

**Chapter 18.130 RCW**  
**REGULATION OF HEALTH PROFESSIONS—UNIFORM DISCIPLINARY ACT**

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*AIDS education and training: Chapter 70.24 RCW.*

**RCW 18.130.010 Intent.** It is the intent of the legislature to strengthen and consolidate disciplinary and licensure procedures for the licensed health and health-related professions and businesses by providing a uniform disciplinary act with standardized procedures for the licensure of health care professionals and the enforcement of laws

the purpose of which is to assure the public of the adequacy of professional competence and conduct in the healing arts.

It is also the intent of the legislature that all health and health-related professions newly credentialed by the state come under the Uniform Disciplinary Act.

Further, the legislature declares that the addition of public members on all health care commissions and boards can give both the state and the public, which it has a statutory responsibility to protect, assurances of accountability and confidence in the various practices of health care. [1994 sp.s. c 9 s 601; 1991 c 332 s 1; 1986 c 259 s 1; 1984 c 279 s 1.]

**Severability—Headings and captions not law—Effective date—1994 sp.s. c 9:** See RCW 18.79.900 through 18.79.902.

**Application to scope of practice—1991 c 332:** "Nothing in sections 1 through 39 of this act is intended to change the scope of practice of any health care profession referred to in sections 1 through 39 of this act." [1991 c 332 s 46.]

**Captions not law—1991 c 332:** "Section captions and part headings as used in this act constitute no part of the law." [1991 c 332 s 43.]

**Severability—1986 c 259:** "If any provision of this act or its application to any person or circumstance is held invalid, the remainder of the act or the application of the provision to other persons or circumstances is not affected." [1986 c 259 s 152.]

**RCW 18.130.020 Definitions.** The definitions in this section apply throughout this chapter unless the context clearly requires otherwise.

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

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

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

(4) (a) "Conversion therapy" means a regime that seeks to change an individual's sexual orientation or gender identity. The term includes efforts to change behaviors or gender expressions, or to eliminate or reduce sexual or romantic attractions or feelings toward individuals of the same sex. The term includes, but is not limited to, practices commonly referred to as "reparative therapy."

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

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

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

(7) "Disciplining authority" means the agency, board, or commission having the authority to take disciplinary action against a

holder of, or applicant for, a professional or business license upon a finding of a violation of this chapter or a chapter specified under RCW 18.130.040.

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

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

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

(11) "Secretary" means the secretary of health or the secretary's designee.

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

(13) "Unlicensed practice" means:

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

(b) Representing to a consumer, through offerings, advertisements, or use of a professional title or designation, that the individual is qualified to practice a profession or operate a business identified in RCW 18.130.040, without holding a valid, unexpired, unrevoked, and unsuspended license to do so. [2018 c 300 s 3; 2008 c 134 s 2; 1995 c 336 s 1; 1994 sp.s. c 9 s 602; 1989 1st ex.s. c 9 s 312; 1986 c 259 s 2; 1984 c 279 s 2.]

**~~Intent—Finding—Construction—2018 c 300:~~** See notes following RCW 18.130.180.

**Alphabetization—2008 c 134 s 2:** "The code reviser is directed to put the defined terms in RCW 18.130.020 in alphabetical order." [2008 c 134 s 39.]

**Finding—Intent—2008 c 134:** "From statehood, Washington has constitutionally provided for the regulation of the practice of medicine and the sale of drugs and medicines. This constitutional recognition of the importance of regulating health care practitioners derives not from providers' financial interest in their license, but from the greater need to protect the public health and safety by assuring that the health care providers and medicines that society relies upon meet certain standards of quality.

The legislature finds that the issuance of a license to practice as a health care provider should be a means to promote quality and not be a means to provide financial benefit for providers. Statutory and administrative requirements provide sufficient due process protections to prevent the unwarranted revocation of a health care provider's license. While those due process protections must be maintained, there is an urgent need to return to the original constitutional mandate that patients be ensured quality from their health care providers. The legislature has recognized and medical malpractice reforms have recognized the importance of quality and patient safety through such

measures as a new adverse events reporting system. Reforms to the health care provider licensing system is another step toward improving quality in health care. Therefore, the legislature intends to increase the authority of those engaged in the regulation of health care providers to swiftly identify and remove health care providers who pose a risk to the public." [2008 c 134 s 1.]

**Severability—2008 c 134:** "If any provision of this act or its application to any person or circumstance is held invalid, the remainder of the act or the application of the provision to other persons or circumstances is not affected." [2008 c 134 s 38.]

**Severability—Headings and captions not law—Effective date—1994 sp.s. c 9:** See RCW 18.79.900 through 18.79.902.

**Effective date—Severability—1989 1st ex.s. c 9:** See RCW 43.70.910 and 43.70.920.

**Severability—1986 c 259:** See note following RCW 18.130.010.

**RCW 18.130.035 Background check activities—Fees.** In accordance with RCW 43.135.055, to implement the background check activities conducted pursuant to RCW 18.130.064, the department may establish fees as necessary to recover the cost of these activities and, except as precluded by RCW 43.70.110, the department shall require applicants to submit the required fees along with other information required by the state patrol. [2008 c 285 s 12.]

**Intent—Captions not law—Effective date—2008 c 285:** See notes following RCW 43.22.434.

**RCW 18.130.037 Application and renewal fees.** In accordance with RCW 43.135.055, the department may annually increase application and renewal fees as necessary to recover the cost of implementing the administrative and disciplinary provisions of chapter 134, Laws of 2008. [2008 c 285 s 13.]

**Intent—Captions not law—Effective date—2008 c 285:** See notes following RCW 43.22.434.

**RCW 18.130.039 Licensee not required to participate in third-party reimbursement program.** No licensee subject to this chapter may be required to participate in any public or private third-party reimbursement program or any plans or products offered by a payor as a condition of licensure. [2013 c 293 s 5.]

**RCW 18.130.040 Application to certain professions—Authority of secretary—Grant or denial of licenses—Procedural rules.** (1) This chapter applies only to the secretary and the boards and commissions having jurisdiction in relation to the professions licensed under the chapters specified in this section. This chapter does not apply to any

business or profession not licensed under the chapters specified in this section.

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

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

(ii) Midwives licensed under chapter 18.50 RCW;

(iii) Ocularists licensed under chapter 18.55 RCW;

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

(v) Dental hygienists licensed under chapter 18.29 RCW;

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

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

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

(ix) Hypnotherapists registered, agency affiliated counselors registered, certified, or licensed, and advisors and counselors certified under chapter 18.19 RCW;

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

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

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

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

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

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

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

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

(xviii) Surgical technologists registered under chapter 18.215 RCW;

(xix) Recreational therapists under chapter 18.230 RCW;

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

(xxi) Athletic trainers licensed under chapter 18.250 RCW;

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

(xxiii) Genetic counselors licensed under chapter 18.290 RCW;

(xxiv) Reflexologists certified under chapter 18.108 RCW;

(xxv) Medical assistants—certified, medical assistants—hemodialysis technician, medical assistants—phlebotomist, forensic phlebotomist, medical assistant—EMT, and medical assistants—registered certified and registered under chapter 18.360 RCW;

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

(xxvii) Birth doula certified under chapter 18.47 RCW;

(xxviii) Music therapists licensed under chapter 18.233 RCW;  
(xxix) Behavioral health support specialists certified under chapter 18.227 RCW; and

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

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

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

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

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

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

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

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

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

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

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

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

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

(xii) The board of nursing as established in chapter 18.79 RCW governing licenses and registrations issued under that chapter and under chapter 18.80 RCW;

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

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

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

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

(3) In addition to the authority to discipline license holders, the disciplining authority has the authority to grant or deny licenses. The disciplining authority may also grant a license subject to conditions, which must be in compliance with chapter 18.415 RCW.

(4) All disciplining authorities shall adopt procedures to ensure substantially consistent application of this chapter, the uniform disciplinary act, among the disciplining authorities listed in subsection (2) of this section. [2024 c 362 s 8; 2024 c 217 s 7; 2024 c 50 s 5. Prior: 2023 c 469 s 18; (2023 c 469 s 17 expired October 1, 2023); 2023 c 460 s 15; 2023 c 425 s 27; (2023 c 425 s 26 expired October 1, 2023); 2023 c 270 s 14; (2023 c 270 s 13 expired October 1, 2023); 2023 c 175 s 11; (2023 c 175 s 10 expired October 1, 2023);

2023 c 123 s 21; (2023 c 123 s 20 expired October 1, 2023); 2022 c 217 s 5; 2021 c 179 s 7; (2021 c 179 s 6 expired July 1, 2022); 2020 c 80 s 23; prior: 2019 c 444 s 11; 2019 c 308 s 18; 2019 c 55 s 7; 2017 c 336 s 18; 2016 c 41 s 18; 2015 c 118 s 13; prior: 2013 c 171 s 8; 2013 c 19 s 45; prior: 2012 c 208 s 10; 2012 c 153 s 17; 2012 c 153 s 16; 2012 c 137 s 19; 2012 c 23 s 6; 2011 c 41 s 11; prior: 2010 c 286 s 18; (2010 c 286 s 17 expired August 1, 2010); (2010 c 286 s 16 expired July 1, 2010); 2010 c 65 s 3; (2010 c 65 s 2 expired August 1, 2010); (2010 c 65 s 1 expired July 1, 2010); prior: 2009 c 302 s 14; 2009 c 301 s 8; 2009 c 52 s 2; 2009 c 52 s 1; 2009 c 2 s 16 (Initiative Measure No. 1029, approved November 4, 2008); 2008 c 134 s 18; (2008 c 134 s 17 expired July 1, 2008); prior: 2007 c 269 s 17; 2007 c 253 s 13; 2007 c 70 s 11; 2004 c 38 s 2; prior: 2003 c 275 s 2; 2003 c 258 s 7; prior: 2002 c 223 s 6; 2002 c 216 s 11; 2001 c 251 s 27; 1999 c 335 s 10; 1998 c 243 s 16; prior: 1997 c 392 s 516; 1997 c 334 s 14; 1997 c 285 s 13; 1997 c 275 s 2; prior: 1996 c 200 s 32; 1996 c 81 s 5; prior: 1995 c 336 s 2; 1995 c 323 s 16; 1995 c 260 s 11; 1995 c 1 s 19 (Initiative Measure No. 607, approved November 8, 1994); prior: 1994 sp.s. c 9 s 603; 1994 c 17 s 19; 1993 c 367 s 4; 1992 c 128 s 6; 1990 c 3 s 810; prior: 1988 c 277 s 13; 1988 c 267 s 22; 1988 c 243 s 7; prior: 1987 c 512 s 22; 1987 c 447 s 18; 1987 c 415 s 17; 1987 c 412 s 15; 1987 c 150 s 1; prior: 1986 c 259 s 3; 1985 c 326 s 29; 1984 c 279 s 4.]

**Reviser's note:** This section was amended by 2024 c 50 s 5, 2024 c 217 s 7, and by 2024 c 362 s 8, without reference to one another. All amendments are incorporated in the publication of this section under RCW 1.12.025(2). For rule of construction, see RCW 1.12.025(1).

**Effective date—2024 c 50:** See note following RCW 18.415.010.

**Effective date—2023 c 469 s 18:** "Section 18 of this act takes effect October 1, 2023." [2023 c 469 s 24.]

**Expiration date—2023 c 469 s 17:** "Section 17 of this act expires October 1, 2023." [2023 c 469 s 23.]

**Effective date—2023 c 460 ss 1-22:** See note following RCW 18.265.005.

**Effective date—2023 c 425 s 27:** "Section 27 of this act takes effect October 1, 2023." [2023 c 425 s 31.]

**Expiration date—2023 c 425 s 26:** "Section 26 of this act expires October 1, 2023." [2023 c 425 s 29.]

**Effective date—2023 c 425 ss 1-7, 13-20, and 22-26:** See note following RCW 18.83.170.

**Effective date—2023 c 270 s 14:** "Section 14 of this act takes effect October 1, 2023." [2023 c 270 s 17.]

**Expiration date—2023 c 270 s 13:** "Section 13 of this act expires October 1, 2023." [2023 c 270 s 16.]

**Effective date—2023 c 175 s 11:** "Section 11 of this act takes effect October 1, 2023." [2023 c 175 s 14.]

**Expiration date—2023 c 175 s 10:** "Section 10 of this act expires October 1, 2023." [2023 c 175 s 13.]

**Effective date—2023 c 123 s 21:** "Section 21 of this act takes effect October 1, 2023." [2023 c 123 s 34.]

**Expiration date—2023 c 123 s 20:** "Section 20 of this act expires October 1, 2023." [2023 c 123 s 33.]

**Short title—2023 c 123:** See RCW 18.80.900.

**Effective date—2022 c 217 ss 1-5:** See note following RCW 18.47.010.

**Effective date—2021 c 179 s 7:** "Section 7 of this act takes effect July 1, 2022." [2021 c 179 s 9.]

**Expiration date—2021 c 179 s 6:** "Section 6 of this act expires July 1, 2022." [2021 c 179 s 8.]

**Effective date—2020 c 80 ss 12-59:** See note following RCW 7.68.030.

**Intent—2020 c 80:** See note following RCW 18.71A.010.

**Findings—2019 c 308:** See note following RCW 18.06.010.

**Effective date—2017 c 336 ss 18 and 19:** "Sections 18 and 19 of this act are necessary for the immediate preservation of the public peace, health, or safety, or support of the state government and its existing public institutions, and take effect July 1, 2017." [2017 c 336 s 20.]

**Finding—2017 c 336:** See note following RCW 9.96.060.

**Effective date—2016 c 41:** See note following RCW 18.108.010.

**Effective date—2015 c 118:** See note following RCW 18.380.010.

**Effective date—2013 c 171 s 8:** "Section 8 of this act takes effect July 1, 2016." [2013 c 171 s 10.]

**Effective date—2013 c 19 s 45:** "Section 45 of this act takes effect July 1, 2016." [2013 c 19 s 129.]

**Effective date—2012 c 208 ss 2-10:** See note following RCW 18.88A.020.

**Findings—Rules—2012 c 208:** See notes following RCW 18.88A.082.

**Effective date—2012 c 153 ss 15 and 17:** See note following RCW 18.360.005.

**Rules—2012 c 153:** See note following RCW 18.360.005.

**Finding—Purpose—Rules—Effective date—2012 c 137:** See notes following RCW 18.108.005.

**Effective date—2010 c 286 s 18:** "Section 18 of this act takes effect August 1, 2010." [2010 c 286 s 22.]

**Expiration date—2010 c 286 s 17:** "Section 17 of this act expires August 1, 2010." [2010 c 286 s 21.]

**Effective date—2010 c 286 s 17:** "Section 17 of this act takes effect July 1, 2010." [2010 c 286 s 20.]

**Expiration date—2010 c 286 s 16:** "Section 16 of this act expires July 1, 2010." [2010 c 286 s 19.]

**Intent—2010 c 286:** See RCW 18.06.005.

**Effective date—2010 c 65 s 3:** "Section 3 of this act takes effect August 1, 2010." [2010 c 65 s 9.]

**Expiration date—2010 c 65 s 2:** "Section 2 of this act expires August 1, 2010." [2010 c 65 s 8.]

**Effective date—2010 c 65 s 2:** "Section 2 of this act takes effect July 1, 2010." [2010 c 65 s 7.]

**Expiration date—2010 c 65 s 1:** "Section 1 of this act expires July 1, 2010." [2010 c 65 s 6.]

**Effective date—Implementation—2009 c 302:** See RCW 18.290.900 and 18.290.901.

**Intent—Implementation—2009 c 301:** See notes following RCW 18.35.010.

**Speech-language pathology assistants—Certification requirements—2009 c 301:** See note following RCW 18.35.040.

**Effective date—2009 c 52 s 1:** "Section 1 of this act is necessary for the immediate preservation of the public peace, health, or safety, or support of the state government and its existing public institutions, and takes effect July 1, 2009." [2009 c 52 s 3.]

