

2SSB 5555 - H COMM AMD
By Committee on Appropriations

ADOPTED 04/12/2023

1 Strike everything after the enacting clause and insert the
2 following:

3 "NEW SECTION. **Sec. 1.** (1) The legislature finds that peers play
4 a critical role along the behavioral health continuum of care, from
5 outreach to treatment to recovery support. Peers deal in the currency
6 of hope and motivation and are incredibly adept at supporting people
7 with behavioral health challenges on their recovery journeys. Peers
8 represent the only segment of the behavioral health workforce where
9 there is not a shortage, but a surplus of willing workers. Peers,
10 however, are presently limited to serving only medicaid recipients
11 and working only in community behavioral health agencies. As a
12 result, youth and adults with commercial insurance have no access to
13 peer services. Furthermore, peers who work in other settings, such as
14 emergency departments and behavioral health urgent care, cannot bill
15 insurance for their services.

16 (2) Therefore, it is the intent of the legislature to address the
17 behavioral health workforce crisis, expand access to peer services,
18 eliminate financial barriers to professional licensing, and honor the
19 contributions of the peer profession by creating the profession of
20 certified peer specialists.

21 NEW SECTION. **Sec. 2.** The definitions in this section apply
22 throughout this chapter unless the context clearly requires
23 otherwise.

24 (1) "Advisory committee" means the Washington state certified
25 peer specialist advisory committee established under section 4 of
26 this act.

27 (2) "Approved supervisor" means:

28 (a) Until July 1, 2028, a behavioral health provider, as defined
29 in RCW 71.24.025 with at least two years of experience working in a
30 behavioral health practice that employs peer specialists as part of
31 treatment teams; or

1 (b) A certified peer specialist who has completed:

2 (i) At least 1,500 hours of work as a fully certified peer
3 specialist engaged in the practice of peer support services, with at
4 least 500 hours attained through the joint supervision of peers in
5 conjunction with another approved supervisor; and

6 (ii) The training developed by the health care authority under
7 section 13 of this act.

8 (3) "Certified peer specialist" means a person certified under
9 this chapter to engage in the practice of peer support services.

10 (4) "Certified peer specialist trainee" means an individual
11 working toward the supervised experience and written examination
12 requirements to become a certified peer specialist under this
13 chapter.

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

15 (6) "Practice of peer support services" means the provision of
16 interventions by either a person in recovery from a mental health
17 condition or substance use disorder, or both, or the parent or legal
18 guardian of a youth who is receiving or has received behavioral
19 health services. The client receiving the interventions receives them
20 from a person with a similar lived experience as either a person in
21 recovery from a mental health condition or substance use disorder, or
22 both, or the parent or legal guardian of a youth who is receiving or
23 has received behavioral health services. The person provides the
24 interventions through the use of shared experiences to assist a
25 client in the acquisition and exercise of skills needed to support
26 the client's recovery. Interventions may include activities that
27 assist clients in accessing or engaging in treatment and in symptom
28 management; promote social connection, recovery, and self-advocacy;
29 provide guidance in the development of natural community supports and
30 basic daily living skills; and support clients in engagement,
31 motivation, and maintenance related to achieving and maintaining
32 health and wellness goals.

33 (7) "Secretary" means the secretary of health.

34 NEW SECTION. **Sec. 3.** In addition to any other authority, the
35 secretary has the authority to:

36 (1) Adopt rules under chapter 34.05 RCW necessary to implement
37 this chapter;

1 (2) Establish all certification, examination, and renewal fees
2 for certified peer specialists in accordance with RCW 43.70.110 and
3 43.70.250;

4 (3) Establish forms and procedures necessary to administer this
5 chapter;

6 (4) Issue certificates to applicants who have met the education,
7 training, and examination requirements for obtaining a certificate
8 and to deny a certificate to applicants who do not meet the
9 requirements;

10 (5) Coordinate with the health care authority to confirm an
11 applicants' successful completion of the certified peer specialist
12 education course offered by the health care authority under section
13 13 of this act and successful passage of the associated oral
14 examination as proof of eligibility to take a qualifying written
15 examination for applicants for obtaining a certificate;

16 (6) Establish practice parameters consistent with the definition
17 of the practice of peer support services;

18 (7) Provide staffing and administrative support to the advisory
19 committee;

20 (8) Determine which states have credentialing requirements
21 equivalent to those of this state, and issue certificates to
22 applicants credentialed in those states without examination;

23 (9) Define and approve any supervised experience requirements for
24 certification;

25 (10) Assist the advisory committee with the review of peer
26 counselor apprenticeship program applications in the process of being
27 approved and registered under chapter 49.04 RCW;

28 (11) Adopt rules implementing a continuing competency program;
29 and

30 (12) Establish by rule the procedures for an appeal of an
31 examination failure.

32 NEW SECTION. **Sec. 4.** (1) The Washington state certified peer
33 specialist advisory committee is established.

34 (2)(a) The advisory committee shall consist of 11 members. Nine
35 members must be certified peer specialists. Those nine members shall
36 be inclusive of mental health peers, substance use disorder peers,
37 community-based peers, peers who work in clinical settings, youth
38 peers, adult peers, parent or family peers, and peer supervisors. One
39 member must represent community behavioral health agencies. One

1 member must represent the public at large and may not be a
2 credentialed behavioral health provider. The advisory committee shall
3 be reflective of the community who receives peer services, including
4 people who are Black, indigenous, people of color, and individuals
5 who identify as LGBTQ. All members of the advisory committee must be
6 residents of Washington state. Members may not hold an office in a
7 professional association for peer specialists or be employed by the
8 state. A majority of the members currently serving shall constitute a
9 quorum.

