WAC 246-928-990;

(c) Written verification directly from all states or jurisdictions in which the applicant is or was licensed, attesting that the applicant has or had a license in good standing and is not subject to charges or disciplinary action for unprofessional conduct or impairment; and

(d) Verification of completion of the required education and examination as specified in WAC 246-928-520.

(2) The department shall issue a one-time-only temporary practice permit unless the department determines a basis for denial of the license or issuance of a conditional license.

(3) The temporary permit shall expire upon the issuance of a license by the department, or within (~~three months~~) 90 days, whichever occurs first. The permit shall not be extended beyond the expiration date.

(4) Issuance of a temporary practice permit does not ensure that the department will grant a full license. Temporary permit holders are subject to the same education and examination requirements as set forth in WAC 246-928-520 and 246-928-550.

(5) The following situations are not considered substantially equal for Washington state licensure:

(a) Certification of persons credentialed out-of-state through a state-constructed examination; or

(b) (~~Grandfathering~~) Legacy provisions where proof of education and examination was not required.

[Statutory Authority: RCW 18.89.050(1). WSR 01-11-165, § 246-928-570, filed 5/23/01, effective 6/23/01.]

NEW SECTION

WAC 246-928-580 Education and training requirements for extracorporeal membrane oxygenation (ECMO) and extracorporeal life support (ECLS). (1) In order to provide extracorporeal membrane oxygenation (ECMO) and extracorporeal life support (ECLS), a respiratory care practitioner shall first complete education and hands-on experience specific to this treatment. The education must meet the guidelines in the 2010 Extracorporeal Life Support Organization (ELSO) Guidelines for Training and Continuing Education of ECMO Specialists and must include:

(a) Didactic sessions of at least 24 hours;

(b) Hands-on proficiencies, also known as water drills, including:

(i) Basic session with a discussion and demonstration of the equipment; and

(ii) Emergency session to address failure of the equipment and corrections;

(c) High-fidelity simulation or animal sessions; and

(d) Preceptor training, also known as bedside training, of at least 16 hours.

(2) An ECMO or ECLS training program which meets the standards set by ELSO meets the training requirements of this section. This includes, but is not limited to, institutes and facilities that employ respiratory care practitioners.

(3) A respiratory care practitioner who provides ECMO or ECLS shall meet any annual training and certification requirements of their institute or facility, which may include, but are not limited to, examinations, evaluations, or continuing education requirements.

[]

NEW SECTION

WAC 246-928-590 Training requirements for the administration of nitrous oxide. (1) A respiratory care practitioner shall follow the training requirements and protocols of the hospital or facility in which they are employed when providing nitrous oxide for analgesia.

(2) To provide nitrous oxide for analgesia, a respiratory care practitioner shall complete training that includes, but is not limited to, the following components:

(a) Nitrous oxide training which provides education specific to administering nitrous oxide for analgesia;

(b) In-service competency which includes hands-on proficiency in the administration of nitrous oxide for analgesia; and

(c) Observed competency requirement of at least one successful, independent administration of nitrous oxide observed by a licensed individual currently qualified to provide this treatment.

(3) Respiratory care practitioners may only administer nitrous oxide for analgesia under direct supervision of a health care practitioner as defined in RCW 18.89.020 who is on-site and physically present in the treatment operatory.

[]

~~((PART III
REQUIREMENTS FOR REPORTING UNPROFESSIONAL CONDUCT))~~

AMENDATORY SECTION (Amending WSR 01-11-165, filed 5/23/01, effective 6/23/01)

WAC 246-928-710 Mandatory reporting. (~~((1) All reports required by this chapter shall be submitted to the department as soon as possible, but no later than twenty days after a determination is made.~~

~~(2) A report should contain the following information if known:~~

- ~~(a) The name, address, and telephone number of the person making the report.~~
- ~~(b) The name, address, and telephone numbers of the respiratory care practitioner being reported.~~
- ~~(c) The case number of any patient whose treatment is a subject of the report.~~
- ~~(d) A brief description or summary of the facts which prompted the issuance of the report, including dates of occurrences.~~
- ~~(e) If court action is involved, the name of the court in which the action is filed along with the date of filing and docket number.~~
- ~~(f) Any further information which would aid in the evaluation of the report.~~

