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**HOUSE BILL 2041**

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**State of Washington**

**68th Legislature**

**2024 Regular Session**

**By** Representatives Riccelli, Schmick, Simmons, Reed, Schmidt, Macri, and Lekanoff

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1 AN ACT Relating to physician assistant collaborative practice;  
2 amending RCW 18.71A.020, 18.71A.025, 18.71A.030, 18.71A.050,  
3 18.71A.090, 18.71A.120, 18.71A.150, 51.28.100, 10.77.175, 18.71.030,  
4 7.68.030, 51.04.030, 71.05.215, 71.05.217, 71.05.585, 71.32.110,  
5 71.32.140, 71.32.250, 71.34.020, 71.34.020, 71.34.755, and 74.09.497;  
6 reenacting and amending RCW 18.71A.010, 69.50.101, 71.05.020,  
7 71.05.020, 71.34.750, 71.34.750, and 9.41.010; adding a new section  
8 to chapter 18.71A RCW; adding a new section to chapter 48.43 RCW;  
9 creating a new section; providing effective dates; providing  
10 contingent effective dates; providing an expiration date; and  
11 providing contingent expiration dates.

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

13 NEW SECTION. **Sec. 1.** From March 2020 through October 2022,  
14 physician assistants were permitted under the governor's proclamation  
15 20-32 to work without a delegation agreement signed by a supervising  
16 physician. During the public health emergency, physician assistants  
17 provided safe and efficient care, expanding access to necessary  
18 services and procedures statewide. There continues to be a great need  
19 for additional providers in primary care and specialty areas,  
20 especially in medically underserved and rural communities. Therefore,  
21 the legislature intends to authorize physician assistants to enter

1 into collaborative practice with physicians to provide team-based  
2 care and enhance access to health care for the people of the state.

3 **Sec. 2.** RCW 18.71A.010 and 2020 c 80 s 2 are each reenacted and  
4 amended to read as follows:

5 The definitions (~~(set forth)~~) in this section apply throughout  
6 this chapter unless the context clearly requires otherwise.

7 (1) "Collaboration" means how physician assistants shall interact  
8 with, consult with, or refer to a physician or other appropriate  
9 member or members of the health care team as indicated by the  
10 patient's condition, the education, experience, and competencies of  
11 the physician assistant, and the standard of care. The degree of  
12 collaboration must be determined by the practice, which may include  
13 decisions made by the physician assistant's employer, group, hospital  
14 service, and credentialing and privileging systems of licensed  
15 facilities.

16 (2) "Collaboration agreement" means a written agreement that  
17 describes the manner in which the physician assistant is supervised  
18 by or collaborates with at least one physician and that is signed by  
19 the physician assistant and one or more physicians or the physician  
20 assistant's employer.

21 (3) "Commission" means the Washington medical commission.

22 (~~(+2)~~) (4) "Department" means the department of health.

23 (~~(+3)~~) (5) "Employer" means the scope appropriate clinician,  
24 such as a medical director, who is authorized to enter into the  
25 collaboration agreement with a physician assistant on behalf of the  
26 facility, group, clinic, or other organization that employs the  
27 physician assistant.

28 (6) "Participating physician" means a physician that supervises  
29 or collaborates with a physician assistant pursuant to a  
30 collaboration agreement.

31 (7) "Physician" means a physician licensed under chapter 18.57 or  
32 18.71 RCW.

33 (~~(+4)~~) (8) "Physician assistant" means a person who is licensed  
34 by the commission to practice medicine according to a (~~(practice)~~)  
35 collaboration agreement with one or more participating physicians (~~(7~~  
36 with at least one of the physicians working in a supervisory  
37 capacity,) and who is academically and clinically prepared to  
38 provide health care services and perform diagnostic, therapeutic,  
39 preventative, and health maintenance services.

1       (~~(5)~~) "~~Practice agreement~~" means an agreement entered under RCW  
2 18.71A.120.

3       (~~(6)~~) (9) "Practice medicine" has the meaning defined in RCW  
4 18.71.011 and also includes the practice of osteopathic medicine and  
5 surgery as defined in RCW 18.57.001.