10 (b) The members shall be appointed by the secretary to serve
11 three-year terms which may be renewed. Initial members shall be
12 appointed to staggered terms which may be less than three years.
13 Initial membership may vary from the requirements in (a) of this
14 subsection to account for the lack of an available credential for
15 certified peer specialists at the time the advisory committee is
16 established. The advisory committee shall select a chair and vice
17 chair.

18 (3) The department and the health care authority, as appropriate,
19 are encouraged to adopt recommendations as submitted by the advisory
20 committee on topics related to the administration of this chapter and
21 provide their rationale for any formal recommendations of the
22 advisory committee that either agency does not adopt, including:

23 (a) Advice and recommendations regarding the establishment or
24 implementation of rules related to this chapter;

25 (b) Advice, recommendations, and consultation regarding
26 professional boundaries, customary practices, and other aspects of
27 peer support as it relates to complaints, investigations, and other
28 disciplinary actions;

29 (c) Assistance and recommendations to enhance patient and client
30 education;

31 (d) Assistance and recommendations regarding the written and oral
32 examination to become a certified peer specialist and the examiners
33 conducting the examinations, including recommendations to assure that
34 the examinations, and the manner in which the examinations are
35 administered, are culturally appropriate;

36 (e) Assistance and recommendations regarding any continuing
37 education and continuing competency programs administered under the
38 provisions of this chapter;

1 (f) Advice and guidance regarding criteria for certification
2 based on prior experience as a peer specialist attained before July
3 1, 2025, as described in section 7(2) of this act;

4 (g) Recommendations for additional supports that may help those
5 practicing as peer counselors as of the effective date of this
6 section to become certified peer specialists;

7 (h) Advice and guidance on the feasibility and design of a two-
8 phase certification program for peer specialists;

9 (i) Review of existing health care authority policies and
10 procedures related to peer counselors;

11 (j) Advice on approving additional education and training
12 entities, other than the health care authority, to conduct the course
13 of instruction in section 13(1)(a) of this act to expand availability
14 of the course, particularly among black, indigenous, people of color,
15 and individuals who identify as LGBTQ;

16 (k) Advice on approving additional testing entities, other than
17 the health care authority to administer the written and oral
18 examination, including entities owned by black, indigenous, and
19 people of color;

20 (l) Advice on long-term planning and growth for the future
21 advancement of the peer specialist profession;

22 (m) Recommendations on recruitment and retention in the peer
23 specialist profession, including among black, indigenous, people of
24 color, and individuals who identify as LGBTQ; and

25 (n) Recommendations on strategies to eliminate financial barriers
26 to licensing as a certified peer specialist.

27 (4) Committee members are immune from suit in an action, civil or
28 criminal, based on the department's disciplinary proceedings or other
29 official acts performed in good faith.

30 (5) Committee members shall be compensated in accordance with RCW
31 43.03.240, including travel expenses in carrying out his or her
32 authorized duties in accordance with RCW 43.03.050 and 43.03.060.

33 NEW SECTION. **Sec. 5.** Beginning July 1, 2025, except as provided
34 in section 13 of this act, the decision of a person practicing peer
35 support services to become certified under this chapter is voluntary.
36 A person may not use the title certified peer specialist unless the
37 person holds a credential under this chapter.

1 NEW SECTION. **Sec. 6.** Nothing in this chapter may be construed
2 to prohibit or restrict:

3 (1) An individual who holds a credential issued by this state,
4 other than as a certified peer specialist or certified peer
5 specialist trainee, to engage in the practice of an occupation or
6 profession without obtaining an additional credential from the state.
7 The individual may not use the title certified peer specialist unless
8 the individual holds a credential under this chapter; or

9 (2) The practice of peer support services by a person who is
10 employed by the government of the United States while engaged in the
11 performance of duties prescribed by the laws of the United States.

12 NEW SECTION. **Sec. 7.** (1) Beginning July 1, 2025, except as
13 provided in subsections (2) and (3) of this section, the secretary
14 shall issue a certificate to practice as a certified peer specialist
15 to any applicant who demonstrates to the satisfaction of the
16 secretary that the applicant meets the following requirements:

17 (a) Submission of an attestation to the department that the
18 applicant self-identifies as:

19 (i) A person with one or more years of recovery from a mental
20 health condition, substance use disorder, or both; or

21 (ii) The parent or legal guardian of a youth who is receiving or
22 has received behavioral health services;

23 (b) Successful completion of the education course developed and
24 offered by the health care authority under section 13 of this act;

25 (c) Successful passage of an oral examination administered by the
26 health care authority upon completion of the education course offered
27 by the health care authority under section 13 of this act;

28 (d) Successful passage of a written examination administered by
29 the health care authority upon completion of the education course
30 offered by the health care authority under section 13 of this act;

31 (e) Successful completion of an experience requirement of at
32 least 1,000 supervised hours as a certified peer specialist trainee
33 engaged in the volunteer or paid practice of peer support services,
34 in accordance with the standards in section 8 of this act; and

35 (f) Payment of the appropriate fee required under this chapter.

36 (2) The secretary, with the recommendation of the advisory
37 committee, shall establish criteria for the issuance of a certificate
38 to engage in the practice of peer support services based on prior
39 experience as a peer specialist attained before July 1, 2025. The

1 criteria shall establish equivalency standards necessary to be deemed
2 to have met the requirements of subsection (1) of this section. An
3 applicant under this subsection shall have until July 1, 2026, to
4 complete any standards in which the applicant is determined to be
5 deficient.

6 (3) The secretary, with the recommendation of the advisory
7 committee, shall issue a certificate to engage in the practice of
8 peer support services based on completion of an apprenticeship
9 program registered and approved under chapter 49.04 RCW and reviewed
10 by the advisory committee under section 3 of this act.

11 (4) A certificate to engage in the practice of peer support
12 services is valid for two years. A certificate may be renewed upon
13 demonstrating to the department that the certified peer specialist
14 has successfully completed 30 hours of continuing education approved
15 by the department. As part of the continuing education requirement,
16 every six years the applicant must submit proof of successful
17 completion of at least three hours of suicide prevention training and
18 at least six hours of coursework in professional ethics and law,
19 which may include topics under RCW 18.130.180.