~~(3) Mandatory reports shall be exempt from public inspection and copying to the extent permitted under RCW 42.17.310 or to the extent that public inspection or copying of the report or any portion of the report would invade or violate a person's right to privacy as set forth in RCW 42.17.255.~~

~~(4) A person is immune from civil liability, whether direct or derivative, for providing information to the department pursuant to RCW 18.130.070.) Individuals and other entities must report unprofessional conduct in compliance with the Uniform Disciplinary Act in chapter 18.130 RCW and the standards of professional conduct in chapter 246-16 WAC.~~

[Statutory Authority: RCW 18.89.050(1). WSR 01-11-165, § 246-928-710, filed 5/23/01, effective 6/23/01.]

~~((PART IV
RESPIRATORY CARE PRACTITIONER LICENSING AND RENEWAL FEES))~~

AMENDATORY SECTION (Amending WSR 15-19-149, filed 9/22/15, effective 1/1/16)

WAC 246-928-990 Respiratory care fees and renewal cycle. (1) Licenses must be renewed every two years on the practitioner's birthday as provided in (~~chapter 246-12 WAC, Part 2~~) WAC 246-12-030.

(2) The following nonrefundable fees will be charged:

Title of Fee	Fee
Application	\$140.00
Temporary practice permit	50.00

Title of Fee	Fee
Duplicate license	15.00
Verification of licensure	15.00
Renewal	110.00
Late renewal penalty	55.00
Expired license reissuance	65.00

[Statutory Authority: 43.70.280. WSR 15-19-149, § 246-928-990, filed 9/22/15, effective 1/1/16. Statutory Authority: RCW 43.70.110, 43.70.250, and 2010 c 37. WSR 10-19-071, § 246-928-990, filed 9/16/10, effective 10/15/10. Statutory Authority: RCW 43.70.110, 43.70.250 and 2008 c 329. WSR 08-16-008, § 246-928-990, filed 7/24/08, effective 7/25/08. Statutory Authority: RCW 43.70.250, [43.70.]280 and 43.70.110. WSR 05-12-012, § 246-928-990, filed 5/20/05, effective 7/1/05. Statutory Authority: RCW 18.89.050(1). WSR 01-11-165, § 246-928-990, filed 5/23/01, effective 6/23/01. Statutory Authority: RCW 43.70.250. WSR 99-08-101, § 246-928-990, filed 4/6/99, effective 7/1/99. Statutory Authority: RCW 43.70.280. WSR 98-05-060, § 246-928-990, filed 2/13/98, effective 3/16/98. Statutory Authority: Chapter 18.89 RCW and RCW 43.70.040. WSR 95-18-019, § 246-928-990, filed 8/24/95, effective 9/24/95. Statutory Authority: RCW 43.70.250. WSR 92-15-032 (Order 285), § 246-928-990, filed 7/7/92, effective 8/7/92. Statutory Authority: RCW 18.89.050 and 43.70.250. WSR 92-02-018 (Order 224), § 246-928-990, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. WSR 91-02-049 (Order 121), recodified as § 246-928-990, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.24.086. WSR 88-17-099 (Order PM 741), § 308-195-110, filed 8/23/88.]

REPEALER

The following sections of the Washington Administrative Code are repealed:

WAC 246-928-310	Introduction.
WAC 246-928-440	Continuing education requirements.
WAC 246-928-510	Overview of the qualifications required for licensure as a respiratory care practitioner.
WAC 246-928-530	How new graduates may qualify for temporary practice and what is required.
WAC 246-928-720	Health care institutions.
WAC 246-928-730	Respiratory care practitioner associations or societies.
WAC 246-928-740	Professional liability carriers.
WAC 246-928-750	Courts.
WAC 246-928-760	State and federal agencies.