6       (~~(7)~~) (10) "Secretary" means the secretary of health or the  
7 secretary's designee.

8       **Sec. 3.** RCW 18.71A.020 and 2020 c 80 s 3 are each amended to  
9 read as follows:

10       (1) The commission shall adopt rules fixing the qualifications  
11 and the educational and training requirements for licensure as a  
12 physician assistant or for those enrolled in any physician assistant  
13 training program. The requirements shall include completion of an  
14 accredited physician assistant training program approved by the  
15 commission and within one year successfully take and pass an  
16 examination approved by the commission, if the examination tests  
17 subjects substantially equivalent to the curriculum of an accredited  
18 physician assistant training program. An interim permit may be  
19 granted by the department of health for one year provided the  
20 applicant meets all other requirements. Physician assistants licensed  
21 by the board of medical examiners, or the commission as of July 1,  
22 1999, shall continue to be licensed.

23       (2)(a) The commission shall adopt rules governing the extent to  
24 which:

25       (i) Physician assistant students may practice medicine during  
26 training; and

27       (ii) Physician assistants may practice after successful  
28 completion of a physician assistant training course.

29       (b) Such rules shall provide:

30       (i) That the practice of a physician assistant shall be limited  
31 to the performance of those services for which he or she is trained;  
32 and

33       (ii) That each physician assistant shall practice medicine only  
34 under the terms of one or more (~~(practice)~~) collaboration agreements,  
35 each signed by (~~(one or more supervising physicians licensed in this~~  
36 ~~state)~~) the physician assistant and one or more physicians licensed  
37 in this state or the physician assistant's employer. A (~~(practice)~~)  
38 collaboration agreement may be signed electronically using a method  
39 for electronic signatures approved by the commission. (~~(Supervision~~

1 ~~shall not be construed to necessarily require the personal presence~~  
2 ~~of the supervising physician or physicians at the place where~~  
3 ~~services are rendered.)~~)

4 (3) Applicants for licensure shall file an application with the  
5 commission on a form prepared by the secretary with the approval of  
6 the commission, detailing the education, training, and experience of  
7 the physician assistant and such other information as the commission  
8 may require. The application shall be accompanied by a fee determined  
9 by the secretary as provided in RCW 43.70.250 and 43.70.280. A  
10 surcharge of fifty dollars per year shall be charged on each license  
11 renewal or issuance of a new license to be collected by the  
12 department and deposited into the impaired physician account for  
13 physician assistant participation in the (~~impaired~~) physician  
14 health program. Each applicant shall furnish proof satisfactory to  
15 the commission of the following:

16 (a) That the applicant has completed an accredited physician  
17 assistant program approved by the commission and is eligible to take  
18 the examination approved by the commission;

19 (b) That the applicant is of good moral character; and

20 (c) That the applicant is physically and mentally capable of  
21 practicing medicine as a physician assistant with reasonable skill  
22 and safety. The commission may require an applicant to submit to such  
23 examination or examinations as it deems necessary to determine an  
24 applicant's physical or mental capability, or both, to safely  
25 practice as a physician assistant.

26 (4) (a) The commission may approve, deny, or take other  
27 disciplinary action upon the application for license as provided in  
28 the Uniform Disciplinary Act, chapter 18.130 RCW.

29 (b) The license shall be renewed as determined under RCW  
30 43.70.250 and 43.70.280. The commission shall request licensees to  
31 submit information about their current professional practice at the  
32 time of license renewal and licensees must provide the information  
33 requested. This information may include practice setting, medical  
34 specialty, or other relevant data determined by the commission.

35 (5) All funds in the impaired physician account shall be paid to  
36 the contract entity within sixty days of deposit.

37 **Sec. 4.** RCW 18.71A.025 and 2020 c 80 s 4 are each amended to  
38 read as follows:

1 (1) The uniform disciplinary act, chapter 18.130 RCW, governs the  
2 issuance and denial of licenses and the discipline of licensees under  
3 this chapter.