20 NEW SECTION. **Sec. 8.** (1) Beginning July 1, 2025, the secretary
21 shall issue a certificate to practice as a certified peer specialist
22 trainee to any applicant who demonstrates to the satisfaction of the
23 secretary that:

24 (a) The applicant meets the requirements of section 7 (1)(a),
25 (b), (c), (d), and (4) of this act and is working toward the
26 supervised experience requirements to become a certified peer
27 specialist under this chapter; or

28 (b) The applicant is enrolled in an apprenticeship program
29 registered and approved under chapter 49.04 RCW and approved by the
30 secretary under section 3 of this act.

31 (2) An applicant seeking to become a certified peer specialist
32 trainee under this section shall submit to the secretary for approval
33 an attestation, in accordance with rules adopted by the department,
34 that the certified peer specialist trainee is actively pursuing the
35 supervised experience requirements of section 7(1)(d) of this act.
36 This attestation must be updated with the trainee's annual renewal.

37 (3) A certified peer specialist trainee certified under this
38 section may practice only under the supervision of an approved
39 supervisor. Supervision may be provided through distance supervision.

1 Supervision may be provided by an approved supervisor who is employed
2 by the same employer that employs the certified peer specialist
3 trainee or by an arrangement made with a third-party approved
4 supervisor to provide supervision, or a combination of both types of
5 approved supervisors.

6 (4) A certified peer specialist trainee certificate is valid for
7 one year and may only be renewed four times.

8 NEW SECTION. **Sec. 9.** (1) The date and location of written
9 examinations must be established by the health care authority.
10 Applicants who have been found by the health care authority to meet
11 other requirements for obtaining a certificate must be scheduled for
12 the next examination following the filing of the application. The
13 health care authority shall establish by rule the examination
14 application deadline.

15 (2) The health care authority shall administer written
16 examinations to each applicant, by means determined most effective,
17 on subjects appropriate to the scope of practice, as applicable. The
18 examinations must be limited to the purpose of determining whether
19 the applicant possesses the minimum skill and knowledge necessary to
20 practice competently.

21 (3) The examination materials, all grading of the materials, and
22 the grading of any practical work must be preserved for a period of
23 not less than one year after the health care authority has made and
24 published the decisions. All examinations must be conducted under
25 fair and wholly impartial methods.

26 (4) Any applicant failing to make the required grade in the first
27 written examination may take up to three subsequent written
28 examinations as the applicant desires upon prepaying a fee determined
29 by the health care authority for each subsequent written examination.
30 Upon failing four written examinations, the health care authority may
31 invalidate the original application and require remedial education
32 before the person may take future written examinations.

33 (5) The health care authority may approve a written examination
34 prepared or administered by a private organization that credentials
35 and renews credentials for peer counselors, or an association of
36 credentialing agencies, for use by an applicant in meeting the
37 credentialing requirements.

1 NEW SECTION. **Sec. 10.** The secretary shall establish, by rule,
2 the requirements and fees for renewal of a certificate issued
3 pursuant to this chapter. Fees must be established in accordance with
4 RCW 43.70.110 and 43.70.250. Failure to renew the certificate
5 invalidates the certificate and all privileges granted by the
6 certificate. If a certificate has lapsed for a period longer than
7 three years, the person shall demonstrate competence to the
8 satisfaction of the secretary by completing continuing competency
9 requirements or meeting other standards determined by the secretary.

10 NEW SECTION. **Sec. 11.** (1) The department, in consultation with
11 the advisory committee, shall conduct an assessment and submit a
12 report to the governor and the committees of the legislature with
13 jurisdiction over health policy issues by December 1, 2027.

14 (2) The report in subsection (1) of this section shall provide:

15 (a) An analysis of the adequacy of the supply of certified peer
16 specialists serving as approved supervisors pursuant to section
17 2(2)(b) of this act with respect to the ability to meet the
18 anticipated supervision needs of certified peer specialist trainees
19 upon the expiration of behavioral health providers serving as
20 approved supervisors pursuant to section 2(2)(a) of this act;

21 (b) An assessment of whether or not it is necessary to extend the
22 expiration of behavioral health providers serving as approved
23 supervisors pursuant to section 2(2)(a) of this act in order to meet
24 the anticipated supervision needs of certified peer specialist
25 trainees;

26 (c) Recommendations for increasing the supply of certified peer
27 specialists serving as approved supervisors pursuant to section
28 2(2)(b) of this act, including any potential modifications to the
29 requirements to become an approved supervisor; and

30 (d) Recommendations for alternative methods of providing
31 supervision to certified peer specialist trainees, including options
32 for team-based supervision that incorporate supervision from both
33 behavioral health providers serving as approved supervisors pursuant
34 to section 2(2)(a) of this act and certified peer specialists serving
35 as approved supervisors pursuant to section 2(2)(b) of this act.

36 NEW SECTION. **Sec. 12.** The uniform disciplinary act, chapter
37 18.130 RCW, governs uncertified practice of peer support services,
38 the issuance and denial of certificates, and the discipline of

1 certified peer specialists and certified peer specialist trainees
2 under this chapter.