**Effective date—2009 c 52 s 2:** "Section 2 of this act takes effect July 1, 2010." [2009 c 52 s 4.]

**Contingent effective date—2009 c 2 (Initiative Measure No. 1029) s 16:** "Section 16 of this act takes effect if section 18, chapter 134, Laws of 2008 is signed into law by April 6, 2008." [2009 c 2 s 24 (Initiative Measure No. 1029, approved November 4, 2008).]

**Intent—Findings—Construction—Short title—2009 c 2 (Initiative Measure No. 1029):** See notes following RCW 18.88B.050.

**Effective date—2008 c 134 s 18:** "Section 18 of this act takes effect July 1, 2008." [2008 c 134 s 37.]

**Expiration date—2008 c 134 s 17:** "Section 17 of this act expires July 1, 2008." [2008 c 134 s 36.]

**Finding—Intent—Severability—2008 c 134:** See notes following RCW 18.130.020.

**Application—Implementation—2007 c 269:** See RCW 18.260.900 and 18.260.901.

**Effective date—Implementation—2007 c 253:** See RCW 18.250.901 and 18.250.902.

**Effective date—2004 c 38:** See note following RCW 18.155.075.

**Effective date—2003 c 275 s 2:** "Section 2 of this act is necessary for the immediate preservation of the public peace, health, or safety, or support of the state government and its existing public institutions, and takes effect July 1, 2003." [2003 c 275 s 4.]

**Severability—Effective date—2003 c 258:** See notes following RCW 18.79.330.

**Effective date—2002 c 216:** See RCW 18.230.901.

**Severability—2001 c 251:** See RCW 18.225.900.

**Effective dates—1998 c 243:** See RCW 18.205.900.

**Short title—Findings—Construction—Conflict with federal requirements—Part headings and captions not law—1997 c 392:** See notes following RCW 74.39A.009.

**Effective dates—1997 c 334:** See note following RCW 18.89.010.

**Intent—Purpose—1997 c 285:** See RCW 18.200.005.

**Effective date—1996 c 81:** See note following RCW 70.128.120.

**Effective date—1995 c 336 ss 2 and 3:** "Sections 2 and 3 of this act are necessary for the immediate preservation of the public peace, health, or safety, or support of the state government and its existing public institutions, and shall take effect immediately [May 11, 1995]." [1995 c 336 s 11.]

**Effective date—1995 c 260 ss 7-11:** "Sections 7 through 11 of this act shall take effect July 1, 1996." [1995 1st sp.s. c 18 s 116; 1995 c 260 s 12.]

**Short title—1995 c 1 (Initiative Measure No. 607):** See RCW 18.30.900.

**Severability—Headings and captions not law—Effective date—1994 sp.s. c 9:** See RCW 18.79.900 through 18.79.902.

**Effective date—1987 c 412:** See RCW 18.84.901.

**Severability—1987 c 150:** See RCW 18.122.901.

**Severability—1986 c 259:** See note following RCW 18.130.010.

**RCW 18.130.042 Required licensure information—Sale to third party prohibited—Exemptions.** (1) All applicants who submit applications for licensure on or after January 1, 2025, shall provide the following information with their application:

- (a) Race;
- (b) Ethnicity;
- (c) Gender;
- (d) Languages spoken;
- (e) Provider specialty, where applicable;
- (f) Primary practice location, if known at the time of application; and
- (g) Secondary practice location, if applicable and if known at the time of application.

(2) All license holders shall provide the following information when they renew their licenses on or after January 1, 2025, in addition to any other information required by the relevant disciplining authority:

(a) The information in subsection (1)(a) through (e) of this section, except, after license holders provide this information one time, they shall be required to provide only changes to this information with subsequent renewals;

- (b) Whether the licensee is currently practicing;
- (c) Primary practice location at the time of renewal; and
- (d) Secondary practice location at the time of renewal, if applicable.

(3) The form used to collect information under this section must include the same race and ethnicity categories and subgroups required for the collection of student-level data in RCW 28A.300.042 (1) and (3).

(4) The department shall not sell the information collected pursuant to subsection (1) or (2) of this section to any third party.

(5) Applicants and licensees subject to demographic and practice information provision requirements under chapters 18.71, 18.71A, and 18.71B RCW are exempt from the requirements of this section. [2023 c 353 s 1.]

**RCW 18.130.045 Massage therapists—Procedures governing convicted prostitutes.** RCW 18.108.085 shall govern the issuance and revocation of licenses issued or applied for under chapter 18.108 RCW to or by persons convicted of violating RCW 9A.88.030, 9A.88.070, 9A.88.080, or 9A.88.090 or equivalent local ordinances. [1995 c 353 s 3.]

**RCW 18.130.050 Authority of disciplining authority.** Except as provided in RCW 18.130.062, the disciplining authority has the following authority:

- (1) To adopt, amend, and rescind such rules as are deemed necessary to carry out this chapter;
- (2) To investigate all complaints or reports of unprofessional conduct as defined in this chapter;
- (3) To hold hearings as provided in this chapter;
- (4) To issue subpoenas and administer oaths in connection with any investigation, consideration of an application for license, hearing, or proceeding held under this chapter;
- (5) To take or cause depositions to be taken and use other discovery procedures as needed in any investigation, hearing, or proceeding held under this chapter;
- (6) To compel attendance of witnesses at hearings;
- (7) In the course of investigating a complaint or report of unprofessional conduct, to conduct practice reviews and to issue citations and assess fines for failure to produce documents, records, or other items in accordance with RCW 18.130.230;
- (8) To take emergency action ordering summary suspension of a license, or restriction or limitation of the license holder's practice pending proceedings by the disciplining authority. Within fourteen days of a request by the affected license holder, the disciplining authority must provide a show cause hearing in accordance with the requirements of RCW 18.130.135. In addition to the authority in this subsection, a disciplining authority shall, except as provided in RCW 9.97.020:
  - (a) Consistent with RCW 18.130.370, issue a summary suspension of the license or temporary practice permit of a license holder prohibited from practicing a health care profession in another state, federal, or foreign jurisdiction because of an act of unprofessional conduct that is substantially equivalent to an act of unprofessional conduct prohibited by this chapter or any of the chapters specified in RCW 18.130.040. The summary suspension remains in effect until proceedings by the Washington disciplining authority have been completed;
  - (b) Consistent with RCW 18.130.400, issue a summary suspension of the license or temporary practice permit if, under RCW 74.39A.051, the license holder is prohibited from employment in the care of vulnerable adults based upon a department of social and health services' final finding of abuse or neglect of a minor or abuse, abandonment, neglect, or financial exploitation of a vulnerable adult. The summary suspension remains in effect until proceedings by the disciplining authority have been completed;
- (9) To conduct show cause hearings in accordance with RCW 18.130.062 or 18.130.135 to review an action taken by the disciplining authority to suspend a license or restrict or limit a license holder's practice pending proceedings by the disciplining authority;
- (10) To use a presiding officer as authorized in RCW 18.130.095(3) or the office of administrative hearings as authorized in chapter 34.12 RCW to conduct hearings. Disciplining authorities identified in RCW 18.130.040(2) shall make the final decision regarding disposition of the license unless the disciplining authority elects to delegate in writing the final decision to the presiding officer. Disciplining authorities identified in RCW 18.130.040(2)(b) may not delegate the final decision regarding disposition of the license or imposition of sanctions to a presiding officer in any case

pertaining to standards of practice or where clinical expertise is necessary, including deciding any motion that results in dismissal of any allegation contained in the statement of charges. Presiding officers acting on behalf of the secretary shall enter initial orders. The secretary may, by rule, provide that initial orders in specified classes of cases may become final without further agency action unless, within a specified time period:

(a) The secretary upon his or her own motion determines that the initial order should be reviewed; or

(b) A party to the proceedings files a petition for administrative review of the initial order;

(11) To use individual members of the boards to direct investigations and to authorize the issuance of a citation under subsection (7) of this section. However, the member of the board shall not subsequently participate in the hearing of the case;

(12) To enter into contracts for professional services determined to be necessary for adequate enforcement of this chapter;

(13) To contract with license holders or other persons or organizations to provide services necessary for the monitoring and supervision of license holders who are placed on probation, whose professional activities are restricted, or who are for any authorized purpose subject to monitoring by the disciplining authority;

(14) To adopt standards of professional conduct or practice;

(15) To grant or deny license applications, and in the event of a finding of unprofessional conduct by an applicant or license holder, to impose any sanction against a license applicant or license holder provided by this chapter. After January 1, 2009, all sanctions must be issued in accordance with RCW 18.130.390;

(16) To restrict or place conditions on the practice of new licensees in order to protect the public and promote the safety of and confidence in the health care system;

(17) To designate individuals authorized to sign subpoenas and statements of charges;

(18) To establish panels consisting of three or more members of the board to perform any duty or authority within the board's jurisdiction under this chapter;

(19) To review and audit the records of licensed health facilities' or services' quality assurance committee decisions in which a license holder's practice privilege or employment is terminated or restricted. Each health facility or service shall produce and make accessible to the disciplining authority the appropriate records and otherwise facilitate the review and audit. Information so gained shall not be subject to discovery or introduction into evidence in any civil action pursuant to RCW 70.41.200(3);

(20) To enter into contracts with persons or entities to review applications for licensure or temporary practice permits, provided that the disciplining authority shall make the final decision as to whether to deny, grant with conditions, or grant a license or temporary practice permit. [2023 c 425 s 12; 2016 c 81 s 13. Prior: 2013 c 109 s 1; 2013 c 86 s 2; 2008 c 134 s 3; 2006 c 99 s 4; 1995 c 336 s 4; prior: 1993 c 367 s 21; 1993 c 367 s 5; 1987 c 150 s 2; 1984 c 279 s 5.]

**Finding—Conflict with federal requirements—2016 c 81:** See notes following RCW 9.97.010.

**Effective date—2013 c 86:** See note following RCW 18.130.400.

**Finding—Intent—Severability—2008 c 134:** See notes following RCW 18.130.020.

**Severability—1987 c 150:** See RCW 18.122.901.

**RCW 18.130.055 Authority of disciplining authority—Denial of applications.** (1) The disciplining authority may deny an application for licensure or grant a license with conditions if the applicant:

(a) Has had his or her license to practice any health care profession suspended, revoked, or restricted, by competent authority in any state, federal, or foreign jurisdiction, except as provided in RCW 18.130.450;

(b) Has committed any act defined as unprofessional conduct for a license holder under RCW 18.130.180, except as provided in RCW 9.97.020 and 18.130.450;

(c) Has been convicted or is subject to current prosecution or pending charges of a crime involving moral turpitude or a crime identified in RCW 43.43.830, except as provided in RCW 9.97.020, 18.205.097, and 18.19.095. For purposes of this section, conviction includes all instances in which a plea of guilty or nolo contendere is the basis for the conviction and all proceedings in which the prosecution or sentence has been deferred or suspended. At the request of an applicant for an original license whose conviction is under appeal, the disciplining authority may defer decision upon the application during the pendency of such a prosecution or appeal;

(d) Fails to prove that he or she is qualified in accordance with the provisions of this chapter, the chapters identified in RCW 18.130.040(2), or the rules adopted by the disciplining authority; or

(e) Is not able to practice with reasonable skill and safety to consumers by reason of any mental or physical condition.

(i) The disciplining authority may require the applicant, at his or her own expense, to submit to a mental, physical, or psychological examination by one or more licensed health professionals designated by the disciplining authority. The disciplining authority shall provide written notice of its requirement for a mental or physical examination that includes a statement of the specific conduct, event, or circumstances justifying an examination and a statement of the nature, purpose, scope, and content of the intended examination. If the applicant fails to submit to the examination or provide the results of the examination or any required waivers, the disciplining authority may deny the application.

(ii) An applicant governed by this chapter is deemed to have given consent to submit to a mental, physical, or psychological examination when directed in writing by the disciplining authority and further to have waived all objections to the admissibility or use of the examining health professional's testimony or examination reports by the disciplining authority on the grounds that the testimony or reports constitute privileged communications.

(2) The provisions of RCW 9.95.240 and chapter 9.96A RCW do not apply to a decision to deny a license under this section.

(3) The disciplining authority shall give written notice to the applicant of the decision to deny a license or grant a license with conditions in response to an application for a license. The notice

must state the grounds and factual basis for the action and be served upon the applicant.

(4) A license applicant who is aggrieved by the decision to deny the license or grant the license with conditions has the right to an adjudicative proceeding. The application for adjudicative proceeding must be in writing, state the basis for contesting the adverse action, include a copy of the adverse notice, and be served on and received by the department within twenty-eight days of the decision. The license applicant has the burden to establish, by a preponderance of evidence, that the license applicant is qualified in accordance with the provisions of this chapter, the chapters identified in RCW 18.130.040(2), and the rules adopted by the disciplining authority. [2023 c 192 s 1. Prior: 2019 c 446 s 46; 2019 c 444 s 24; 2016 c 81 s 12; 2008 c 134 s 19.]

**Effective date—2023 c 192:** See note following RCW 18.130.450.

**Finding—Conflict with federal requirements—2016 c 81:** See notes following RCW 9.97.010.

**Finding—Intent—Severability—2008 c 134:** See notes following RCW 18.130.020.

**RCW 18.130.057 Disciplining authority—Duties—Documents.** (1) A disciplining authority shall provide a person or entity making a complaint or report under RCW 18.130.080 with a reasonable opportunity to supplement or amend the contents of the complaint or report. The license holder must be provided an opportunity to respond to any supplemental or amended complaint or report. The disciplining authority shall promptly respond to inquiries made by the license holder or the person or entity making a complaint or report regarding the status of the complaint or report.

(2)(a) Pursuant to chapter 42.56 RCW, following completion of an investigation or closure of a report or complaint, the disciplining authority shall, upon request, provide the license holder or the person or entity making the complaint or report with a copy of the file relating to the complaint or report, including, but not limited to, any response submitted by the license holder under RCW 18.130.095(1).

(b) The disciplining authority may not disclose documents in the file that:

(i) Contain confidential or privileged information regarding a patient other than the person making the complaint or report; or

(ii) Contain information exempt from public inspection and copying under chapter 42.56 RCW.

(c) The exemptions in (b) of this subsection are inapplicable to the extent that the relevant information can be deleted from the documents in question.

(d) The disciplining authority may impose a reasonable charge for copying the file consistent with the charges allowed for copying public records under RCW 42.56.120.

(3)(a) Prior to any final decision on any disciplinary proceeding before a disciplining authority, the disciplining authority shall provide the person submitting the complaint or report or his or her representative, if any, an opportunity to be heard through an oral or

written impact statement about the effect of the person's injury on the person and his or her family and on a recommended sanction.

(b) If the license holder is not present at the disciplinary proceeding, the disciplining authority shall transmit the impact statement to the license holder, who shall certify to the disciplining authority that he or she has received it.

(c) For purposes of this subsection, representatives of the person submitting the complaint or report include his or her family members and such other affected parties as may be designated by the disciplining authority upon request.