4 (2) The commission shall consult with the board of osteopathic  
5 medicine and surgery when investigating allegations of unprofessional  
6 conduct against a licensee who (~~(has a supervising)~~) is supervised by  
7 or is collaborating with a physician licensed under chapter 18.57  
8 RCW.

9 **Sec. 5.** RCW 18.71A.030 and 2020 c 80 s 5 are each amended to  
10 read as follows:

11 (1) A physician assistant may practice medicine in this state to  
12 the extent permitted by the (~~(practice)~~) collaboration agreement. A  
13 physician assistant shall be subject to discipline under chapter  
14 18.130 RCW.

15 (2)(a) A physician assistant who has completed fewer than 4,000  
16 hours of postgraduate clinical practice must work under the  
17 supervision of a participating physician, as described in the  
18 collaboration agreement and determined at the practice site. A  
19 physician assistant with 4,000 or more hours of postgraduate clinical  
20 practice may work in collaboration with a participating physician, if  
21 the physician assistant has completed 2,000 or more supervised hours  
22 in the physician assistant's chosen specialty.

23 (b) If a physician assistant chooses to change specialties after  
24 the completion of 4,000 hours of postgraduate clinical practice, the  
25 first 2,000 hours of postgraduate clinical practice in the new  
26 specialty must be completed under the supervision of a participating  
27 physician, as described in the collaboration agreement and determined  
28 at the practice site.

29 (c) Supervision shall not be construed to necessarily require the  
30 personal presence of the participating physician or physicians at the  
31 place where services are rendered.

32 (3)(a) Physician assistants may provide services that they are  
33 competent to perform based on their education, training, and  
34 experience and that are consistent with their (~~(practice)~~)  
35 collaboration agreement. The (~~(supervising physician)~~) participating  
36 physician or physicians, or the physician assistant's employer, and  
37 the physician assistant shall determine which procedures may be  
38 performed and the (~~(supervision)~~) degree of autonomy under which the  
39 procedure is performed.

1 (b) Physician assistants may practice in any area of medicine or  
2 surgery as long as the practice is not beyond the ((supervising  
3 physician's own scope of expertise and clinical practice and the  
4 practice agreement.

5 (3) A physician assistant delivering)) scope of expertise and  
6 clinical practice of the participating physician or physicians or the  
7 group of physicians within the department or specialty areas in which  
8 the physician assistant practices.

9 (c) A physician assistant who has at least 10 years or 20,000  
10 hours of postgraduate clinical experience in a specialty may continue  
11 to provide those specialty services if the physician assistant is  
12 employed in a practice setting where those services are outside the  
13 scope of practice of the physician assistant's participating  
14 physician or physicians, as outlined in the collaboration agreement,  
15 if the practice is located in a rural area as identified by the  
16 department under RCW 70.180.011 or in an underserved area as  
17 designated by the health resources and services administration as a  
18 medically underserved area or having a medically underserved  
19 population. The physician assistant must complete continuing  
20 education related to that specialty while performing services outside  
21 the scope of practice of the physician assistant's participating  
22 physician or physicians.

23 (4) A physician assistant working with an anesthesiologist who is  
24 acting as a participating physician as defined in RCW 18.71A.010 to  
25 deliver general anesthesia or intrathecal anesthesia pursuant to a  
26 ((practice)) collaboration agreement ((with a physician)) shall show  
27 evidence of adequate education and training in the delivery of the  
28 type of anesthesia being delivered on ((his or her practice  
29 agreement)) the physician assistant's collaboration agreement as  
30 stipulated by the commission.

31 **Sec. 6.** RCW 18.71A.050 and 2020 c 80 s 7 are each amended to  
32 read as follows:

33 No physician or employer who enters into a ((practice))  
34 collaboration agreement with a licensed physician assistant in  
35 accordance with and within the terms of any permission granted by the  
36 commission is considered as aiding and abetting an unlicensed person  
37 to practice medicine. The ((supervising physician and)) physician  
38 assistant shall ((each)) retain sole professional and personal  
39 responsibility for any act which constitutes the practice of medicine

1 as defined in RCW 18.71.011 or the practice of osteopathic medicine  
2 and surgery as defined in RCW 18.57.001 when performed by the  
3 physician assistant.