3 NEW SECTION. **Sec. 13.** A new section is added to chapter 71.24
4 RCW to read as follows:

5 (1) (a) By January 1, 2025, the authority must develop a course of
6 instruction to become a certified peer specialist under chapter
7 18.--- RCW (the new chapter created in section 22 of this act). The
8 course must be approximately 80 hours in duration and based upon the
9 curriculum offered by the authority in its peer counselor training as
10 of the effective date of this section, as well as additional
11 instruction in the principles of recovery coaching and suicide
12 prevention. The authority shall establish a peer engagement process
13 to receive suggestions regarding subjects to be covered in the 80-
14 hour curriculum beyond those addressed in the peer counselor training
15 curriculum and recovery coaching and suicide prevention curricula,
16 including the cultural appropriateness of the 80-hour training. The
17 education course must be taught by certified peer specialists. The
18 education course must be offered by the authority with sufficient
19 frequency to accommodate the demand for training and the needs of the
20 workforce. The authority must establish multiple configurations for
21 offering the education course, including offering the course as an
22 uninterrupted course with longer class hours held on consecutive days
23 for students seeking accelerated completion of the course and as an
24 extended course with reduced daily class hours, possibly with
25 multiple days between classes, to accommodate students with other
26 commitments. Upon completion of the education course, the student
27 must pass an oral examination administered by the course trainer.

28 (b) The authority shall develop an expedited course of
29 instruction that consists of only those portions of the curriculum
30 required under (a) of this subsection that exceed the authority's
31 certified peer counselor training curriculum as it exists on the
32 effective date of this section. The expedited training shall focus on
33 assisting persons who completed the authority's certified peer
34 counselor training as it exists on the effective date of this section
35 to meet the education requirements for certification under section 7
36 of this act.

37 (2) By January 1, 2025, the authority must develop a training
38 course for certified peer specialists providing supervision to
39 certified peer specialist trainees under section 8 of this act.

1 (3) (a) By July 1, 2025, the authority shall offer a 40-hour
2 specialized training course in peer crisis response services for
3 individuals employed as peers who work with individuals who may be
4 experiencing a behavioral health crisis. When offering the training
5 course, priority for enrollment must be given to certified peer
6 specialists employed in a crisis-related setting, including entities
7 identified in (b) of this subsection. The training shall incorporate
8 best practices for responding to 988 behavioral health crisis line
9 calls, as well as processes for co-response with law enforcement when
10 necessary.

11 (b) Beginning July 1, 2025, any entity that uses certified peer
12 specialists as peer crisis responders, may only use certified peer
13 specialists who have completed the training course established by (a)
14 of this subsection. A behavioral health agency that uses certified
15 peer specialists to work as peer crisis responders must maintain the
16 records of the completion of the training course for those certified
17 peer specialists who provide these services and make the records
18 available to the state agency for auditing or certification purposes.

19 (4) By July 1, 2025, the authority shall offer a course designed
20 to inform licensed or certified behavioral health agencies of the
21 benefits of incorporating certified peer specialists and certified
22 peer specialist trainees into their clinical staff and best practices
23 for incorporating their services. The authority shall encourage
24 entities that hire certified peer specialists and certified peer
25 specialist trainees, including licensed or certified behavioral
26 health agencies, hospitals, primary care offices, and other entities,
27 to have appropriate staff attend the training by making it available
28 in multiple formats.

29 (5) The authority shall:

30 (a) Hire clerical, administrative, investigative, and other staff
31 as needed to implement this section to serve as examiners for any
32 practical oral or written examination and assure that the examiners
33 are trained to administer examinations in a culturally appropriate
34 manner and represent the diversity of applicants being tested. The
35 authority shall adopt procedures to allow for appropriate
36 accommodations for persons with a learning disability, other
37 disabilities, and other needs and assure that staff involved in the
38 administration of examinations are trained on those procedures;

39 (b) Develop oral and written examinations required under this
40 section. The initial examinations shall be adapted from those used by

1 the authority as of the effective date of this section and modified
2 pursuant to input and comments from the Washington state peer
3 specialist advisory committee. The authority shall assure that the
4 examinations are culturally appropriate;

5 (c) Prepare, grade, and administer, or supervise the grading and
6 administration of written examinations for obtaining a certificate;

7 (d) Approve entities to provide the educational courses required
8 by this section and approve entities to prepare, grade, and
9 administer written examinations for the educational courses required
10 by this section. In establishing approval criteria, the authority
11 shall consider the recommendations of the Washington state peer
12 specialist advisory committee;

13 (e) Develop examination preparation materials and make them
14 available to students enrolled in the courses established under this
15 section in multiple formats, including specialized examination
16 preparation support for students with higher barriers to passing the
17 written examination; and

18 (f) The authority shall administer, through contract, a program
19 to link eligible persons in recovery from behavioral health
20 challenges who are seeking employment as peers with employers seeking
21 to hire peers, including certified peer specialists. The authority
22 must contract for this program with an organization that provides
23 peer workforce development, peer coaching, and other peer supportive
24 services. The contract must require the organization to create and
25 maintain a statewide database which is easily accessible to eligible
26 persons in recovery who are seeking employment as peers and potential
27 employers seeking to hire peers, including certified peer
28 specialists. The program must be fully implemented by July 1, 2024.

29 (6) For the purposes of this section, the term "peer crisis
30 responder" means a peer specialist certified under chapter 18.--- RCW
31 (the new chapter created in section 22 of this act) who has completed
32 the training under subsection (3) of this section whose job involves
33 responding to behavioral health emergencies, including those
34 dispatched through a 988 crisis hotline or the 911 system.

35 NEW SECTION. **Sec. 14.** A new section is added to chapter 71.24
36 RCW to read as follows:

37 Behavioral health agencies must reduce the caseload for approved
38 supervisors who are providing supervision to certified peer
39 specialist trainees seeking certification under chapter 18.--- RCW

1 (the new chapter created in section 22 of this act), in accordance
2 with standards established by the Washington state certified peer
3 specialist advisory committee.

4 NEW SECTION. **Sec. 15.** A new section is added to chapter 71.24
5 RCW to read as follows:

6 (1) Beginning January 1, 2027, a person who engages in the
7 practice of peer support services and who bills a health carrier or
8 medical assistance or whose employer bills a health carrier or
9 medical assistance for those services must hold an active credential
10 as a certified peer specialist or certified peer specialist trainee
11 under chapter 18.--- RCW (the new chapter created in section 22 of
12 this act).