(4) A disciplining authority shall inform, in writing, the license holder and person or entity submitting the complaint or report of the final disposition of the complaint or report.

(5)(a) If the disciplining authority closes a complaint or report prior to issuing a statement of charges under RCW 18.130.090 or a statement of allegations under RCW 18.130.172, the person or entity submitting the report may, within thirty days of receiving notice under subsection (4) of this section, request the disciplining authority to reconsider the closure of the complaint or report on the basis of new information relating to the original complaint or report. A request for reconsideration made under this subsection may only be brought in relation to the original complaint and may only be brought one time.

(b) The disciplining authority shall, within thirty days of receiving the request for reconsideration, notify the license holder of the request and the new information providing the basis therefor. The license holder has thirty days to provide a response. The disciplining authority shall notify the person or entity and the license holder in writing of its final decision on the request for reconsideration, including an explanation of the reasoning behind the decision. [2011 c 157 s 1.]

**RCW 18.130.060 Additional authority of secretary.** In addition to the authority specified in RCW 18.130.050 and 18.130.062, the secretary has the following additional authority:

(1) To employ such investigative, administrative, and clerical staff as necessary for the enforcement of this chapter. The secretary must, whenever practical, make primary assignments on a long-term basis to foster the development and maintenance of staff expertise. To ensure continuity and best practices, the secretary will regularly evaluate staff assignments and workload distribution;

(2) Upon the request of a board or commission, to appoint pro tem members to participate as members of a panel of the board or commission in connection with proceedings specifically identified in the request. Individuals so appointed must meet the same minimum qualifications as regular members of the board or commission. Pro tem members appointed for matters under this chapter are appointed for a term of no more than one year. No pro tem member may serve more than four one-year terms. While serving as board or commission members pro tem, persons so appointed have all the powers, duties, and immunities, and are entitled to the emoluments, including travel expenses in accordance with RCW 43.03.050 and 43.03.060, of regular members of the board or commission. The chairperson of a panel shall be a regular member of the board or commission appointed by the board or commission chairperson. Panels have authority to act as directed by the board or commission with respect to all matters subject to the jurisdiction of

the board or commission and within the authority of the board or commission. The authority to act through panels does not restrict the authority of the board or commission to act as a single body at any phase of proceedings within the board's or commission's jurisdiction. Board or commission panels may issue final orders and decisions with respect to matters and cases delegated to the panel by the board or commission. Final decisions may be appealed as provided in chapter 34.05 RCW, the administrative procedure act;

(3) To establish fees to be paid for witnesses, expert witnesses, and consultants used in any investigation and to establish fees to witnesses in any agency adjudicative proceeding as authorized by RCW 34.05.446;

(4) To conduct investigations and practice reviews at the direction of the disciplining authority and to issue subpoenas, administer oaths, and take depositions in the course of conducting those investigations and practice reviews at the direction of the disciplining authority;

(5) To have the health professions regulatory program establish a system to recruit potential public members, to review the qualifications of such potential members, and to provide orientation to those public members appointed pursuant to law by the governor or the secretary to the boards and commissions specified in RCW 18.130.040(2)(b), and to the advisory committees and councils for professions specified in RCW 18.130.040(2)(a); and

(6) To adopt rules, in consultation with the disciplining authorities, requiring every license holder to report information identified in RCW 18.130.070. [2008 c 134 s 4; 2006 c 99 s 1; 2001 c 101 s 1; 1995 c 336 s 5; 1991 c 3 s 269; 1989 c 175 s 68; 1987 c 150 s 3; 1984 c 279 s 6.]

**Finding—Intent—Severability—2008 c 134:** See notes following RCW 18.130.020.

**Effective date—1989 c 175:** See note following RCW 34.05.010.

**Severability—1987 c 150:** See RCW 18.122.901.

**RCW 18.130.062 Authority of secretary—Disciplinary process—Sexual misconduct—Victim interview training.** (1) With regard to complaints that only allege that a license holder has committed an act or acts of unprofessional conduct involving sexual misconduct, the secretary shall serve as the sole disciplining authority in every aspect of the disciplinary process, including initiating investigations, investigating, determining the disposition of the complaint, holding hearings, preparing findings of fact, issuing orders or dismissals of charges as provided in RCW 18.130.110, entering into stipulations permitted by RCW 18.130.172, or issuing summary suspensions under RCW 18.130.135. The board or commission shall review all cases and only refer to the secretary sexual misconduct cases that do not involve clinical expertise or standard of care issues.

(2) Beginning July 1, 2016, for all complaints alleging an act or acts of unprofessional conduct involving sexual misconduct, regardless of whether the secretary or a board or commission is the disciplining authority, all victim interviews conducted as part of an investigation

must be conducted by a person who has successfully completed a training program on interviewing victims of sexual misconduct in a manner that minimizes the negative impacts on the victims. The training program may be provided by the disciplining authority, the department, or an outside entity. When determining the type of training that is appropriate to comply with this subsection, the disciplining authority shall consult with at least one statewide organization that provides information, training, and expertise to persons and entities who support victims, family and friends, the general public, and other persons whose lives have been affected by sexual assault. [2015 c 159 s 1; 2008 c 134 s 5.]

**Finding—Intent—Severability—2008 c 134:** See notes following RCW 18.130.020.

**RCW 18.130.063 Disclosure—Sexual misconduct.** (1) If a license holder subject to this chapter has been sanctioned by a disciplining authority on or after October 1, 2019, for an act or acts of unprofessional conduct involving sexual misconduct, the license holder or his or her designee must provide a disclosure to any patient scheduled for an appointment with the license holder during the period of time that the license holder is subject to the order or stipulation. The disclosure must only be provided to a patient at or prior to the patient's first visit with the license holder following entry of the order or stipulation.

(2) The disclosure must include a copy of the public order or stipulation, a description of all sanctions placed on the license holder by the disciplining authority in the order or stipulation, the duration of all sanctions, the disciplining authority's telephone number, and an explanation of how the patient can find more information about the license holder on the disciplining authority's online license information website.

(3) The license holder must provide the patient or the patient's surrogate decision maker as designated under RCW 7.70.065 with the disclosure indicating that the patient has received a copy of the public order or stipulation and is aware the provider has been sanctioned for unprofessional conduct involving sexual misconduct, which must be signed by the patient or a surrogate decision maker. A copy of the signed disclosure must be maintained in the patient's file.

(4) A disciplining authority may adopt rules to exempt certain types of sexual misconduct from the requirements of this section.

(5) This section does not apply to license holders subject to chapter 18.92 RCW.

(6) For purposes of this section:

(a) "Order" means an order issued by a disciplining authority including, but not limited to, an agreed order, default order, final order, or a reinstatement order, but does not include a summary restriction order.

(b) "Stipulation" means a stipulation to informal disposition. [2019 c 69 s 1.]

**Effective date—2019 c 69:** "This act takes effect October 1, 2019." [2019 c 69 s 2.]

**RCW 18.130.064 Authority and duties—Secretary and disciplining authority—Background checks.**

(1) (a) The secretary is authorized to receive criminal history record information that includes nonconviction data for any purpose associated with investigation or licensing and investigate the complete criminal history and pending charges of all applicants and license holders.

(b) Dissemination or use of nonconviction data for purposes other than that authorized in this section is prohibited. Disciplining authorities shall restrict the use of background check results in determining the individual's suitability for a license and in conducting disciplinary functions.

(2) (a) The secretary shall establish requirements for each applicant for an initial license to obtain a state background check through the state patrol prior to the issuance of any license. The background check may be fingerprint-based at the discretion of the department.

(b) The secretary shall specify those situations where a background check under (a) of this subsection is inadequate and an applicant for an initial license must obtain an electronic fingerprint-based national background check through the state patrol and federal bureau of investigation. Situations where a background check is inadequate may include instances where an applicant has recently lived out of state or where the applicant has a criminal record in Washington. The secretary shall issue a temporary practice permit to an applicant who must have a national background check conducted if the background check conducted under (a) of this subsection does not reveal a criminal record in Washington, and if the applicant meets the provisions of RCW 18.130.075.

(3) In addition to the background check required in subsection (2) of this section, an investigation may include an examination of state and national criminal identification data. The disciplining authority shall use the information for determining eligibility for licensure or renewal. The disciplining authority may also use the information when determining whether to proceed with an investigation of a report under RCW 18.130.080. For a national criminal history records check, the department shall require fingerprints be submitted to and searched through the Washington state patrol identification and criminal history section. The Washington state patrol shall forward the fingerprints to the federal bureau of investigation.

(4) The secretary shall adopt rules to require license holders to report to the disciplining authority any arrests, convictions, or other determinations or findings by a law enforcement agency occurring after June 12, 2008, for a criminal offense. The report must be made within fourteen days of the conviction.

(5) The secretary shall conduct an annual review of a representative sample of all license holders who have previously obtained a background check through the department. The selection of the license holders to be reviewed must be representative of all categories of license holders and geographic locations.

(6) (a) When deciding whether or not to issue an initial license, the disciplining authority shall consider the results of any background check conducted under subsection (2) of this section that reveals a conviction for any criminal offense that constitutes unprofessional conduct under this chapter or the chapters specified in RCW 18.130.040(2) or a series of arrests that when considered together

demonstrate a pattern of behavior that, without investigation, may pose a risk to the safety of the license holder's patients.

(b) If the background check conducted under subsection (2) of this section reveals any information related to unprofessional conduct that has not been previously disclosed to the disciplining authority, the disciplining authority shall take appropriate disciplinary action against the license holder.

(7) The department shall:

(a) Require the applicant or license holder to submit full sets of fingerprints if necessary to complete the background check;

(b) Require the applicant to submit any information required by the state patrol; and

(c) Notify the applicant if their background check reveals a criminal record. Only when the background check reveals a criminal record will an applicant receive a notice. Upon receiving such a notice, the applicant may request and the department shall provide a copy of the record to the extent permitted under RCW 10.97.050, including making accessible to the applicant for their personal use and information any records of arrest, charges, or allegations of criminal conduct or other nonconviction data pursuant to RCW 10.97.050(4).

(8) Criminal justice agencies shall provide the secretary with both conviction and nonconviction information that the secretary requests for investigations under this chapter.

(9) There is established a unit within the department for the purpose of detection, investigation, and prosecution of any act prohibited or declared unlawful under this chapter. The secretary will employ supervisory, legal, and investigative personnel for the unit who must be qualified by training and experience.

(10) For purposes of issuing multistate licenses under chapter 18.80 RCW, the board of nursing is authorized to receive criminal history record information that includes nonconviction data for any purpose associated with licensing and investigate the complete criminal history and pending charges of all applicants and license holders. [2023 c 123 s 22; 2008 c 134 s 7.]

**Short title—2023 c 123:** See RCW 18.80.900.

**Finding—Intent—Severability—2008 c 134:** See notes following RCW 18.130.020.

**RCW 18.130.065 Rules, policies, and orders—Secretary's role.**

The secretary of health shall review and coordinate all proposed rules, interpretive statements, policy statements, and declaratory orders, as defined in chapter 34.05 RCW, that are proposed for adoption or issuance by any health profession board or commission vested with rule-making authority identified under RCW 18.130.040(2)(b). The secretary shall review the proposed policy statements and declaratory orders against criteria that include the effect of the proposed rule, statement, or order upon existing health care policies and practice of health professionals. Within thirty days of the receipt of a proposed rule, interpretive statement, policy statement, or declaratory order from the originating board or commission, the secretary shall inform the board or commission of the results of the review, and shall provide any comments or suggestions

that the secretary deems appropriate. Emergency rule making is not subject to this review process. The secretary is authorized to adopt rules and procedures for the coordination and review under this section. [1995 c 198 s 26.]

**RCW 18.130.070 Rules requiring reports—Court orders—Immunity from liability—Licensees required to report.** (1)(a) The secretary shall adopt rules requiring every license holder to report to the appropriate disciplining authority any conviction, determination, or finding that another license holder has committed an act which constitutes unprofessional conduct, or to report information to the disciplining authority, physician health program, or voluntary substance use disorder monitoring program approved by the disciplining authority, which indicates that the other license holder may not be able to practice his or her profession with reasonable skill and safety to consumers as a result of a mental or physical condition.

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

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

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

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

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

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

(ii) A physician health program or voluntary substance use disorder monitoring program approved by a disciplining authority under RCW 18.130.175 if the license holder is currently enrolled in the program, so long as the license holder actively participates in the program and the license holder's impairment does not constitute a clear and present danger to the public health, safety, or welfare.

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

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

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

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

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

(b) Failure to report within thirty days of notice of the conviction, determination, finding, or disqualification constitutes grounds for disciplinary action. [2022 c 43 s 9; 2007 c 273 s 23; 2006 c 99 s 2; 2005 c 470 s 2; 1998 c 132 s 8; 1989 c 373 s 19; 1986 c 259 s 4; 1984 c 279 s 7.]

**Effective date—Implementation—2007 c 273:** See RCW 70.230.900 and 70.230.901.

**Finding—Intent—Severability—1998 c 132:** See notes following RCW 18.71.0195.

**Severability—1986 c 259:** See note following RCW 18.130.010.

**RCW 18.130.075 Temporary practice permits—Penalties.** (1) If an individual licensed in another state that has licensing standards substantially equivalent to Washington applies for a license, the disciplining authority shall issue a temporary practice permit authorizing the applicant to practice the profession pending completion of documentation that the applicant meets the requirements for a license and is also not subject to denial of a license or issuance of a conditional license under this chapter. The temporary permit may reflect statutory limitations on the scope of practice. The permit shall be issued only upon the disciplining authority receiving verification from the states in which the applicant is licensed that the applicant is currently licensed and is not subject to charges or disciplinary action for unprofessional conduct or impairment. Notwithstanding RCW 34.05.422(3), the disciplining authority shall establish, by rule, the duration of the temporary practice permits.

(2) Failure to surrender the temporary practice permit is a misdemeanor under RCW 9A.20.010 and shall be unprofessional conduct under this chapter.

(3) The issuance of temporary permits is subject to the provisions of this chapter, including summary suspensions. [2003 c 53 s 140; 1991 c 332 s 2.]

**Intent—Effective date—2003 c 53:** See notes following RCW 2.48.180.

**Application to scope of practice—Captions not law—1991 c 332:**  
See notes following RCW 18.130.010.

**RCW 18.130.077 Licensure requirements waiver for out-of-state and nationally certified applicants.** (1) Disciplining authorities shall waive education, training, experience, and exam requirements for applicants who have been credentialed in another state or states with substantially equivalent standards for at least two years immediately preceding their application with no interruption in licensure last longer than 90 days.

(2) Disciplining authorities may waive education, training, experience, or exam requirements for applicants who have achieved a national certification for the profession as determined by the disciplining authority in rule.

(3) Disciplining authorities may only issue credentials under this section to applicants who:

(a) Are not subject to denial of a license or issuance of a conditional license under this chapter;

(b) Have not been subject to disciplinary action for unprofessional conduct or impairment in any state, federal, or foreign jurisdiction in the two years preceding their application or during the pendency of their application; and

(c) Are not under investigation or subject to charges in any state, federal, or foreign jurisdiction during the pendency of their application. [2023 c 425 s 8.]

**RCW 18.130.080 Unprofessional conduct—Complaint—Investigation—Civil penalty.** (1)(a) An individual, an impaired practitioner program, or a voluntary substance abuse monitoring program approved by a disciplining authority, may submit a written complaint to the disciplining authority charging a license holder or applicant with unprofessional conduct and specifying the grounds therefor or to report information to the disciplining authority, or voluntary substance abuse monitoring program, or an impaired practitioner program approved by the disciplining authority, which indicates that the license holder may not be able to practice his or her profession with reasonable skill and safety to consumers as a result of a mental or physical condition.