4 **Sec. 7.** RCW 18.71A.090 and 2020 c 80 s 8 are each amended to  
5 read as follows:

6 (1) A physician assistant may sign and attest to any  
7 certificates, cards, forms, or other required documentation that the  
8 physician assistant's (~~supervising~~) participating physician or  
9 physician group may sign, provided that it is within the physician  
10 assistant's scope of practice and is consistent with the terms of the  
11 physician assistant's (~~practice~~) collaboration agreement as  
12 required by this chapter.

13 (2) Notwithstanding any federal law, rule, or medical staff bylaw  
14 provision to the contrary, a physician is not required to countersign  
15 orders written in a patient's clinical record or an official form by  
16 a physician assistant with whom the physician has a (~~practice~~)  
17 collaboration agreement.

18 **Sec. 8.** RCW 18.71A.120 and 2020 c 80 s 6 are each amended to  
19 read as follows:

20 (1)(a) Prior to commencing practice, a physician assistant  
21 licensed in Washington state must enter into a (~~practice~~)  
22 collaboration agreement (~~with a physician or group of physicians, at~~  
23 ~~least one of whom must be working in a supervisory capacity.~~

24 ~~(a))~~ that identifies at least one participating physician and  
25 that is signed by one or more participating physicians or the  
26 physician assistant's employer.

27 (b) A collaboration agreement must be signed by a physician if  
28 the physician assistant's employer is not a physician.

29 (c) If a participating physician is not a signatory to the  
30 collaboration agreement, the participating physician must be provided  
31 notice of the agreement and an opportunity to decline participation.

32 Entering into a (~~practice~~) collaboration agreement is voluntary for  
33 the physician assistant and the (~~supervising~~) participating  
34 physician or employer. A physician may not be compelled to  
35 participate in a (~~practice~~) collaboration agreement as a condition  
36 of employment.

1       ~~((b))~~ (d) Prior to entering into the ~~((practice))~~ collaboration  
2 agreement, the participating physician~~((r))~~ or physicians, employer,  
3 or their designee must verify the physician assistant's credentials.

4       ~~((e))~~ (e) The protections of RCW 43.70.075 apply to any  
5 participating physician or employer who reports to the commission  
6 acts of retaliation or reprisal for declining to sign a ~~((practice))~~  
7 collaboration agreement.

8       ~~((d))~~ (f) The ~~((practice))~~ collaboration agreement must be  
9 ~~((maintained by the physician assistant's employer or at his or her~~  
10 ~~place of work and must be))~~ available at the physician assistant's  
11 primary location of practice and made available to the commission  
12 upon request.

13       ~~((e))~~ (g) The commission shall develop a model ~~((practice))~~  
14 collaboration agreement.

15       ~~((f))~~ (h) The commission shall establish administrative  
16 procedures, administrative requirements, and fees as provided in RCW  
17 43.70.250 and 43.70.280.

18       (2) A ~~((practice))~~ collaboration agreement must include all of  
19 the following:

20       (a) The duties and responsibilities of the physician assistant~~((r~~  
21 ~~the supervising physician, and alternate))~~ and the participating  
22 physician or physicians. The ~~((practice))~~ collaboration agreement  
23 must describe the supervision or collaboration requirements for  
24 specified procedures or areas of practice, depending on the number of  
25 postgraduate clinical practice hours completed. The ~~((practice))~~  
26 collaboration agreement may only include acts, tasks, or functions  
27 that the physician assistant ~~((and supervising physician or alternate~~  
28 ~~physicians are))~~ is qualified to perform by education, training, or  
29 experience ~~((and that are)).~~ The acts, tasks, or functions included  
30 in the collaboration agreement must also be within the scope of  
31 expertise and clinical practice of ~~((both the physician assistant and~~  
32 ~~the supervising physician or alternate physicians))~~ either the  
33 participating physician or physicians or the group of physicians  
34 within the department or specialty areas in which the physician  
35 assistant is practicing, unless otherwise authorized by law, rule, or  
36 the commission;