13 (2) A person who is registered as an agency-affiliated counselor
14 under chapter 18.19 RCW who engages in the practice of peer support
15 services and whose agency, as defined in RCW 18.19.020, bills medical
16 assistance for those services must hold a certificate as a certified
17 peer specialist or certified peer specialist trainee under chapter
18 18.--- RCW (the new chapter created in section 22 of this act) no
19 later than January 1, 2027.

20 NEW SECTION. **Sec. 16.** A new section is added to chapter 48.43
21 RCW to read as follows:

22 By July 1, 2026, each carrier shall provide access to services
23 provided by certified peer specialists and certified peer specialist
24 trainees in a manner sufficient to meet the network access standards
25 set forth in rules established by the office of the insurance
26 commissioner.

27 **Sec. 17.** RCW 18.130.040 and 2021 c 179 s 7 are each amended to
28 read as follows:

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

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

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

- 1 (ii) Midwives licensed under chapter 18.50 RCW;
- 2 (iii) Ocularists licensed under chapter 18.55 RCW;
- 3 (iv) Massage therapists and businesses licensed under chapter
4 18.108 RCW;
- 5 (v) Dental hygienists licensed under chapter 18.29 RCW;
- 6 (vi) Acupuncturists or acupuncture and Eastern medicine
7 practitioners licensed under chapter 18.06 RCW;
- 8 (vii) Radiologic technologists certified and X-ray technicians
9 registered under chapter 18.84 RCW;
- 10 (viii) Respiratory care practitioners licensed under chapter
11 18.89 RCW;
- 12 (ix) Hypnotherapists and agency affiliated counselors registered
13 and advisors and counselors certified under chapter 18.19 RCW;
- 14 (x) Persons licensed as mental health counselors, mental health
15 counselor associates, marriage and family therapists, marriage and
16 family therapist associates, social workers, social work associates—
17 advanced, and social work associates—independent clinical under
18 chapter 18.225 RCW;
- 19 (xi) Persons registered as nursing pool operators under chapter
20 18.52C RCW;
- 21 (xii) Nursing assistants registered or certified or medication
22 assistants endorsed under chapter 18.88A RCW;
- 23 (xiii) Dietitians and nutritionists certified under chapter
24 18.138 RCW;
- 25 (xiv) Substance use disorder professionals, substance use
26 disorder professional trainees, or co-occurring disorder specialists
27 certified under chapter 18.205 RCW;
- 28 (xv) Sex offender treatment providers and certified affiliate sex
29 offender treatment providers certified under chapter 18.155 RCW;
- 30 (xvi) Persons licensed and certified under chapter 18.73 RCW or
31 RCW 18.71.205;
- 32 (xvii) Orthotists and prosthetists licensed under chapter 18.200
33 RCW;
- 34 (xviii) Surgical technologists registered under chapter 18.215
35 RCW;
- 36 (xix) Recreational therapists under chapter 18.230 RCW;
- 37 (xx) Animal massage therapists certified under chapter 18.240
38 RCW;
- 39 (xxi) Athletic trainers licensed under chapter 18.250 RCW;
- 40 (xxii) Home care aides certified under chapter 18.88B RCW;

1 (xxiii) Genetic counselors licensed under chapter 18.290 RCW;
2 (xxiv) Reflexologists certified under chapter 18.108 RCW;
3 (xxv) Medical assistants-certified, medical assistants-
4 hemodialysis technician, medical assistants-phlebotomist, forensic
5 phlebotomist, and medical assistants-registered certified and
6 registered under chapter 18.360 RCW; (~~and~~)
7 (xxvi) Behavior analysts, assistant behavior analysts, and
8 behavior technicians under chapter 18.380 RCW; and
9 (xxvii) Certified peer specialists and certified peer specialist
10 trainees under chapter 18.--- RCW (the new chapter created in section
11 22 of this act).

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

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

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

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

22 (iv) The board of hearing and speech as established in chapter
23 18.35 RCW;

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

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

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

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

34 (ix) The Washington medical commission as established in chapter
35 18.71 RCW governing licenses and registrations issued under chapters
36 18.71 and 18.71A RCW;

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

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

1 (xii) The nursing care quality assurance commission as
2 established in chapter 18.79 RCW governing licenses and registrations
3 issued under that chapter;

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

6 (xiv) The veterinary board of governors as established in chapter
7 18.92 RCW;

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

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

11 (3) In addition to the authority to discipline license holders,
12 the disciplining authority has the authority to grant or deny
13 licenses. The disciplining authority may also grant a license subject
14 to conditions.

15 (4) All disciplining authorities shall adopt procedures to ensure
16 substantially consistent application of this chapter, the uniform
17 disciplinary act, among the disciplining authorities listed in
18 subsection (2) of this section.

19 **Sec. 18.** RCW 18.130.040 and 2022 c 217 s 5 are each amended to
20 read as follows:

21 (1) This chapter applies only to the secretary and the boards and
22 commissions having jurisdiction in relation to the professions
23 licensed under the chapters specified in this section. This chapter
24 does not apply to any business or profession not licensed under the
25 chapters specified in this section.