(b)(i) Every license holder, corporation, organization, health care facility, and state and local governmental agency that employs a license holder shall report to the disciplining authority when the employed license holder's services have been terminated or restricted based upon a final determination that the license holder has either committed an act or acts that may constitute unprofessional conduct or that the license holder may not be able to practice his or her profession with reasonable skill and safety to consumers as a result of a mental or physical condition.

(ii) All reports required by (b)(i) of this subsection must be submitted to the disciplining authority as soon as possible, but no later than twenty days after a determination has been made. 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 number of the license holder being reported;

(C) The case number of any patient whose treatment is the subject of the report;

(D) A brief description or summary of the facts that gave rise to 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, the date of filing, and the docket number; and

(F) Any further information that would aid in the evaluation of the report.

(iii) Mandatory reports required by (b)(i) of this subsection are exempt from public inspection and copying to the extent permitted under chapter 42.56 RCW or to the extent that public inspection or copying of the report would invade or violate a person's right to privacy as set forth in RCW 42.56.050.

(2) If the disciplining authority determines that a complaint submitted under subsection (1) of this section merits investigation, or if the disciplining authority has reason to believe, without a formal complaint, that a license holder or applicant may have engaged in unprofessional conduct, the disciplining authority shall investigate to determine whether there has been unprofessional conduct. In determining whether or not to investigate, the disciplining authority shall consider any prior complaints received by the disciplining authority, any prior findings of fact under RCW 18.130.110, any stipulations to informal disposition under RCW 18.130.172, and any comparable action taken by other state disciplining authorities.

(3) Notwithstanding subsection (2) of this section, the disciplining authority shall initiate an investigation in every instance where:

(a) The disciplining authority receives information that a health care provider has been disqualified from participating in the federal medicare program, under Title XVIII of the federal social security act, or the federal medicaid program, under Title XIX of the federal social security act; or

(b) There is a pattern of complaints, arrests, or other actions that may not have resulted in a formal adjudication of wrongdoing, but when considered together demonstrate a pattern of similar conduct that, without investigation, likely poses a risk to the safety of the license holder's patients.

(4) Failure of a license holder to submit a mandatory report to the disciplining authority under subsection (1)(b) of this section is punishable by a civil penalty not to exceed five hundred dollars and constitutes unprofessional conduct.

(5) If a report has been made by a hospital to the department under RCW 70.41.210 or an ambulatory surgical facility under RCW 70.230.120, a report to the disciplining authority under subsection (1)(b) of this section is not required.

(6) A person is immune from civil liability, whether direct or derivative, for providing information in good faith to the disciplining authority under this section.

(7)(a) The secretary is authorized to receive criminal history record information that includes nonconviction data for any purpose associated with the investigation or licensing of persons under this chapter.

(b) Dissemination or use of nonconviction data for purposes other than that authorized in this section is prohibited. [2008 c 134 s 8; 2006 c 99 s 5; 1998 c 132 s 9; 1986 c 259 s 5; 1984 c 279 s 8.]

**Finding—Intent—Severability—2008 c 134:** See notes following RCW 18.130.020.

**Finding—Intent—Severability—1998 c 132:** See notes following RCW 18.71.0195.

**Severability—1986 c 259:** See note following RCW 18.130.010.

**RCW 18.130.085 Communication with complainant.** If the department communicates in writing to a complainant, or his or her representative, regarding his or her complaint, such communication shall not include the address or telephone number of the health care provider against whom he or she has complained. The department shall inform all applicants for a health care provider license of the provisions of this section and chapter 42.56 RCW regarding the release of address and telephone information. [2005 c 274 s 230; 1993 c 360 s 1.]

**Effective date—1993 c 360:** "This act is necessary for the immediate preservation of the public peace, health, or safety, or support of the state government and its existing public institutions, and shall take effect immediately [May 15, 1993]." [1993 c 360 s 3.]

**RCW 18.130.090 Statement of charge—Request for hearing.** (1) If the disciplining authority determines, upon investigation, that there is reason to believe a violation of RCW 18.130.180 has occurred, a statement of charge or charges shall be prepared and served upon the license holder or applicant at the earliest practical time. The statement of charge or charges shall be accompanied by a notice that the license holder or applicant may request a hearing to contest the charge or charges. The license holder or applicant must file a request for hearing with the disciplining authority within twenty days after being served the statement of charges. If the twenty-day limit results in a hardship upon the license holder or applicant, he or she may request for good cause an extension not to exceed sixty additional days. If the disciplining authority finds that there is good cause, it shall grant the extension. The failure to request a hearing constitutes a default, whereupon the disciplining authority may enter a decision on the basis of the facts available to it.

(2) If a hearing is requested, the time of the hearing shall be fixed by the disciplining authority as soon as convenient, but the hearing shall not be held earlier than thirty days after service of the charges upon the license holder or applicant. [1993 c 367 s 1; 1986 c 259 s 6; 1984 c 279 s 9.]

**Severability—1986 c 259:** See note following RCW 18.130.010.

**RCW 18.130.095 Uniform procedural rules.** (1)(a) The secretary, in consultation with the disciplining authorities, shall develop

uniform procedural rules to respond to public inquiries concerning complaints and their disposition, active investigations, statement of charges, findings of fact, and final orders involving a license holder, applicant, or unlicensed person. The uniform procedural rules adopted under this subsection apply to all adjudicative proceedings conducted under this chapter and shall include provisions for establishing time periods for initial assessment, investigation, charging, discovery, settlement, and adjudication of complaints, and shall include enforcement provisions for violations of the specific time periods by the department, the disciplining authority, and the respondent. A license holder must be notified upon receipt of a complaint, except when the notification would impede an effective investigation. At the earliest point of time the license holder must be allowed to submit a written statement about that complaint, which statement must be included in the file. Complaints filed after July 27, 1997, are exempt from public disclosure under chapter 42.56 RCW until the complaint has been initially assessed and determined to warrant an investigation by the disciplining authority. Complaints determined not to warrant an investigation by the disciplining authority are no longer considered complaints, but must remain in the records and tracking system of the department. Information about complaints that did not warrant an investigation, including the existence of the complaint, may be released only upon receipt of a written public disclosure request or pursuant to an interagency agreement as provided in (b) of this subsection. Complaints determined to warrant no cause for action after investigation are subject to public disclosure, must include an explanation of the determination to close the complaint, and must remain in the records and tracking system of the department.

(b) The secretary, on behalf of the disciplining authorities, shall enter into interagency agreements for the exchange of records, which may include complaints filed but not yet assessed, with other state agencies if access to the records will assist those agencies in meeting their federal or state statutory responsibilities. Records obtained by state agencies under the interagency agreements are subject to the limitations on disclosure contained in (a) of this subsection.

(2) The uniform procedures for conducting investigations shall provide that prior to taking a written statement:

(a) For violation of this chapter, the investigator shall inform such person, in writing of: (i) The nature of the complaint; (ii) that the person may consult with legal counsel at his or her expense prior to making a statement; and (iii) that any statement that the person makes may be used in an adjudicative proceeding conducted under this chapter; and

(b) From a witness or potential witness in an investigation under this chapter, the investigator shall inform the person, in writing, that the statement may be released to the license holder, applicant, or unlicensed person under investigation if a statement of charges is issued.

(3) Only upon the authorization of a disciplining authority identified in RCW 18.130.040(2)(b), the secretary, or his or her designee, may serve as the presiding officer for any disciplinary proceedings of the disciplining authority authorized under this chapter. The presiding officer shall not vote on or make any final decision in cases pertaining to standards of practice or where clinical expertise is necessary. All functions performed by the

presiding officer shall be subject to chapter 34.05 RCW. The secretary, in consultation with the disciplining authorities, shall adopt procedures for implementing this subsection.

(4) Upon delegation from the secretary, a presiding officer may conduct disciplinary proceedings for professions identified in RCW 18.130.040(2)(a). All functions performed by the presiding officer are subject to chapter 34.05 RCW. Decisions of the presiding officer are initial decisions subject to review by the secretary. The secretary shall adopt procedures for implementing this subsection.

(5) The uniform procedural rules shall be adopted by all disciplining authorities listed in RCW 18.130.040(2), and shall be used for all adjudicative proceedings conducted under this chapter, as defined by chapter 34.05 RCW. The uniform procedural rules shall address the use of a presiding officer authorized in subsections (3) and (4) of this section to determine and issue decisions on all legal issues and motions arising during adjudicative proceedings. [2013 c 109 s 2; 2008 c 134 s 9; 2005 c 274 s 231; 1997 c 270 s 1; 1995 c 336 s 6; 1993 c 367 s 2.]

**Finding—Intent—Severability—2008 c 134:** See notes following RCW 18.130.020.

**RCW 18.130.098 Settlement—Disclosure—Conference.** (1) The settlement process must be substantially uniform for licensees governed by disciplining authorities under this chapter. The disciplinary [disciplining] authorities may also use alternative dispute resolution to resolve complaints during adjudicative proceedings.

(2) Disclosure of the identity of reviewing disciplining authority members who participate in the settlement process is available to the respondent or his or her representative upon request.

(3) The settlement conference will occur only if a settlement is not achieved through written documents. The respondent will have the opportunity to conference either by phone or in person with the reviewing disciplining authority member if the respondent chooses. The respondent may also have his or her attorney conference either by phone or in person with the reviewing disciplining authority member without the respondent being present personally.

(4) If the respondent wants to meet in person with the reviewing disciplining authority member, he or she will travel to the reviewing disciplining authority member and have such a conference with a department representative in attendance either by phone or in person. [1995 c 336 s 7; 1994 sp.s. c 9 s 604.]

**Severability—Headings and captions not law—Effective date—1994 sp.s. c 9:** See RCW 18.79.900 through 18.79.902.

**RCW 18.130.100 Hearings—Adjudicative proceedings under chapter 34.05 RCW.** The procedures governing adjudicative proceedings before agencies under chapter 34.05 RCW, the Administrative Procedure Act, govern all hearings before the disciplining authority. The disciplining authority has, in addition to the powers and duties set forth in this chapter, all of the powers and duties under chapter 34.05 RCW, which include, without limitation, all powers relating to

the administration of oaths, the receipt of evidence, the issuance and enforcing of subpoenas, and the taking of depositions. [1989 c 175 s 69; 1984 c 279 s 10.]

**Effective date—1989 c 175:** See note following RCW 34.05.010.

**RCW 18.130.110 Findings of fact—Order—Report.** (1) In the event of a finding of unprofessional conduct, the disciplining authority shall prepare and serve findings of fact and an order as provided in chapter 34.05 RCW, the Administrative Procedure Act. If the license holder or applicant is found to have not committed unprofessional conduct, the disciplining authority shall forthwith prepare and serve findings of fact and an order of dismissal of the charges, including public exoneration of the licensee or applicant. The findings of fact and order shall be retained by the disciplining authority as a permanent record.

(2) The disciplining authority shall report the issuance of statements of charges and final orders in cases processed by the disciplining authority to:

(a) The person or agency who brought to the disciplining authority's attention information which resulted in the initiation of the case;

(b) Appropriate organizations, public or private, which serve the professions;

(c) The public. Notification of the public shall include press releases to appropriate local news media and the major news wire services; and

(d) Counterpart licensing boards in other states, or associations of state licensing boards.

(3) This section shall not be construed to require the reporting of any information which is exempt from public disclosure under chapter 42.56 RCW. [2005 c 274 s 232; 1989 c 175 s 70; 1984 c 279 s 11.]

**Effective date—1989 c 175:** See note following RCW 34.05.010.

**RCW 18.130.120 Actions against license—Exception.** The department shall not issue any license to any person whose license has been denied, revoked, or suspended by the disciplining authority except in conformity with the terms and conditions of the certificate or order of denial, revocation, or suspension, or in conformity with any order of reinstatement issued by the disciplining authority, or in accordance with the final judgment in any proceeding for review instituted under this chapter. [1984 c 279 s 12.]

**RCW 18.130.127 License suspension—Noncompliance with support order—Reissuance.** The secretary shall immediately suspend the license of any person subject to this chapter who has been certified by the department of social and health services as a person who is not in compliance with a support order or a \*residential or visitation order as provided in RCW 74.20A.320. [1997 c 58 s 830.]

**\*Reviser's note:** 1997 c 58 s 886 requiring a court to order certification of noncompliance with residential provisions of a court-

ordered parenting plan was vetoed. Provisions ordering the department of social and health services to certify a responsible parent based on a court order to certify for noncompliance with residential provisions of a parenting plan were vetoed. See RCW 74.20A.320.

**Short title—Part headings, captions, table of contents not law—Exemptions and waivers from federal law—Conflict with federal requirements—Severability—1997 c 58:** See RCW 74.08A.900 through 74.08A.904.

**Effective dates—Intent—1997 c 58:** See notes following RCW 74.20A.320.

**RCW 18.130.130 Orders—When effective—Stay.** An order pursuant to proceedings authorized by this chapter, after due notice and findings in accordance with this chapter and chapter 34.05 RCW, or an order of summary suspension entered under this chapter, shall take effect immediately upon its being served. The order, if appealed to the court, shall not be stayed pending the appeal unless the disciplining authority or court to which the appeal is taken enters an order staying the order of the disciplining authority, which stay shall provide for terms necessary to protect the public. [1986 c 259 s 7; 1984 c 279 s 13.]

**Severability—1986 c 259:** See note following RCW 18.130.010.

**RCW 18.130.135 Suspension or restriction orders—Show cause hearing.** (1) Upon an order of a disciplining authority to summarily suspend a license, or restrict or limit a license holder's practice pursuant to RCW 18.130.050 or 18.130.062, the license holder is entitled to a show cause hearing before a panel or the secretary as identified in subsection (2) of this section within fourteen days of requesting a show cause hearing. The license holder must request the show cause hearing within twenty days of the issuance of the order. At the show cause hearing, the disciplining authority has the burden of demonstrating that more probable than not, the license holder poses an immediate threat to the public health and safety. The license holder must request a hearing regarding the statement of charges in accordance with RCW 18.130.090.

(2) (a) In the case of a license holder who is regulated by a board or commission identified in RCW 18.130.040(2) (b), the show cause hearing must be held by a panel of the appropriate board or commission.

(b) In the case of a license holder who is regulated by the secretary under RCW 18.130.040(2) (a), the show cause hearing must be held by the secretary.

(3) At the show cause hearing, the show cause hearing panel or the secretary may consider the statement of charges, the motion, and documents supporting the request for summary action, the respondent's answer to the statement of charges, and shall provide the license holder with an opportunity to provide documentary evidence and written testimony, and be represented by counsel. Prior to the show cause hearing, the disciplining authority shall provide the license holder

with all documentation in support of the charges against the license holder.

(4) (a) If the show cause hearing panel or secretary determines that the license holder does not pose an immediate threat to the public health and safety, the panel or secretary may overturn the summary suspension or restriction order.

(b) If the show cause hearing panel or secretary determines that the license holder poses an immediate threat to the public health and safety, the summary suspension or restriction order shall remain in effect. The show cause hearing panel or secretary may amend the order as long as the amended order ensures that the license holder will no longer pose an immediate threat to the public health and safety.

(5) Within forty-five days of the show cause hearing panel's or secretary's determination to sustain the summary suspension or place restrictions on the license, the license holder may request a full hearing on the merits of the disciplining authority's decision to suspend or restrict the license. A full hearing must be provided within forty-five days of receipt of the request for a hearing, unless stipulated otherwise. [2008 c 134 s 6.]