37       (b) A process between the physician assistant and ~~((supervising))~~  
38 participating physician or ~~((alternate))~~ physicians for  
39 communication, availability, and decision making when providing  
40 medical treatment to a patient or in the event of an acute health



1 care crisis not previously covered by the ~~((practice))~~ collaboration  
2 agreement, such as a flu pandemic or other unforeseen emergency.  
3 Communications may occur in person, electronically, by telephone, or  
4 by an alternate method;

5 (c) If there is only one participating physician ~~((party to))~~  
6 identified in the ~~((practice))~~ collaboration agreement, a protocol  
7 for designating ~~((an alternate))~~ another participating physician for  
8 consultation in situations in which the physician is not available;

9 (d) The signature of the physician assistant and the signature or  
10 signatures of the ~~((supervising physician. A practice agreement may~~  
11 ~~be signed electronically using a method for electronic signatures~~  
12 ~~approved by the commission; and~~

13 ~~(e))~~ participating physician or physicians, or employer;

14 (e) If the physician assistant is working under the supervision  
15 of a participating physician, in accordance with RCW 18.71A.030, a  
16 plan for how the physician assistant will be supervised;

17 (f) An attestation by the physician assistant of the number of  
18 postgraduate clinical practice hours completed, including the number  
19 of hours completed in a chosen specialty, at the time the physician  
20 assistant signs the collaboration agreement; and

21 (g) A termination provision. A physician assistant or physician  
22 may terminate the ~~((practice))~~ collaboration agreement as it applies  
23 to a single ~~((supervising))~~ participating physician without  
24 terminating the agreement with respect to the remaining participating  
25 physicians. If the termination results in no ~~((supervising))~~  
26 participating physician being designated on the agreement, a new  
27 ~~((supervising))~~ participating physician must be designated for the  
28 agreement to be valid.

29 (i) Except as provided in ~~((e))~~ (g)(ii) of this subsection, the  
30 physician assistant or ~~((supervising))~~ participating physician must  
31 provide written notice at least thirty days prior to the termination.

32 (ii) The physician assistant or ~~((supervising))~~ participating  
33 physician may terminate the ~~((practice))~~ collaboration agreement  
34 immediately due to good faith concerns regarding unprofessional  
35 conduct or failure to practice medicine while exercising reasonable  
36 skill and safety.

37 (3) ~~((A practice agreement may be amended for any reason, such as~~  
38 ~~to add or remove supervising physicians or alternate physicians or to~~  
39 ~~amend the duties and responsibilities of the physician assistant.~~

1       ~~(4))~~ The physician assistant is responsible for tracking the  
2 number of postgraduate clinical hours completed, including the number  
3 of hours completed in a chosen specialty.

4       (4) A collaboration agreement may be amended for any reason.

5       (5) Whenever a physician assistant is practicing in a manner  
6 inconsistent with the ((practice)) collaboration agreement, the  
7 commission may take disciplinary action under chapter 18.130 RCW.

8       ~~((5))~~ (6) Whenever a physician is subject to disciplinary  
9 action under chapter 18.130 RCW related to the practice of a  
10 physician assistant, the case must be referred to the appropriate  
11 disciplining authority.

12       ~~((6))~~ (7) A physician assistant ((or)), physician, or employer  
13 may participate in more than one ((practice)) collaboration agreement  
14 if ((he or she)) the physician or employer is reasonably able to  
15 fulfill the duties and responsibilities in each agreement.

16       ~~((7) A physician may supervise no more than ten physician~~  
17 ~~assistants. A physician may petition the commission for a waiver of~~  
18 ~~this limit. The commission shall automatically grant a waiver to any~~  
19 ~~physician who possesses, on July 1, 2021, a valid waiver to supervise~~  
20 ~~more than ten physician assistants. A physician granted a waiver~~  
21 ~~under this subsection may not supervise more physician assistants~~  
22 ~~than the physician is able to adequately supervise.~~

23       ~~(8) A physician assistant must file with the commission in a form~~  
24 ~~acceptable to the commission;~~

25       ~~(a) Each practice agreement into which the physician assistant~~  
26 ~~enters under this section;~~

27       ~~(b) Any amendments to the practice agreement; and~~

28       ~~(c) Notice if the practice agreement is terminated))~~ (8) Nothing  
29 in this section shall be construed as prohibiting physician  
30 assistants from owning their own practice or clinic.