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

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

30 (ii) Midwives licensed under chapter 18.50 RCW;

31 (iii) Ocularists licensed under chapter 18.55 RCW;

32 (iv) Massage therapists and businesses licensed under chapter
33 18.108 RCW;

34 (v) Dental hygienists licensed under chapter 18.29 RCW;

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

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

- 1 (viii) Respiratory care practitioners licensed under chapter
2 18.89 RCW;
- 3 (ix) Hypnotherapists and agency affiliated counselors registered
4 and advisors and counselors certified under chapter 18.19 RCW;
- 5 (x) Persons licensed as mental health counselors, mental health
6 counselor associates, marriage and family therapists, marriage and
7 family therapist associates, social workers, social work associates—
8 advanced, and social work associates—independent clinical under
9 chapter 18.225 RCW;
- 10 (xi) Persons registered as nursing pool operators under chapter
11 18.52C RCW;
- 12 (xii) Nursing assistants registered or certified or medication
13 assistants endorsed under chapter 18.88A RCW;
- 14 (xiii) Dietitians and nutritionists certified under chapter
15 18.138 RCW;
- 16 (xiv) Substance use disorder professionals, substance use
17 disorder professional trainees, or co-occurring disorder specialists
18 certified under chapter 18.205 RCW;
- 19 (xv) Sex offender treatment providers and certified affiliate sex
20 offender treatment providers certified under chapter 18.155 RCW;
- 21 (xvi) Persons licensed and certified under chapter 18.73 RCW or
22 RCW 18.71.205;
- 23 (xvii) Orthotists and prosthetists licensed under chapter 18.200
24 RCW;
- 25 (xviii) Surgical technologists registered under chapter 18.215
26 RCW;
- 27 (xix) Recreational therapists under chapter 18.230 RCW;
- 28 (xx) Animal massage therapists certified under chapter 18.240
29 RCW;
- 30 (xxi) Athletic trainers licensed under chapter 18.250 RCW;
- 31 (xxii) Home care aides certified under chapter 18.88B RCW;
- 32 (xxiii) Genetic counselors licensed under chapter 18.290 RCW;
- 33 (xxiv) Reflexologists certified under chapter 18.108 RCW;
- 34 (xxv) Medical assistants-certified, medical assistants-
35 hemodialysis technician, medical assistants-phlebotomist, forensic
36 phlebotomist, and medical assistants-registered certified and
37 registered under chapter 18.360 RCW;
- 38 (xxvi) Behavior analysts, assistant behavior analysts, and
39 behavior technicians under chapter 18.380 RCW; (~~and~~)
- 40 (xxvii) Birth doula certified under chapter 18.47 RCW; and

1 (xxviii) Certified peer specialists and certified peer specialist
2 trainees under chapter 18.--- RCW (the new chapter created in section
3 22 of this act).

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

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

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

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

14 (iv) The board of hearing and speech as established in chapter
15 18.35 RCW;

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

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

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

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

26 (ix) The Washington medical commission as established in chapter
27 18.71 RCW governing licenses and registrations issued under chapters
28 18.71 and 18.71A RCW;

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

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

33 (xii) The nursing care quality assurance commission as
34 established in chapter 18.79 RCW governing licenses and registrations
35 issued under that chapter;

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

38 (xiv) The veterinary board of governors as established in chapter
39 18.92 RCW;

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

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

4 (3) In addition to the authority to discipline license holders,
5 the disciplining authority has the authority to grant or deny
6 licenses. The disciplining authority may also grant a license subject
7 to conditions.

8 (4) All disciplining authorities shall adopt procedures to ensure
9 substantially consistent application of this chapter, the uniform
10 disciplinary act, among the disciplining authorities listed in
11 subsection (2) of this section.

12 **Sec. 19.** RCW 18.130.175 and 2022 c 43 s 10 are each amended to
13 read as follows:

14 (1) In lieu of disciplinary action under RCW 18.130.160 and if
15 the disciplining authority determines that the unprofessional conduct
16 may be the result of an applicable impairing or potentially impairing
17 health condition, the disciplining authority may refer the license
18 holder to a physician health program or a voluntary substance use
19 disorder monitoring program approved by the disciplining authority.

20 The cost of evaluation and treatment shall be the responsibility
21 of the license holder, but the responsibility does not preclude
22 payment by an employer, existing insurance coverage, or other
23 sources. Evaluation and treatment shall be provided by providers
24 approved by the entity or the commission. The disciplining authority
25 may also approve the use of out-of-state programs. Referral of the
26 license holder to the physician health program or voluntary substance
27 use disorder monitoring program shall be done only with the consent
28 of the license holder. Referral to the physician health program or
29 voluntary substance use disorder monitoring program may also include
30 probationary conditions for a designated period of time. If the
31 license holder does not consent to be referred to the program or does
32 not successfully complete the program, the disciplining authority may
33 take appropriate action under RCW 18.130.160 which includes
34 suspension of the license unless or until the disciplining authority,
35 in consultation with the director of the applicable program,
36 determines the license holder is able to practice safely. The
37 secretary shall adopt uniform rules for the evaluation by the
38 disciplining authority of return to substance use or program
39 violation on the part of a license holder in the program. The

1 evaluation shall encourage program participation with additional
2 conditions, in lieu of disciplinary action, when the disciplining
3 authority determines that the license holder is able to continue to
4 practice with reasonable skill and safety.

5 (2) In addition to approving the physician health program or the
6 voluntary substance use disorder monitoring program that may receive
7 referrals from the disciplining authority, the disciplining authority
8 may establish by rule requirements for participation of license
9 holders who are not being investigated or monitored by the
10 disciplining authority. License holders voluntarily participating in
11 the approved programs without being referred by the disciplining
12 authority shall not be subject to disciplinary action under RCW
13 18.130.160 for their impairing or potentially impairing health
14 condition, and shall not have their participation made known to the
15 disciplining authority, if they meet the requirements of this section
16 and the program in which they are participating.