**Finding—Intent—Severability—2008 c 134:** See notes following RCW 18.130.020.

**RCW 18.130.140 Appeal.** An individual who has been disciplined, whose license has been denied, or whose license has been granted with conditions by a disciplining authority may appeal the decision as provided in chapter 34.05 RCW. [2008 c 134 s 21; 1984 c 279 s 14.]

**Finding—Intent—Severability—2008 c 134:** See notes following RCW 18.130.020.

**RCW 18.130.150 Reinstatement.** A person whose license has been suspended under this chapter may petition the disciplining authority for reinstatement after an interval as determined by the disciplining authority in the order unless the disciplining authority has found, pursuant to RCW 18.130.160, that the licensee can never be rehabilitated or can never regain the ability to practice with reasonable skill and safety. The disciplining authority shall hold hearings on the petition and may deny the petition or may order reinstatement and impose terms and conditions as provided in RCW 18.130.160 and issue an order of reinstatement. The disciplining authority may require successful completion of an examination as a condition of reinstatement.

A person whose license has been suspended for noncompliance with a support order or visitation order under RCW 74.20A.320 may petition for reinstatement at any time by providing the secretary a release issued by the department of social and health services stating that the person is in compliance with the order. If the person has continued to meet all other requirements for reinstatement during the suspension, the secretary shall automatically reissue the person's license upon receipt of the release, and payment of a reinstatement fee, if any. [2008 c 134 s 22; 1997 c 58 s 831; 1984 c 279 s 15.]

**Finding—Intent—Severability—2008 c 134:** See notes following RCW 18.130.020.

**Short title—Part headings, captions, table of contents not law—Exemptions and waivers from federal law—Conflict with federal requirements—Severability—1997 c 58:** See RCW 74.08A.900 through 74.08A.904.

**Effective dates—Intent—1997 c 58:** See notes following RCW 74.20A.320.

**RCW 18.130.160 Finding of unprofessional conduct—Orders—Sanctions—Stay—Costs—Stipulations.** Upon a finding, after hearing, that a license holder has committed unprofessional conduct or is unable to practice with reasonable skill and safety due to a physical or mental condition, the disciplining authority shall issue an order including sanctions adopted in accordance with the schedule adopted under RCW 18.130.390 giving proper consideration to any prior findings of fact under RCW 18.130.110, any stipulations to informal disposition under RCW 18.130.172, and any action taken by other in-state or out-of-state disciplining authorities. The order must provide for one or any combination of the following, as directed by the schedule, except as provided in RCW 9.97.020:

- (1) Revocation of the license;
- (2) Suspension of the license for a fixed or indefinite term;
- (3) Restriction or limitation of the practice;
- (4) Requiring the satisfactory completion of a specific program of remedial education or treatment;
- (5) The monitoring of the practice by a supervisor approved by the disciplining authority;
- (6) Censure or reprimand;
- (7) Compliance with conditions of probation for a designated period of time;
- (8) Payment of a fine for each violation of this chapter, not to exceed five thousand dollars per violation. Funds received shall be placed in the health professions account;
- (9) Denial of the license request;
- (10) Corrective action;
- (11) Refund of fees billed to and collected from the consumer;
- (12) A surrender of the practitioner's license in lieu of other sanctions, which must be reported to the federal data bank.

Any of the actions under this section may be totally or partly stayed by the disciplining authority. Safeguarding the public's health and safety is the paramount responsibility of every disciplining authority. In determining what action is appropriate, the disciplining authority must consider the schedule adopted under RCW 18.130.390. Where the schedule allows flexibility in determining the appropriate sanction, the disciplining authority must first consider what sanctions are necessary to protect or compensate the public. Only after such provisions have been made may the disciplining authority consider and include in the order requirements designed to rehabilitate the license holder. All costs associated with compliance with orders issued under this section are the obligation of the license holder. The disciplining authority may order permanent revocation of a license if it finds that the license holder can never

be rehabilitated or can never regain the ability to practice with reasonable skill and safety.

Surrender or permanent revocation of a license under this section is not subject to a petition for reinstatement under RCW 18.130.150.

The disciplining authority may determine that a case presents unique circumstances that the schedule adopted under RCW 18.130.390 does not adequately address. The disciplining authority may deviate from the schedule adopted under RCW 18.130.390 when selecting appropriate sanctions, but the disciplining authority must issue a written explanation of the basis for not following the schedule.

The license holder may enter into a stipulated disposition of charges that includes one or more of the sanctions of this section, but only after a statement of charges has been issued and the license holder has been afforded the opportunity for a hearing and has elected on the record to forego such a hearing. The stipulation shall either contain one or more specific findings of unprofessional conduct or inability to practice, or a statement by the license holder acknowledging that evidence is sufficient to justify one or more specified findings of unprofessional conduct or inability to practice. The stipulation entered into pursuant to this subsection shall be considered formal disciplinary action for all purposes. [2016 c 81 s 18; 2008 c 134 s 10. Prior: 2006 c 99 s 6; 2006 c 8 s 104; 2001 c 195 s 1; 1993 c 367 s 6; 1986 c 259 s 8; 1984 c 279 s 16.]

**Finding—Conflict with federal requirements—2016 c 81:** See notes following RCW 9.97.010.

**Finding—Intent—Severability—2008 c 134:** See notes following RCW 18.130.020.

**Findings—Intent—Part headings and subheadings not law—Severability—2006 c 8:** See notes following RCW 5.64.010.

**Severability—1986 c 259:** See note following RCW 18.130.010.

**RCW 18.130.165 Enforcement of fine.** Where an order for payment of a fine is made as a result of a citation under RCW 18.130.230 or a hearing under RCW 18.130.100 or 18.130.190 and timely payment is not made as directed in the final order, the disciplining authority may enforce the order for payment in the superior court in the county in which the hearing was held. This right of enforcement shall be in addition to any other rights the disciplining authority may have as to any licensee ordered to pay a fine but shall not be construed to limit a licensee's ability to seek judicial review under RCW 18.130.140.

In any action for enforcement of an order of payment of a fine, the disciplining authority's order is conclusive proof of the validity of the order of payment of a fine and the terms of payment. [2008 c 134 s 23; 1993 c 367 s 20; 1987 c 150 s 4.]

**Finding—Intent—Severability—2008 c 134:** See notes following RCW 18.130.020.

**Severability—1987 c 150:** See RCW 18.122.901.

**RCW 18.130.170 Capacity of license holder to practice—Hearing—  
Mental or physical examination—Implied consent.**

(1) If the disciplining authority believes a license holder may be unable to practice with reasonable skill and safety to consumers by reason of any mental or physical condition, a statement of charges in the name of the disciplining authority shall be served on the license holder and notice shall also be issued providing an opportunity for a hearing. The hearing shall be limited to the sole issue of the capacity of the license holder to practice with reasonable skill and safety. If the disciplining authority determines that the license holder is unable to practice with reasonable skill and safety for one of the reasons stated in this subsection, the disciplining authority shall impose such sanctions under RCW 18.130.160 as is deemed necessary to protect the public.

(2)(a) In investigating or adjudicating a complaint or report that a license holder may be unable to practice with reasonable skill or safety by reason of any mental or physical condition, the disciplining authority may require a license holder to submit to a mental or physical examination by one or more licensed or certified health professionals designated by the disciplining authority. The license holder shall be provided written notice of the disciplining authority's intent to order a mental or physical examination, which notice shall include: (i) A statement of the specific conduct, event, or circumstances justifying an examination; (ii) a summary of the evidence supporting the disciplining authority's concern that the license holder may be unable to practice with reasonable skill and safety by reason of a mental or physical condition, and the grounds for believing such evidence to be credible and reliable; (iii) a statement of the nature, purpose, scope, and content of the intended examination; (iv) a statement that the license holder has the right to respond in writing within twenty days to challenge the disciplining authority's grounds for ordering an examination or to challenge the manner or form of the examination; and (v) a statement that if the license holder timely responds to the notice of intent, then the license holder will not be required to submit to the examination while the response is under consideration.

(b) Upon submission of a timely response to the notice of intent to order a mental or physical examination, the license holder shall have an opportunity to respond to or refute such an order by submission of evidence or written argument or both. The evidence and written argument supporting and opposing the mental or physical examination shall be reviewed by either a panel of the disciplining authority members who have not been involved with the allegations against the license holder or a neutral decision maker approved by the disciplining authority. The reviewing panel of the disciplining authority or the approved neutral decision maker may, in its discretion, ask for oral argument from the parties. The reviewing panel of the disciplining authority or the approved neutral decision maker shall prepare a written decision as to whether: There is reasonable cause to believe that the license holder may be unable to practice with reasonable skill and safety by reason of a mental or physical condition, or the manner or form of the mental or physical examination is appropriate, or both.

(c) Upon receipt by the disciplining authority of the written decision, or upon the failure of the license holder to timely respond to the notice of intent, the disciplining authority may issue an order

requiring the license holder to undergo a mental or physical examination. All such mental or physical examinations shall be narrowly tailored to address only the alleged mental or physical condition and the ability of the license holder to practice with reasonable skill and safety. An order of the disciplining authority requiring the license holder to undergo a mental or physical examination is not a final order for purposes of appeal. The cost of the examinations ordered by the disciplining authority shall be paid out of the health professions account. In addition to any examinations ordered by the disciplining authority, the license holder may submit physical or mental examination reports from licensed or certified health professionals of the license holder's choosing and expense.

(d) If the disciplining authority finds that a license holder has failed to submit to a properly ordered mental or physical examination, then the disciplining authority may order appropriate action or discipline under RCW 18.130.180(9), unless the failure was due to circumstances beyond the person's control. However, no such action or discipline may be imposed unless the license holder has had the notice and opportunity to challenge the disciplining authority's grounds for ordering the examination, to challenge the manner and form, to assert any other defenses, and to have such challenges or defenses considered by either a panel of the disciplining authority members who have not been involved with the allegations against the license holder or a neutral decision maker approved by the disciplining authority, as previously set forth in this section. Further, the action or discipline ordered by the disciplining authority shall not be more severe than a suspension of the license, certification, registration, or application until such time as the license holder complies with the properly ordered mental or physical examination.

(e) Nothing in this section shall restrict the power of a disciplining authority to act in an emergency under RCW 34.05.422(4), 34.05.479, and 18.130.050(8).

(f) A determination by a court of competent jurisdiction that a license holder is mentally incompetent or an individual with mental illness is presumptive evidence of the license holder's inability to practice with reasonable skill and safety. An individual affected under this section shall at reasonable intervals be afforded an opportunity, at his or her expense, to demonstrate that the individual can resume competent practice with reasonable skill and safety to the consumer.

(3) For the purpose of subsection (2) of this section, a license holder governed by this chapter, by making application, practicing, or filing a license renewal, is deemed to have given consent to submit to a mental, physical, or psychological examination when directed in writing by the disciplining authority and further to have waived all objections to the admissibility or use of the examining health professional's testimony or examination reports by the disciplining authority on the ground that the testimony or reports constitute privileged communications. [2008 c 134 s 11; 1995 c 336 s 8; 1987 c 150 s 6; 1986 c 259 s 9; 1984 c 279 s 17.]

**Finding—Intent—Severability—2008 c 134:** See notes following RCW 18.130.020.

**Severability—1987 c 150:** See RCW 18.122.901.

**Severability—1986 c 259:** See note following RCW 18.130.010.

**RCW 18.130.172 Evidence summary and stipulations.** (1) Prior to serving a statement of charges under RCW 18.130.090 or 18.130.170, the disciplinary [disciplining] authority may furnish a statement of allegations to the licensee along with a detailed summary of the evidence relied upon to establish the allegations and a proposed stipulation for informal resolution of the allegations. These documents shall be exempt from public disclosure until such time as the allegations are resolved either by stipulation or otherwise.

(2) The disciplinary [disciplining] authority and the licensee may stipulate that the allegations may be disposed of informally in accordance with this subsection. The stipulation shall contain a statement of the facts leading to the filing of the complaint; the act or acts of unprofessional conduct alleged to have been committed or the alleged basis for determining that the licensee is unable to practice with reasonable skill and safety; a statement that the stipulation is not to be construed as a finding of either unprofessional conduct or inability to practice; an acknowledgment that a finding of unprofessional conduct or inability to practice, if proven, constitutes grounds for discipline under this chapter; and an agreement on the part of the licensee that the sanctions set forth in RCW 18.130.160, except RCW 18.130.160 (1), (2), (6), and (8), may be imposed as part of the stipulation, except that no fine may be imposed but the licensee may agree to reimburse the disciplinary [disciplining] authority the costs of investigation and processing the complaint up to an amount not exceeding one thousand dollars per allegation; and an agreement on the part of the disciplinary [disciplining] authority to forego further disciplinary proceedings concerning the allegations. A stipulation entered into pursuant to this subsection shall not be considered formal disciplinary action.

(3) If the licensee declines to agree to disposition of the charges by means of a stipulation pursuant to subsection (2) of this section, the disciplinary [disciplining] authority may proceed to formal disciplinary action pursuant to RCW 18.130.090 or 18.130.170.

(4) Upon execution of a stipulation under subsection (2) of this section by both the licensee and the disciplinary [disciplining] authority, the complaint is deemed disposed of and shall become subject to public disclosure on the same basis and to the same extent as other records of the disciplinary [disciplining] authority. Should the licensee fail to pay any agreed reimbursement within thirty days of the date specified in the stipulation for payment, the disciplinary [disciplining] authority may seek collection of the amount agreed to be paid in the same manner as enforcement of a fine under RCW 18.130.165. [2008 c 134 s 24; 2000 c 171 s 29; 1993 c 367 s 7.]

**Finding—Intent—Severability—2008 c 134:** See notes following RCW 18.130.020.

**RCW 18.130.175 Physician health and voluntary substance use disorder monitoring programs (as amended by 2023 c 425).** (1) In lieu of disciplinary action under RCW 18.130.160 and if the disciplining authority determines that the unprofessional conduct may be the result of an applicable impairing or potentially impairing health condition,

the disciplining authority may refer the license holder to a physician health program or a voluntary substance use disorder monitoring program approved by the disciplining authority.

The cost of evaluation and treatment shall be the responsibility of the license holder, but the responsibility does not preclude payment by an employer, existing insurance coverage, or other sources. Evaluation and treatment shall be provided by providers approved by the entity or the commission. The disciplining authority may also approve the use of out-of-state programs. Referral of the license holder to the physician health program or voluntary substance use disorder monitoring program shall be done only with the consent of the license holder. Referral to the physician health program or voluntary substance use disorder monitoring program may also include probationary conditions for a designated period of time. If the license holder does not consent to be referred to the program or does not successfully complete the program, the disciplining authority may take appropriate action under RCW 18.130.160 which includes suspension of the license unless or until the disciplining authority, in consultation with the director of the applicable program, determines the license holder is able to practice safely. The secretary shall adopt uniform rules for the evaluation by the disciplining authority of return to substance use or program violation on the part of a license holder in the program. The evaluation shall encourage program participation with additional conditions, in lieu of disciplinary action, when the disciplining authority determines that the license holder is able to continue to practice with reasonable skill and safety.

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

(3) The license holder shall sign a waiver allowing the program to release information to the disciplining authority if the licensee does not comply with the requirements of this section or is unable to practice with reasonable skill or safety. The physician health program or voluntary substance use disorder program shall report to the disciplining authority any license holder who fails to comply with the requirements of this section or the program or who, in the opinion of the program, is unable to practice with reasonable skill or safety. License holders shall report to the disciplining authority if they fail to comply with this section or do not complete the program's requirements. License holders may, upon the agreement of the program and disciplining authority, reenter the program if they have previously failed to comply with this section.

(4) Program records including, but not limited to, case notes, progress notes, laboratory reports, evaluation and treatment records, electronic and written correspondence within the program, and between the program and the participant or other involved entities including, but not limited to, employers, credentialing bodies, referents, or

other collateral sources, relating to license holders referred to or voluntarily participating in approved programs are confidential and exempt from disclosure under chapter 42.56 RCW and shall not be subject to discovery by subpoena or admissible as evidence except:

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

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

(ii) The dates of participation;

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

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

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

(b) Records provided to the disciplining authority for cause as described in subsection (3) of this section. Program records relating to license holders mandated to the program, through order or by stipulation, by the disciplining authority or relating to license holders reported to the disciplining authority by the program for cause, must be released to the disciplining authority at the request of the disciplining authority. Records held by the disciplining authority under this section are exempt from chapter 42.56 RCW and are not subject to discovery by subpoena except by the license holder.

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

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

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

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

(ii) The professional association affiliated with the program;

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

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

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

(b) The courts are strongly encouraged to impose sanctions on program participants and their attorneys whose allegations under this

subsection are not made in good faith and are without either reasonable objective, substantive grounds, or both.

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

(7) In the case of a person who is applying to be a substance use disorder professional or substance use disorder professional trainee certified under chapter 18.205 RCW, if the person is:

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

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

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

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

(b) At least one year in recovery from a substance use disorder, the person may not be required to participate in the approved substance use disorder monitoring program. [2023 c 425 s 25; 2022 c 43 s 10. Prior: 2019 c 446 s 43; 2019 c 444 s 21; 2006 c 99 s 7; 2005 c 274 s 233; 1998 c 132 s 10; 1993 c 367 s 3; 1991 c 3 s 270; 1988 c 247 s 2.]

**Effective date—2023 c 425 ss 1-7, 13-20, and 22-26:** See note following RCW 18.83.170.

**RCW 18.130.175 Physician health and voluntary substance use disorder monitoring programs (as amended by 2023 c 469).** (1) In lieu of disciplinary action under RCW 18.130.160 and if the disciplining authority determines that the unprofessional conduct may be the result of an applicable impairing or potentially impairing health condition, the disciplining authority may refer the license holder to a physician health program or a voluntary substance use disorder monitoring program approved by the disciplining authority.

The cost of evaluation and treatment shall be the responsibility of the license holder, but the responsibility does not preclude payment by an employer, existing insurance coverage, or other sources. Evaluation and treatment shall be provided by providers approved by the entity or the commission. The disciplining authority may also approve the use of out-of-state programs. Referral of the license holder to the physician health program or voluntary substance use disorder monitoring program shall be done only with the consent of the license holder. Referral to the physician health program or voluntary substance use disorder monitoring program may also include probationary conditions for a designated period of time. If the license holder does not consent to be referred to the program or does not successfully complete the program, the disciplining authority may

take appropriate action under RCW 18.130.160 which includes suspension of the license unless or until the disciplining authority, in consultation with the director of the applicable program, determines the license holder is able to practice safely. The secretary shall adopt uniform rules for the evaluation by the disciplining authority of return to substance use or program violation on the part of a license holder in the program. The evaluation shall encourage program participation with additional conditions, in lieu of disciplinary action, when the disciplining authority determines that the license holder is able to continue to practice with reasonable skill and safety.

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

(3) The license holder shall sign a waiver allowing the program to release information to the disciplining authority if the licensee does not comply with the requirements of this section or is unable to practice with reasonable skill or safety. The physician health program or voluntary substance use disorder program shall report to the disciplining authority any license holder who fails to comply with the requirements of this section or the program or who, in the opinion of the program, is unable to practice with reasonable skill or safety. License holders shall report to the disciplining authority if they fail to comply with this section or do not complete the program's requirements. License holders may, upon the agreement of the program and disciplining authority, reenter the program if they have previously failed to comply with this section.

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

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

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

(ii) The dates of participation;

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

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

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

(b) Records provided to the disciplining authority for cause as described in subsection (3) of this section. Program records relating to license holders mandated to the program, through order or by stipulation, by the disciplining authority or relating to license holders reported to the disciplining authority by the program for cause, must be released to the disciplining authority at the request of the disciplining authority. Records held by the disciplining authority under this section are exempt from chapter 42.56 RCW and are not subject to discovery by subpoena except by the license holder.

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

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

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

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

(ii) The professional association affiliated with the program;

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

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

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

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

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

(7) In the case of a person who is applying to be a substance use disorder professional or substance use disorder professional trainee certified under chapter 18.205 RCW, an agency affiliated counselor registered under chapter 18.19 RCW, or a peer specialist or peer specialist trainee certified under chapter 18.420 RCW, if the person is:

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

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

~~(8) ((In the case of a person who is applying to be an agency affiliated counselor registered under chapter 18.19 RCW and practices or intends to practice as a peer counselor in an agency, as defined in RCW 18.19.020, if the person is:~~

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

~~(b) At least one year in recovery from a substance use disorder, the person may not be required to participate in the approved substance use disorder monitoring program)~~ The provisions of subsection (7) of this section apply to any person employed as a peer specialist as of July 1, 2025, participating in a program under this section as of July 1, 2025, and applying to become a certified peer specialist under RCW 18.420.050, regardless of when the person's participation in a program began. To this extent, subsection (7) of this section applies retroactively, but in all other respects it applies prospectively. [2023 c 469 s 19; 2022 c 43 s 10. Prior: 2019 c 446 s 43; 2019 c 444 s 21; 2006 c 99 s 7; 2005 c 274 s 233; 1998 c 132 s 10; 1993 c 367 s 3; 1991 c 3 s 270; 1988 c 247 s 2.]

**Reviser's note:** RCW 18.130.175 was amended twice during the 2023 legislative session, each without reference to the other. For rule of construction concerning sections amended more than once during the same legislative session, see RCW 1.12.025.

**Effective date—2006 c 99 s 7:** "Section 7 of this act takes effect July 1, 2006." [2006 c 99 s 11.]

**Finding—Intent—Severability—1998 c 132:** See notes following RCW 18.71.0195.

**Legislative intent—1988 c 247:** "Existing law does not provide for a program for rehabilitation of health professionals whose competency may be impaired due to the abuse of alcohol and other drugs.

It is the intent of the legislature that the disciplining authorities seek ways to identify and support the rehabilitation of health professionals whose practice or competency may be impaired due to the abuse of drugs or alcohol. The legislature intends that such health professionals be treated so that they can return to or continue to practice their profession in a way which safeguards the public. The legislature specifically intends that the disciplining authorities establish an alternative program to the traditional administrative proceedings against such health professionals." [1988 c 247 s 1.]

**RCW 18.130.180 Unprofessional conduct.** Except as provided in RCW 18.130.450, the following conduct, acts, or conditions constitute unprofessional conduct for any license holder under the jurisdiction of this chapter:

(1) The commission of any act involving moral turpitude, dishonesty, or corruption relating to the practice of the person's

profession, whether the act constitutes a crime or not. If the act constitutes a crime, conviction in a criminal proceeding is not a condition precedent to disciplinary action. Upon such a conviction, however, the judgment and sentence is conclusive evidence at the ensuing disciplinary hearing of the guilt of the license holder of the crime described in the indictment or information, and of the person's violation of the statute on which it is based. For the purposes of this section, conviction includes all instances in which a plea of guilty or nolo contendere is the basis for the conviction and all proceedings in which the sentence has been deferred or suspended. Nothing in this section abrogates rights guaranteed under chapter 9.96A RCW;

(2) Misrepresentation or concealment of a material fact in obtaining a license or in reinstatement thereof;

(3) All advertising which is false, fraudulent, or misleading;

(4) Incompetence, negligence, or malpractice which results in injury to a patient or which creates an unreasonable risk that a patient may be harmed. The use of a nontraditional treatment by itself shall not constitute unprofessional conduct, provided that it does not result in injury to a patient or create an unreasonable risk that a patient may be harmed;

(5) Suspension, revocation, or restriction of the individual's license to practice any health care profession by competent authority in any state, federal, or foreign jurisdiction, a certified copy of the order, stipulation, or agreement being conclusive evidence of the revocation, suspension, or restriction;

(6) The possession, use, prescription for use, or distribution of controlled substances or legend drugs in any way other than for legitimate or therapeutic purposes, diversion of controlled substances or legend drugs, the violation of any drug law, or prescribing controlled substances for oneself;

(7) Violation of any state or federal statute or administrative rule regulating the profession in question, including any statute or rule defining or establishing standards of patient care or professional conduct or practice;

(8) Failure to cooperate with the disciplining authority by:

(a) Not furnishing any papers, documents, records, or other items;

(b) Not furnishing in writing a full and complete explanation covering the matter contained in the complaint filed with the disciplining authority;

(c) Not responding to subpoenas issued by the disciplining authority, whether or not the recipient of the subpoena is the accused in the proceeding; or

(d) Not providing reasonable and timely access for authorized representatives of the disciplining authority seeking to perform practice reviews at facilities utilized by the license holder;

(9) Failure to comply with an order issued by the disciplining authority or a stipulation for informal disposition entered into with the disciplining authority;

(10) Aiding or abetting an unlicensed person to practice when a license is required;

(11) Violations of rules established by any health agency;

(12) Practice beyond the scope of practice as defined by law or rule;

(13) Misrepresentation or fraud in any aspect of the conduct of the business or profession;

(14) Failure to adequately supervise auxiliary staff to the extent that the consumer's health or safety is at risk;

(15) Engaging in a profession involving contact with the public while suffering from a contagious or infectious disease involving serious risk to public health;

(16) Promotion for personal gain of any unnecessary or inefficacious drug, device, treatment, procedure, or service;

(17) Conviction of any gross misdemeanor or felony relating to the practice of the person's profession. For the purposes of this subsection, conviction includes all instances in which a plea of guilty or nolo contendere is the basis for conviction and all proceedings in which the sentence has been deferred or suspended. Nothing in this section abrogates rights guaranteed under chapter 9.96A RCW;

(18) The offering, undertaking, or agreeing to cure or treat disease by a secret method, procedure, treatment, or medicine, or the treating, operating, or prescribing for any health condition by a method, means, or procedure which the licensee refuses to divulge upon demand of the disciplining authority;

(19) The willful betrayal of a practitioner-patient privilege as recognized by law;

(20) Violation of chapter 19.68 RCW or a pattern of violations of RCW 41.05.700(8), 48.43.735(8), 48.49.020, 48.49.030, 71.24.335(8), or 74.09.325(8);

(21) Interference with an investigation or disciplinary proceeding by willful misrepresentation of facts before the disciplining authority or its authorized representative, or by the use of threats or harassment against any patient or witness to prevent them from providing evidence in a disciplinary proceeding or any other legal action, or by the use of financial inducements to any patient or witness to prevent or attempt to prevent him or her from providing evidence in a disciplinary proceeding;

(22) Current misuse of:

(a) Alcohol;

(b) Controlled substances; or

(c) Legend drugs;

(23) Abuse of a client or patient or sexual contact with a client or patient;

(24) Acceptance of more than a nominal gratuity, hospitality, or subsidy offered by a representative or vendor of medical or health-related products or services intended for patients, in contemplation of a sale or for use in research publishable in professional journals, where a conflict of interest is presented, as defined by rules of the disciplining authority, in consultation with the department, based on recognized professional ethical standards;

(25) Violation of RCW 18.130.420;

(26) Performing conversion therapy on a patient under age eighteen;

(27) Violation of RCW 18.130.430;

(28) Violation of RCW 18.130.460; or

(29) Implanting the license holder's own gametes or reproductive material into a patient. [2024 c 220 s 2. Prior: 2023 c 192 s 2; 2023 c 122 s 4; 2021 c 157 s 7; 2020 c 187 s 2; 2019 c 427 s 17; prior: 2018 c 300 s 4; 2018 c 216 s 2; 2010 c 9 s 5; 2008 c 134 s 25; 1995 c 336 s 9; 1993 c 367 s 22; prior: 1991 c 332 s 34; 1991 c 215 s 3; 1989 c 270 s 33; 1986 c 259 s 10; 1984 c 279 s 18.]

**Effective date—2023 c 192:** See note following RCW 18.130.450.

**Finding—Intent—Effective date—2023 c 122:** See notes following RCW 9A.36.170.

**Conflict with federal requirements—2021 c 157:** See note following RCW 74.09.327.

**Findings—Intent—Effective date—2019 c 427:** See RCW 48.49.003 and 48.49.900.

**Intent—Finding—2018 c 300:** "(1) The legislature intends to regulate the professional conduct of licensed health care providers with respect to performing conversion therapy on patients under age eighteen.

(2) The legislature finds and declares that Washington has a compelling interest in protecting the physical and psychological well-being of minors, including lesbian, gay, bisexual, and transgender youth, and in protecting its minors against exposure to serious harms caused by conversion therapy." [2018 c 300 s 1.]

**Construction—2018 c 300:** "This act may not be construed to apply to:

(1) Speech that does not constitute performing conversion therapy by licensed health care providers on patients under age eighteen;

(2) Religious practices or counseling under the auspices of a religious denomination, church, or organization that do not constitute performing conversion therapy by licensed health care providers on patients under age eighteen; and

(3) Nonlicensed counselors acting under the auspices of a religious denomination, church, or organization." [2018 c 300 s 2.]

**Intent—2010 c 9:** See note following RCW 69.50.315.

**Finding—Intent—Severability—2008 c 134:** See notes following RCW 18.130.020.

**Application to scope of practice—Captions not law—1991 c 332:** See notes following RCW 18.130.010.

**Severability—1986 c 259:** See note following RCW 18.130.010.

**RCW 18.130.185 Injunctive relief for violations of RCW 18.130.170 or 18.130.180.** If a person or business regulated by this chapter violates RCW 18.130.170 or 18.130.180, the attorney general, any prosecuting attorney, the secretary, the board, or any other person may maintain an action in the name of the state of Washington to enjoin the person from committing the violations. The injunction shall not relieve the offender from criminal prosecution, but the remedy by injunction shall be in addition to the liability of the offender to criminal prosecution and disciplinary action. [1993 c 367 s 8; 1987 c 150 s 8; 1986 c 259 s 15.]

**Severability—1987 c 150:** See RCW 18.122.901.

**Severability—1986 c 259:** See note following RCW 18.130.010.

**RCW 18.130.186 Voluntary substance abuse monitoring program—**

**Content—License surcharge.** (1) To implement a substance abuse monitoring program for license holders specified under RCW 18.130.040, who are impaired by substance abuse, the disciplinary [disciplining] authority may enter into a contract with a voluntary substance abuse program under RCW 18.130.175. The program may include any or all of the following:

- (a) Contracting with providers of treatment programs;
- (b) Receiving and evaluating reports of suspected impairment from any source;
- (c) Intervening in cases of verified impairment;
- (d) Referring impaired license holders to treatment programs;
- (e) Monitoring the treatment and rehabilitation of impaired license holders including those ordered by the disciplinary [disciplining] authority;
- (f) Providing education, prevention of impairment, posttreatment monitoring, and support of rehabilitated impaired license holders; and
- (g) Performing other activities as agreed upon by the disciplinary [disciplining] authority.