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

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

39 (a) To defend any civil action by a license holder regarding the
40 restriction or revocation of that individual's clinical or staff

1 privileges, or termination of a license holder's employment. In such
2 an action, the program will, upon subpoena issued by either party to
3 the action, and upon the requesting party seeking a protective order
4 for the requested disclosure, provide to both parties of the action
5 written disclosure that includes the following information:

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

10 (ii) The dates of participation;

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

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

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

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

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

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

36 (a) The immunity from civil liability provided by this section
37 shall be liberally construed to accomplish the purposes of this
38 section, and applies to both license holders and students and
39 trainees when students and trainees of the applicable professions are

1 served by the program. The persons entitled to immunity shall
2 include:

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

5 (ii) The professional association affiliated with the program;

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

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

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

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

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

19 (7) In the case of a person who is applying to be a substance use
20 disorder professional or substance use disorder professional trainee
21 certified under chapter 18.205 RCW, an agency affiliated counselor
22 registered under chapter 18.19 RCW, or a peer specialist or peer
23 specialist trainee certified under chapter 18.--- RCW (the new
24 chapter created in section 22 of this act), if the person is:

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

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

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

37 ~~(a) Less than one year in recovery from a substance use disorder,~~
38 ~~the duration of time that the person may be required to participate~~
39 ~~in the approved substance use disorder monitoring program may not~~

1 ~~exceed the amount of time necessary for the person to achieve one~~
2 ~~year in recovery; or~~

3 ~~(b) At least one year in recovery from a substance use disorder,~~
4 ~~the person may not be required to participate in the approved~~
5 ~~substance use disorder monitoring program)) The provisions of~~
6 subsection (7) of this section apply to any person employed as a peer
7 specialist as of July 1, 2025, participating in a program under this
8 section as of July 1, 2025, and applying to become a certified peer
9 specialist under section 7 of this act, regardless of when the
10 person's participation in a program began. To this extent, subsection
11 (7) of this section applies retroactively, but in all other respects
12 it applies prospectively.

13 **Sec. 20.** RCW 43.43.842 and 2021 c 215 s 150 are each amended to
14 read as follows:

15 (1)(a) The secretary of social and health services and the
16 secretary of health shall adopt additional requirements for the
17 licensure or relicensure of agencies, facilities, and licensed
18 individuals who provide care and treatment to vulnerable adults,
19 including nursing pools registered under chapter 18.52C RCW. These
20 additional requirements shall ensure that any person associated with
21 a licensed agency or facility having unsupervised access with a
22 vulnerable adult shall not be the respondent in an active vulnerable
23 adult protection order under chapter 7.105 RCW, nor have been: (i)
24 Convicted of a crime against children or other persons as defined in
25 RCW 43.43.830, except as provided in this section; (ii) convicted of
26 crimes relating to financial exploitation as defined in RCW
27 43.43.830, except as provided in this section; or (iii) found in any
28 disciplinary board final decision to have abused a vulnerable adult
29 as defined in RCW 43.43.830.

30 (b) A person associated with a licensed agency or facility who
31 has unsupervised access with a vulnerable adult shall make the
32 disclosures specified in RCW 43.43.834(2). The person shall make the
33 disclosures in writing, sign, and swear to the contents under penalty
34 of perjury. The person shall, in the disclosures, specify all crimes
35 against children or other persons, all crimes relating to financial
36 exploitation, and all crimes relating to drugs as defined in RCW
37 43.43.830, committed by the person.

38 (2) The rules adopted under this section shall permit the
39 licensee to consider the criminal history of an applicant for

1 employment in a licensed facility when the applicant has one or more
2 convictions for a past offense and:

3 (a) The offense was simple assault, assault in the fourth degree,
4 or the same offense as it may be renamed, and three or more years
5 have passed between the most recent conviction and the date of
6 application for employment;

7 (b) The offense was prostitution, or the same offense as it may
8 be renamed, and three or more years have passed between the most
9 recent conviction and the date of application for employment;

10 (c) The offense was theft in the third degree, or the same
11 offense as it may be renamed, and three or more years have passed
12 between the most recent conviction and the date of application for
13 employment;

14 (d) The offense was theft in the second degree, or the same
15 offense as it may be renamed, and five or more years have passed
16 between the most recent conviction and the date of application for
17 employment;

18 (e) The offense was forgery, or the same offense as it may be
19 renamed, and five or more years have passed between the most recent
20 conviction and the date of application for employment;

21 (f) The department of social and health services reviewed the
22 employee's otherwise disqualifying criminal history through the
23 department of social and health services' background assessment
24 review team process conducted in 2002, and determined that such
25 employee could remain in a position covered by this section; or

26 (g) The otherwise disqualifying conviction or disposition has
27 been the subject of a pardon, annulment, or other equivalent
28 procedure.

29 The offenses set forth in (a) through (g) of this subsection do
30 not automatically disqualify an applicant from employment by a
31 licensee. Nothing in this section may be construed to require the
32 employment of any person against a licensee's judgment.

33 (3) The rules adopted pursuant to subsection (2) of this section
34 may not allow a licensee to automatically deny an applicant with a
35 conviction for an offense set forth in subsection (2) of this section
36 for a position as a substance use disorder professional or substance
37 use disorder professional trainee certified under chapter 18.205 RCW,
38 as an agency affiliated counselor registered under chapter 18.19 RCW
39 practicing as a peer counselor in an agency or facility, or as a peer

1 specialist or peer specialist trainee certified under chapter 18.---
2 RCW (the new chapter created in section 22 of this act), if:

3 (a) At least one year has passed between the applicant's most
4 recent conviction for an offense set forth in subsection (2) of this
5 section and the date of application for employment;

6 (b) The offense was committed as a result of the applicant's
7 substance use or untreated mental health symptoms; and

8 (c) The applicant is at least one year in recovery from a
9 substance use disorder, whether through abstinence or stability on
10 medication-assisted therapy, or in recovery from a mental health
11 disorder.