(2) A contract entered into under subsection (1) of this section may be financed by a surcharge on each license issuance or renewal to be collected by the department of health from the license holders of the same regulated health profession. These moneys shall be placed in the health professions account to be used solely for the implementation of the program. [1993 c 367 s 9; 1989 c 125 s 3.]

**RCW 18.130.190 Practice without license—Investigation of complaints—Cease and desist orders—Injunctions—Penalties.**

(1) The secretary shall investigate complaints concerning practice by unlicensed persons of a profession or business for which a license is required by the chapters specified in RCW 18.130.040. In the investigation of the complaints, the secretary shall have the same authority as provided the secretary under RCW 18.130.050.

(2) The secretary may issue a notice of intention to issue a cease and desist order to any person whom the secretary has reason to believe is engaged in the unlicensed practice of a profession or business for which a license is required by the chapters specified in RCW 18.130.040. The person to whom such notice is issued may request an adjudicative proceeding to contest the charges. The request for hearing must be filed within twenty days after service of the notice of intention to issue a cease and desist order. The failure to request a hearing constitutes a default, whereupon the secretary may enter a permanent cease and desist order, which may include a civil fine. All proceedings shall be conducted in accordance with chapter 34.05 RCW.

(3) If the secretary makes a final determination that a person has engaged or is engaging in unlicensed practice, the secretary may issue a cease and desist order. In addition, the secretary may impose a civil fine in an amount not exceeding one thousand dollars for each day upon which the person engaged in unlicensed practice of a business or profession for which a license is required by one or more of the chapters specified in RCW 18.130.040. The proceeds of such fines shall be deposited to the health professions account.

(4) If the secretary makes a written finding of fact that the public interest will be irreparably harmed by delay in issuing an order, the secretary may issue a temporary cease and desist order. The person receiving a temporary cease and desist order shall be provided an opportunity for a prompt hearing. The temporary cease and desist order shall remain in effect until further order of the secretary. The failure to request a prompt or regularly scheduled hearing constitutes a default, whereupon the secretary may enter a permanent cease and desist order, which may include a civil fine.

(5) Neither the issuance of a cease and desist order nor payment of a civil fine shall relieve the person so practicing or operating a business without a license from criminal prosecution therefor, but the remedy of a cease and desist order or civil fine shall be in addition to any criminal liability. The cease and desist order is conclusive proof of unlicensed practice and may be enforced under RCW 7.21.060. This method of enforcement of the cease and desist order or civil fine may be used in addition to, or as an alternative to, any provisions for enforcement of agency orders set out in chapter 34.05 RCW.

(6) The attorney general, a county prosecuting attorney, the secretary, a board, or any person may in accordance with the laws of this state governing injunctions, maintain an action in the name of this state to enjoin any person practicing a profession or business for which a license is required by the chapters specified in RCW 18.130.040 without a license from engaging in such practice or operating such business until the required license is secured. However, the injunction shall not relieve the person so practicing or operating a business without a license from criminal prosecution therefor, but the remedy by injunction shall be in addition to any criminal liability.

(7) (a) Unlicensed practice of a profession or operating a business for which a license is required by the chapters specified in RCW 18.130.040, unless otherwise exempted by law, constitutes a gross misdemeanor for a single violation.

(b) Each subsequent violation, whether alleged in the same or in subsequent prosecutions, is a class C felony punishable according to chapter 9A.20 RCW.

(8) All fees, fines, forfeitures, and penalties collected or assessed by a court because of a violation of this section shall be remitted to the health professions account. [2003 c 53 s 141; 2001 c 207 s 2. Prior: 1995 c 285 s 35; 1993 c 367 s 19; 1991 c 3 s 271; prior: 1989 c 373 s 20; 1989 c 175 s 71; 1987 c 150 s 7; 1986 c 259 s 11; 1984 c 279 s 19.]

**Intent—Effective date—2003 c 53:** See notes following RCW 2.48.180.

**Purpose—2001 c 207:** "The purpose of this act is to respond to *State v. Thomas*, 103 Wn. App. 800, by reenacting and ranking, without changes, legislation relating to the crime of unlicensed practice of a profession or a business, enacted as section 35, chapter 285, Laws of 1995." [2001 c 207 s 1.]

**Effective date—2001 c 207:** "This act is necessary for the immediate preservation of the public peace, health, or safety, or support of the state government and its existing public institutions, and takes effect immediately [May 7, 2001]." [2001 c 207 s 4.]

**Effective date—1995 c 285:** See RCW 48.30A.900.

**Effective date—1989 c 175:** See note following RCW 34.05.010.

**Severability—1987 c 150:** See RCW 18.122.901.

**Severability—1986 c 259:** See note following RCW 18.130.010.

**RCW 18.130.195 Violation of injunction—Penalty.** A person or business that violates an injunction issued under this chapter shall pay a civil penalty, as determined by the court, of not more than twenty-five thousand dollars, which shall be placed in the health professions account. For the purpose of this section, the superior court issuing any injunction shall retain jurisdiction and the cause shall be continued, and in such cases the attorney general acting in the name of the state may petition for the recovery of civil penalties. [1987 c 150 s 5.]

**Severability—1987 c 150:** See RCW 18.122.901.

**RCW 18.130.200 Fraud or misrepresentation in obtaining or maintaining a license—Penalty.** A person who attempts to obtain, obtains, or attempts to maintain a license by willful misrepresentation or fraudulent representation is guilty of a gross misdemeanor. [1997 c 392 s 517; 1986 c 259 s 12; 1984 c 279 s 20.]

**Short title—Findings—Construction—Conflict with federal requirements—Part headings and captions not law—1997 c 392:** See notes following RCW 74.39A.009.

**Severability—1986 c 259:** See note following RCW 18.130.010.

**RCW 18.130.210 Crime by license holder—Notice to attorney general or county prosecuting attorney.** If the disciplining authority determines or has cause to believe that a license holder has committed a crime, the disciplining authority, immediately subsequent to issuing findings of fact and a final order, shall notify the attorney general or the county prosecuting attorney in the county in which the act took place of the facts known to the disciplining authority. [1986 c 259 s 13; 1984 c 279 s 22.]

**Severability—1986 c 259:** See note following RCW 18.130.010.

**RCW 18.130.230 Production of documents—Administrative fines.**

(1) (a) A licensee must produce documents, records, or other items that are within his or her possession or control within twenty-one calendar days of service of a request by a disciplining authority. If the twenty-one calendar day limit results in a hardship upon the licensee, he or she may request, for good cause, an extension not to exceed thirty additional calendar days.

(b) In the event the licensee fails to produce the documents, records, or other items as requested by the disciplining authority or

fails to obtain an extension of the time for response, the disciplining authority may issue a written citation and assess a fine of up to one hundred dollars per day for each day after the issuance of the citation until the documents, records, or other items are produced.

(c) In no event may the administrative fine assessed by the disciplining authority exceed five thousand dollars for each investigation made with respect to the violation.

(2) Citations issued under this section must include the following:

(a) A statement that the citation represents a determination that the person named has failed to produce documents, records, or other items as required by this section and that the determination is final unless contested as provided in this section;

(b) A statement of the specific circumstances;

(c) A statement of the monetary fine, which is up to one hundred dollars per day for each day after the issuance of the citation;

(d) A statement informing the licensee that if the licensee desires a hearing to contest the finding of a violation, the hearing must be requested by written notice to the disciplining authority within twenty days of the date of issuance of the citation. The hearing is limited to the issue of whether the licensee timely produced the requested documents, records, or other items or had good cause for failure to do so; and

(e) A statement that in the event a licensee fails to pay a fine within thirty days of the date of assessment, the full amount of the assessed fine must be added to the fee for renewal of the license unless the citation is being appealed.

(3) RCW 18.130.165 governs proof and enforcement of the fine.

(4) Administrative fines collected under this section must be deposited in the health professions account created in RCW 43.70.320.

(5) Issuance of a citation under this section does not preclude the disciplining authority from pursuing other action under this chapter.

(6) The disciplining authority shall establish and make available to licensees the maximum daily monetary fine that may be issued under subsection (2)(c) of this section. The disciplining authority shall review the maximum fine on a regular basis, but at a minimum, each biennium. [2008 c 134 s 20.]

**Finding—Intent—Severability—2008 c 134:** See notes following RCW 18.130.020.

**RCW 18.130.250 Retired active license status.** The disciplining authority may adopt rules pursuant to this section authorizing a retired active license status. An individual credentialed by a disciplining authority regulated in the state under RCW 18.130.040, who is practicing only in emergent or intermittent circumstances as defined by rule established by the disciplining authority, may hold a retired active license at a reduced renewal fee established by the secretary under RCW 43.70.250 or, for a physician regulated pursuant to chapter 18.71 RCW who resides and practices in Washington and holds a retired active license, at no renewal fee. Except as provided in RCW 18.71.080, such a license shall meet the continuing education or continued competency requirements, if any, established by the

disciplining authority for renewals, and is subject to the provisions of this chapter. Individuals who have entered into retired status agreements with the disciplinary [disciplining] authority in any jurisdiction shall not qualify for a retired active license under this section. [2009 c 403 s 3; 1991 c 229 s 1.]

**Finding—Intent—2009 c 403:** See note following RCW 18.71.080.

**RCW 18.130.270 Continuing competency pilot projects.** The disciplinary [disciplining] authorities are authorized to develop and require licensees' participation in continuing competency pilot projects for the purpose of developing flexible, cost-efficient, effective, and geographically accessible competency assurance methods. The secretary shall establish criteria for development of pilot projects and shall select the disciplinary [disciplining] authorities that will participate from among the professions requesting participation. The department shall administer the projects in mutual cooperation with the disciplinary [disciplining] authority and shall allot and administer the budget for each pilot project. The department shall report to the legislature in January of each odd-numbered year concerning the progress and findings of the projects and shall make recommendations on the expansion of continued competency requirements to other licensed health professions.

Each disciplinary [disciplining] authority shall establish its pilot project in rule and may support the projects from a surcharge on each of the affected profession's license renewal in an amount established by the secretary. [1991 c 332 s 3.]

**Application to scope of practice—Captions not law—1991 c 332:** See notes following RCW 18.130.010.

**RCW 18.130.300 Immunity from liability.** (1) The secretary, members of the boards or commissions, or individuals acting on their behalf are immune from suit in any action, civil or criminal, based on any disciplinary proceedings or other official acts performed in the course of their duties.

(2) A voluntary substance abuse monitoring program or an impaired practitioner program approved by a disciplining authority, or individuals acting on their behalf, are immune from suit in a civil action based on any disciplinary proceedings or other official acts performed in the course of their duties. [1998 c 132 s 11; 1994 sp.s. c 9 s 605; 1993 c 367 s 10; 1984 c 279 s 21.]

**Finding—Intent—Severability—1998 c 132:** See notes following RCW 18.71.0195.

**Severability—Headings and captions not law—Effective date—1994 sp.s. c 9:** See RCW 18.79.900 through 18.79.902.

**RCW 18.130.310 Biennial report—Contents—Format.** (1) Subject to RCW 40.07.040, the disciplinary [disciplining] authority shall submit a biennial report to the legislature on its proceedings during the biennium, detailing the number of complaints made, investigated, and

adjudicated and manner of disposition. In addition, the report must provide data on the department's background check activities conducted under RCW 18.130.064 and the effectiveness of those activities in identifying potential license holders who may not be qualified to practice safely. The report must summarize the distribution of the number of cases assigned to each attorney and investigator for each profession. The identity of the attorney and investigator must remain anonymous. The report may include recommendations for improving the disciplinary process, including proposed legislation. The department shall develop a uniform report format.

(2) Each disciplining authority identified in RCW 18.130.040(2)(b) may submit a biennial report to complement the report required under subsection (1) of this section. Each report may provide additional information about the disciplinary activities, rule-making and policy activities, and receipts and expenditures for the individual disciplining authority. [2009 c 518 s 22; 2008 c 134 s 13; 1989 1st ex.s. c 9 s 313; 1987 c 505 s 5; 1984 c 279 s 23.]

**Finding—Intent—Severability—2008 c 134:** See notes following RCW 18.130.020.

**Effective date—Severability—1989 1st ex.s. c 9:** See RCW 43.70.910 and 43.70.920.

**RCW 18.130.340 Opiate therapy guidelines.** The secretary of health shall coordinate and assist the regulatory boards and commissions of the health professions with prescriptive authority in the development of uniform guidelines for addressing opiate therapy for acute pain, and chronic pain associated with cancer and other terminal diseases, or other chronic or intractable pain conditions. The purpose of the guidelines is to assure the provision of effective medical treatment in accordance with recognized national standards and consistent with requirements of the public health and safety. [1995 c 336 s 10.]

**RCW 18.130.350 Application—Use of records or exchange of information not affected.** This chapter does not affect the use of records, obtained from the secretary or the disciplining authorities, in any existing investigation or action by any state agency. Nor does this chapter limit any existing exchange of information between the secretary or the disciplining authorities and other state agencies. [1997 c 270 s 3.]

**RCW 18.130.360 Retired volunteer medical worker license—Supervision—Rules.** (1) As used in this section, "emergency or disaster" has the same meaning as in RCW 38.52.010.

(2) The secretary shall issue a retired volunteer medical worker license to any applicant who:

(a) Has held an active license issued by a disciplining authority under RCW 18.130.040 no more than ten years prior to applying for an initial license under this section;

(b) Does not have any current restrictions on the ability to obtain a license for violations of this chapter; and

(c) Submits proof of registration as a volunteer with a local organization for emergency services or management as defined by chapter 38.52 RCW.

(3) License holders under this section must be supervised and may practice only those duties that correspond to the scope of their emergency worker assignment not to exceed their scope of practice prior to retirement.

(4) The department shall adopt rules and policies to implement this section.

(5) The department shall establish standards for the renewal of licenses issued under this section, including continuing competency requirements.

(6) License holders under this section are subject to the provisions of this chapter as they may apply to the issuance and denial of credentials, unauthorized practice, and discipline for acts of unprofessional conduct.

(7) Nothing in this section precludes a health care professional who holds an active license from providing medical services during an emergency or disaster.

(8) The cost of regulatory activities for license holders under this section must be borne in equal proportion by all health care providers holding a license issued by a disciplining authority under RCW 18.130.040. [2006 c 72 s 1.]

**RCW 18.130.370 Prohibition on practicing in another state— Prohibited from practicing in this state until proceedings of appropriate disciplining authority are completed.** Any individual who applies for a license or temporary practice permit or holds a license or temporary practice permit and is prohibited from practicing a health care profession in another state because of an act of unprofessional conduct that is substantially equivalent to an act of unprofessional conduct prohibited by this chapter or any of the chapters specified in RCW 18.130.040 is prohibited from practicing a health care profession in this state until proceedings of the appropriate disciplining authority have been completed under RCW 18.130.050. [2006 c 99 s 3.]

**RCW 18.130.390 Sanctioning schedule—Development.** (1) Each of the disciplining authorities identified in RCW 18.130.040(2)(b) shall appoint a representative to review the secretary's sanctioning guidelines, as well as guidelines adopted by any of the boards and commissions, and collaborate to develop a schedule that defines appropriate ranges of sanctions that are applicable upon a determination that a license holder has committed unprofessional conduct as defined in this chapter or the chapters specified in RCW 18.130.040(2). The schedule must identify aggravating and mitigating circumstances that may enhance or reduce the sanction imposed by the disciplining authority for unprofessional conduct. The schedule must apply to all disciplining authorities. In addition, the disciplining authorities shall make provisions for instances in which there are multiple findings of unprofessional conduct. When establishing the proposed schedule, the disciplining authorities shall consider maintaining consistent sanction determinations that maximize the protection of the public's health and while maintaining the rights of

health care providers of the different health professions. The disciplining authorities shall submit the proposed schedule and recommendations to modify or adopt the secretary's guidelines to the secretary no later than November 15, 2008.