12 ~~(4) ((The rules adopted pursuant to subsection (2) of this~~
13 ~~section may not allow a licensee to automatically deny an applicant~~
14 ~~with a conviction for an offense set forth in subsection (2) of this~~
15 ~~section for a position as an agency affiliated counselor registered~~
16 ~~under chapter 18.19 RCW practicing as a peer counselor in an agency~~
17 ~~or facility if:~~

18 ~~(a) At least one year has passed between the applicant's most~~
19 ~~recent conviction for an offense set forth in subsection (2) of this~~
20 ~~section and the date of application for employment;~~

21 ~~(b) The offense was committed as a result of the person's~~
22 ~~substance use or untreated mental health symptoms; and~~

23 ~~(c) The applicant is at least one year in recovery from a~~
24 ~~substance use disorder, whether through abstinence or stability on~~
25 ~~medication-assisted therapy, or in recovery from mental health~~
26 ~~challenges.~~

27 ~~(5))~~ In consultation with law enforcement personnel, the
28 secretary of social and health services and the secretary of health
29 shall investigate, or cause to be investigated, the conviction record
30 and the protection proceeding record information under this chapter
31 of the staff of each agency or facility under their respective
32 jurisdictions seeking licensure or relicensure. An individual
33 responding to a criminal background inquiry request from his or her
34 employer or potential employer shall disclose the information about
35 his or her criminal history under penalty of perjury. The secretaries
36 shall use the information solely for the purpose of determining
37 eligibility for licensure or relicensure. Criminal justice agencies
38 shall provide the secretaries such information as they may have and
39 that the secretaries may require for such purpose.

1 **Sec. 21.** RCW 43.70.250 and 2019 c 415 s 966 are each amended to
2 read as follows:

3 (1) It shall be the policy of the state of Washington that the
4 cost of each professional, occupational, or business licensing
5 program be fully borne by the members of that profession, occupation,
6 or business.

7 (2) The secretary shall from time to time establish the amount of
8 all application fees, license fees, registration fees, examination
9 fees, permit fees, renewal fees, and any other fee associated with
10 licensing or regulation of professions, occupations, or businesses
11 administered by the department. Any and all fees or assessments, or
12 both, levied on the state to cover the costs of the operations and
13 activities of the interstate health professions licensure compacts
14 with participating authorities listed under chapter 18.130 RCW shall
15 be borne by the persons who hold licenses issued pursuant to the
16 authority and procedures established under the compacts. In fixing
17 said fees, the secretary shall set the fees for each program at a
18 sufficient level to defray the costs of administering that program
19 and the cost of regulating licensed volunteer medical workers in
20 accordance with RCW 18.130.360, except as provided in RCW 18.79.202.
21 In no case may the secretary (~~increase a licensing fee for an~~
22 ~~ambulatory surgical facility licensed under chapter 70.230 RCW during~~
23 ~~the 2019-2021 fiscal biennium, nor may he or she commence the~~
24 ~~adoption of rules to increase a licensing fee during the 2019-2021~~
25 ~~fiscal biennium)) impose any certification, examination, or renewal
26 fee upon a person seeking certification as a certified peer
27 specialist trainee under chapter 18.--- RCW (the new chapter created
28 in section 22 of this act) or, between July 1, 2025, and July 1,
29 2030, impose a certification, examination, or renewal fee of more
30 than \$100 upon any person seeking certification as a certified peer
31 specialist under chapter 18.--- RCW (the new chapter created in
32 section 22 of this act).~~

33 (3) All such fees shall be fixed by rule adopted by the secretary
34 in accordance with the provisions of the administrative procedure
35 act, chapter 34.05 RCW.

36 NEW SECTION. **Sec. 22.** Sections 1 through 12 of this act
37 constitute a new chapter in Title 18 RCW.

1 NEW SECTION. **Sec. 23.** Section 17 of this act expires October 1,
2 2023.

3 NEW SECTION. **Sec. 24.** Section 18 of this act takes effect
4 October 1, 2023.

5 NEW SECTION. **Sec. 25.** If specific funding for the purposes of
6 this act, referencing this act by bill or chapter number, is not
7 provided by June 30, 2023, in the omnibus appropriations act, this
8 act is null and void."

9 Correct the title.

EFFECT: States that the decision of a person practicing peer support services to become certified as a peer specialist is voluntary, except that a person who practices peer support services must become certified beginning January 1, 2027, if the person or the person's employer bills a health carrier or medical assistance for those services (or, as provided under the act, is an agency-affiliated counselor practicing peer support services for an agency billing medical assistance).

Extends the expiration date for behavioral health providers to serve as approved supervisors until July 1, 2028. Directs the Department of Health to submit a study by December 1, 2027, on the ability of certified peer specialists serving as approved supervisors for certified peer specialist trainees to meet the needs of trainees and recommendations for increasing the supply of certified peer specialists serving as approved supervisors as well as alternative methods of providing supervision, including options for team-based supervision that incorporate supervision from both behavioral health providers and certified peer specialists.

Directs the Health Care Authority (Authority) to contract for a program by July 1, 2024, to link eligible persons in recovery from behavioral health challenges who are seeking employment as peers with potential employers. Requires the contractor to create and maintain a statewide database that is accessible to eligible persons and employers.

Adds parent or family peers to the types of peers to be represented on the Certified Peer Specialist Advisory Committee.

Specifies that the peer crisis response services training is available to any individual employed as a peer who works with individuals who may be experiencing a behavioral health crisis, not only certified peer specialists. Directs the Authority to give priority for enrollment in the peer crisis response services training to peer specialists employed in a crisis-related setting.

Specifies that the certificates issued by the Secretary of Health are to practice as a certified peer specialist or certified peer specialist trainee, rather than to engage in the practice of peer support services. Clarifies that the certification for peer specialist trainees must be available beginning July 1, 2025 (the same day that it is available to peer specialists).

Specifies that persons seeking certification as a certified peer specialist trainee are exempt from payment of certification,

examination, and renewal fees. Limits certification, examination, and renewal fees for persons applying to become a certified peer specialist to no more than \$100 between July 1, 2025, and July 1, 2030.

Specifies that carriers must provide access to services provided by certified peer specialists and certified peer specialist trainees, rather than access to certified peer specialists and certified peer specialist trainees.

--- END ---