(2) The secretary shall adopt rules establishing a uniform sanctioning schedule that is consistent with the proposed schedule developed under subsection (1) of this section. The schedule shall be applied to all disciplinary actions commenced under this chapter after January 1, 2009. The secretary shall use his or her emergency rule-making authority pursuant to the procedures under chapter 34.05 RCW, to adopt rules that take effect no later than January 1, 2009, to implement the schedule.

(3) The disciplining authority may determine that a case presents unique circumstances that the schedule adopted under this section does not adequately address. The disciplining authority may deviate from the schedule adopted under this section when selecting appropriate sanctions, but the disciplining authority must issue a written explanation in the order of the basis for not following the schedule.

(4) The secretary shall report to the legislature by January 15, 2009, on the adoption of the sanctioning schedule. [2008 c 134 s 12.]

**Finding—Intent—Severability—2008 c 134:** See notes following RCW 18.130.020.

**RCW 18.130.400 Abuse of vulnerable adult—Prohibition on practice.** Any individual who applies for a license or temporary practice permit or holds a license or temporary practice permit and has a final finding issued by the department of social and health services of abuse or neglect of a minor or abuse, abandonment, neglect, or financial exploitation of a vulnerable adult is prohibited from practicing a health care profession in this state until proceedings of the appropriate disciplining authority have been completed under RCW 18.130.050. [2013 c 86 s 1.]

**Effective date—2013 c 86:** "This act takes effect January 1, 2014." [2013 c 86 s 3.]

**RCW 18.130.410 Collecting blood samples without consent under direction of law enforcement.** It is not professional misconduct for a physician licensed under chapter 18.71 RCW; osteopathic physician licensed under chapter 18.57 RCW; registered nurse, licensed practical nurse, or \*advanced registered nurse practitioner licensed under chapter 18.79 RCW; physician assistant licensed under chapter 18.71A RCW; advanced emergency medical technician or paramedic certified under chapter 18.71 RCW; or medical assistant-certified, medical assistant-phlebotomist, or forensic phlebotomist certified under chapter 18.360 RCW, or person holding another credential under Title 18 RCW whose scope of practice includes performing venous blood draws, or hospital, or duly licensed clinical laboratory employing or utilizing services of such licensed or certified health care provider, to collect a blood sample without a person's consent when the physician licensed under chapter 18.71 RCW; osteopathic physician licensed under chapter 18.57 RCW; registered nurse, licensed practical nurse, or \*advanced registered nurse practitioner licensed under

chapter 18.79 RCW; physician assistant licensed under chapter 18.71A RCW; advanced emergency medical technician or paramedic certified under chapter 18.71 RCW; or medical assistant-certified, medical assistant-phlebotomist, or forensic phlebotomist certified under chapter 18.360 RCW, or person holding another credential under Title 18 RCW whose scope of practice includes performing venous blood draws, or hospital, or duly licensed clinical laboratory employing or utilizing services of such licensed or certified health care provider withdrawing blood was directed by a law enforcement officer to do so for the purpose of a blood test under the provisions of a search warrant or exigent circumstances: PROVIDED, That nothing in this section shall relieve a physician licensed under chapter 18.71 RCW; osteopathic physician licensed under chapter 18.57 RCW; registered nurse, licensed practical nurse, or \*advanced registered nurse practitioner licensed under chapter 18.79 RCW; physician assistant licensed under chapter 18.71A RCW; advanced emergency medical technician or paramedic certified under chapter 18.71 RCW; or medical assistant-certified, medical assistant-phlebotomist, or forensic phlebotomist certified under chapter 18.360 RCW, or person holding another credential under Title 18 RCW whose scope of practice includes performing venous blood draws, or hospital, or duly licensed clinical laboratory employing or utilizing services of such licensed or certified health care provider withdrawing blood from professional discipline arising from the use of improper procedures or from failing to exercise the required standard of care. [2020 c 80 s 24; 2017 c 336 s 9; 2015 2nd sp.s. c 3 s 21.]

**\*Reviser's note:** The term "advanced registered nurse practitioner" was changed to "advanced practice registered nurse" by 2024 c 239 s 1, effective June 30, 2027.

**Effective date—2020 c 80 ss 12-59:** See note following RCW 7.68.030.

**Intent—2020 c 80:** See note following RCW 18.71A.010.

**Finding—2017 c 336:** See note following RCW 9.96.060.

**Finding—Intent—2015 2nd sp.s. c 3:** See note following RCW 10.21.055.

**RCW 18.130.420 Stem cell therapies—Informed consent.** (1) A license holder subject to this chapter who performs a stem cell therapy that is not approved by the United States food and drug administration, shall provide the patient with the following written notice prior to performing the therapy:

"THIS NOTICE MUST BE PROVIDED TO YOU UNDER WASHINGTON LAW. This health care practitioner performs one or more stem cell therapies that have not yet been approved by the United States food and drug administration. You are encouraged to consult with your primary care provider prior to undergoing a stem cell therapy."

(2) The written notice required by subsection (1) of this section must be at least eight and one-half inches by eleven inches and written in no less than forty point type. The license holder must also

prominently display the written notice in the entrance and in an area visible to patients in the license holder's office.

(3) A license holder who is required to provide written notice under subsection (1) of this section must also obtain a signed consent form before performing the therapy. The consent form must be signed by the patient, or, if the patient is legally not competent, the patient's representative, and must state, in language the patient could reasonably be expected to understand:

(a) The nature and character of the proposed treatment, including the treatment's food and drug administration approval status;

(b) The anticipated results of the proposed treatment;

(c) The recognized possible alternative forms of treatment; and

(d) The recognized serious possible risks, complications, and anticipated benefits involved in the treatment and in the recognized possible alternative forms of treatment, including nontreatment.

(4) The license holder must include the notice set forth in subsection (1) of this section in any advertisements for the therapy. In print advertisements, the notice must be clearly legible, in a font size no smaller than the largest font size used in the advertisement. In all other forms of advertisements, the notice must be either clearly legible in a font size no smaller than the largest font size used in the advertisement or clearly spoken.

(5) This section does not apply to the following:

(a) A license holder who has obtained approval for an investigational new drug or device from the United States food and drug administration for the use of human cells, tissues, or cellular or tissue-based products.

(b) A license holder who performs a stem cell therapy pursuant to an employment or other contract to perform the therapy on behalf of or under the auspices of an institution certified by the foundation for the accreditation of cellular therapy, the national institutes of health blood and marrow transplant clinical trials network, or AABB.

(6) Violations of this section constitute unprofessional conduct under this chapter.

(7) For purposes of this section:

(a) "Human cells, tissues, or cellular or tissue-based products" has the same meaning as in 21 C.F.R. Sec. 1271.3 as it exists on June 7, 2018.

(b) "Stem cell therapy" means a therapy involving the use of human cells, tissues, or cellular or tissue-based products. [2018 c 216 s 1.]

**RCW 18.130.430 Pelvic exams.** (1) A health care provider licensed under this title may not knowingly perform or authorize a student practicing under their authority to perform a pelvic examination on a patient who is anesthetized or unconscious unless:

(a) The patient or a person authorized to make health care decisions for the patient gave specific informed consent to the examination;

(b) The examination is necessary for diagnostic or treatment purposes; or

(c) Sexual assault is suspected, evidence may be collected if the patient is not capable of informed consent due to longer term medical condition, or if evidence will be lost.

(2) A licensed health care provider who violates subsection (1) of this section is subject to discipline pursuant to this chapter, the uniform disciplinary act. [2020 c 187 s 1.]

**RCW 18.130.440 Educational materials on nationwide 988 phone number—Veterans crisis line and resources.** (1) Subject to the availability of amounts appropriated for this specific purpose, the department shall consult with the department of veterans affairs to create educational materials informing health care providers regulated under this chapter about the availability of the nationwide 988 phone number for individuals in crisis to connect with suicide prevention and mental health crisis counselors. The educational materials must include information about the veterans crisis line for veterans and service members, and, beginning July 1, 2023, information about the resources developed under RCW 43.60A.280.

(2) The department shall:

(a) Determine the health professions to which this section shall apply; and

(b) Collaborate with the corresponding disciplining authority under RCW 18.130.020 to ensure that the educational materials are distributed electronically to appropriate licensed health care providers when a provider renews his or her license.

(3) Beginning July 1, 2023, all health care providers are strongly encouraged to inquire with new patients entering care whether the patient is a veteran, member of the military, or a family member of a veteran or member of the military. If the patient responds in the affirmative, the provider is encouraged to share the educational materials created under this section with the patient. [2022 c 191 s 6.]

**Findings—Intent—2022 c 191:** See note following RCW 43.60A.260.

**RCW 18.130.450 Reproductive health care services and gender-affirming treatment.** (1) Notwithstanding RCW 18.130.180, the following shall not constitute unprofessional conduct under this chapter:

(a) The provision of, authorization of, recommendation of, aiding in, assistance in, referral for, or other participation in any reproductive health care services or gender-affirming treatment consistent with the standard of care in Washington by a license holder;

(b) The provision of, authorization of, recommendation of, aiding in, assistance in, referral for, or other participation in any reproductive health care services or gender-affirming treatment, by a license holder, if the participation would have been lawful and consistent with standards of care if it occurred entirely in Washington;

(c) A conviction or disciplinary action based on the license holder's violation of another state's laws prohibiting the provision of, authorization of, recommendation of, aiding in, assistance in, referral for, or other participation in any reproductive health care services or gender-affirming treatment, if the participation would have been lawful and consistent with standards of care if it occurred entirely in Washington.

(2) Except as required by chapter 18.71B RCW, the following, alone or in combination, shall not serve as the basis for a denial of an application for licensure, licensure renewal, or temporary practice permit, or for any other disciplinary action by a disciplining authority against an applicant or license holder:

(a) The provision of, authorization of, recommendation of, aiding in, assistance in, referral for, or other participation in any reproductive health care services or gender-affirming treatment consistent with the standard of care in Washington by a license holder;

(b) The provision of, authorization of, recommendation of, aiding in, assistance in, referral for, or other participation in any reproductive health care services or gender-affirming treatment, by a license holder, if the participation would have been lawful and consistent with standards of care if it occurred entirely in Washington;

(c) A conviction or disciplinary action based on the license holder's violation of another state's laws prohibiting the provision of, authorization of, recommendation of, aiding in, assistance in, referral for, or other participation in any reproductive health care services or gender-affirming treatment, if the participation would have been lawful and consistent with standards of care if it occurred entirely in Washington.

(3) Nothing in this section prohibits the disciplining authority from taking action on separate charges that are unrelated to the provision of, authorization of, recommendation of, aiding in, assistance in, referral for, or other participation in any reproductive health care services or gender-affirming treatment that would have been lawful and consistent with standards of care if it occurred entirely in Washington.

(4) Nothing in this section shall be construed to expand the scope of practice of any license holder licensed under this title, nor does this section give any such license holder the authority to act outside their scope of practice as defined under this title.

(5) For the purposes of this section the following definitions apply:

(a) "Gender-affirming treatment" means a service or product that a health care provider, as defined in RCW 70.02.010, provides to an individual to support and affirm the individual's gender identity. "Gender-affirming treatment" includes, but is not limited to, treatment for gender dysphoria. "Gender-affirming treatment" can be provided to two spirit, transgender, nonbinary, and other gender diverse individuals.

(b) "Reproductive health care services" means any medical services or treatments, including pharmaceutical and preventive care services or treatments, directly involved in the reproductive system and its processes, functions, and organs involved in reproduction. [2024 c 14 s 1; 2023 c 192 s 3.]

**Effective date—2023 c 192:** "This act is necessary for the immediate preservation of the public peace, health, or safety, or support of the state government and its existing public institutions, and takes effect immediately [April 27, 2023]." [2023 c 192 s 4.]

**RCW 18.130.460 Female genital mutilation—Minors—Prohibition on procedure.** (1) A health care provider licensed under this title shall not perform any procedure constituting female genital mutilation on a minor.

(2) A licensed health care provider who violates subsection (1) of this section is subject to discipline under this chapter.

(3) For purposes of this section:

(a) "Female genital mutilation" means any procedure performed for nonmedical reasons that involves partial or total removal of, or other injury to, the external female genitalia, including but not limited to a clitoridectomy or the partial or total removal of the clitoris or the prepuce or clitoral hood, excision or the partial or total removal (with or without excision of the clitoris) of the labia minora or the labia majora, or both, infibulation or the narrowing of the vaginal opening (with or without excision of the clitoris), or other procedures that are harmful to the external female genitalia, including pricking, incising, scraping, or cauterizing the genital area; and

(b) "Minor" means any person under the age of 18. [2023 c 122 s 3.]

**Finding—Intent—Effective date—2023 c 122:** See notes following RCW 9A.36.170.

**RCW 18.130.470 Ultrasounds.** (1) An ultrasound or a similar medical imaging device or procedure may only be provided by: (a) A health care provider holding an active license under one of the chapters listed in RCW 18.130.040 and acting within their scope of practice; or (b) a person acting under the supervision of a health care provider holding an active license under one of the chapters listed in RCW 18.130.040, where all actions performed are within the supervising health care provider's scope of practice.

(2) A violation of this section shall constitute practice without a license and the disciplining authority shall investigate and adjudicate complaints pursuant to RCW 18.130.190.

(3) This section does not apply to the use of an ultrasound by a person on livestock or other animals owned or being raised by that person. [2024 c 329 s 1.]

**RCW 18.130.800 Rule making—Licensure requirements.** (1) By July 1, 2024, the department and the examining board of psychology shall adopt emergency rules to implement changes to licensing requirements to remove barriers to entering and remaining in the health care workforce and to streamline and shorten the credentialing process. Pursuant to RCW 34.05.350, the legislature finds that the rules adopted under this section are necessary for the preservation of the public health, safety, or general welfare and observing the time requirements of notice and opportunity to comment upon adoption of a permanent rule would be contrary to the public interest. The disciplining authorities shall, therefore, adopt the rules required under this section as emergency rules.

(2) By July 1, 2025, the department and the examining board of psychology shall adopt permanent rules to implement changes to licensing requirements to remove barriers to entering and remaining in

the health care workforce and to streamline and shorten the credentialing process. [2023 c 425 s 6.]

**Effective date—2023 c 425 ss 1-7, 13-20, and 22-26:** See note following RCW 18.83.170.

**RCW 18.130.900 Short title—Applicability.** (1) This chapter shall be known and cited as the uniform disciplinary act.

(2) This chapter applies to any conduct, acts, or conditions occurring on or after June 11, 1986.

(3) This chapter does not apply to or govern the construction of and disciplinary action for any conduct, acts, or conditions occurring prior to June 11, 1986. Such conduct, acts, or conditions must be construed and disciplinary action taken according to the provisions of law existing at the time of the occurrence in the same manner as if this chapter had not been enacted. [1986 c 259 s 14; 1984 c 279 s 24.]

**Severability—1986 c 259:** See note following RCW 18.130.010.

**RCW 18.130.901 Severability—1984 c 279.** If any provision of this act or its application to any person or circumstance is held invalid, the remainder of the act or the application of the provision to other persons or circumstances is not affected. [1984 c 279 s 95.]