31       **Sec. 9.** RCW 18.71A.150 and 2020 c 80 s 11 are each amended to  
32 read as follows:

33       The commission and the board of osteopathic medicine and surgery  
34 shall adopt any rules necessary to implement ~~((chapter 80, Laws of~~  
35 ~~2020))~~ requirements related to collaboration agreements entered into  
36 under this chapter.

37       NEW SECTION. **Sec. 10.** A new section is added to chapter 18.71A  
38 RCW to read as follows:

1 A physician assistant practicing under a practice agreement that  
2 was entered into before July 1, 2025, may continue to practice under  
3 the practice agreement until the physician assistant enters into a  
4 collaboration agreement, as defined in RCW 18.71A.010. A physician  
5 assistant described in this section shall enter into a collaboration  
6 agreement not later than the date on which the physician assistant's  
7 license is due for renewal or July 1, 2025, whichever is later.

8 NEW SECTION. **Sec. 11.** A new section is added to chapter 48.43  
9 RCW to read as follows:

10 This chapter authorizes carriers to reimburse employers of  
11 physician assistants for covered services rendered by licensed  
12 physician assistants. Payment for services within the physician  
13 assistant's scope of practice must be made when ordered or performed  
14 by a physician assistant if the same services would have been covered  
15 if ordered or performed by a physician. Physician assistants or their  
16 employers are authorized to bill for and receive direct payment for  
17 the services delivered by physician assistants.

18 **Sec. 12.** RCW 51.28.100 and 2020 c 80 s 39 are each amended to  
19 read as follows:

20 The department shall accept the signature of a physician  
21 assistant on any certificate, card, form, or other documentation  
22 required by the department that the physician assistant's  
23 (~~supervising~~) participating physician or physicians, as defined in  
24 RCW 18.71A.010, may sign, provided that it is within the physician  
25 assistant's scope of practice, and is consistent with the terms of  
26 the physician assistant's (~~practice~~) collaboration agreement as  
27 required by chapter 18.71A RCW. Consistent with the terms of this  
28 section, the authority of a physician assistant to sign such  
29 certificates, cards, forms, or other documentation includes, but is  
30 not limited to, the execution of the certificate required in RCW  
31 51.28.020. A physician assistant may not rate a worker's permanent  
32 partial disability under RCW 51.32.055.

33 **Sec. 13.** RCW 10.77.175 and 2022 c 210 s 22 are each amended to  
34 read as follows:

35 (1) Conditional release planning should start at admission and  
36 proceed in coordination between the department and the person's  
37 managed care organization, or behavioral health administrative

1 services organization if the person is not eligible for medical  
2 assistance under chapter 74.09 RCW. If needed, the department shall  
3 assist the person to enroll in medical assistance in suspense status  
4 under RCW 74.09.670. The state hospital liaison for the managed care  
5 organization or behavioral health administrative services  
6 organization shall facilitate conditional release planning in  
7 collaboration with the department.

8 (2) Less restrictive alternative treatment pursuant to a  
9 conditional release order, at a minimum, includes the following  
10 services:

11 (a) Assignment of a care coordinator;

12 (b) An intake evaluation with the provider of the conditional  
13 treatment;

14 (c) A psychiatric evaluation or a substance use disorder  
15 evaluation, or both;

16 (d) A schedule of regular contacts with the provider of the less  
17 restrictive alternative treatment services for the duration of the  
18 order;

19 (e) A transition plan addressing access to continued services at  
20 the expiration of the order;

21 (f) An individual crisis plan;

22 (g) Consultation about the formation of a mental health advance  
23 directive under chapter 71.32 RCW;

24 (h) Appointment of a transition team under RCW 10.77.150; and

25 (i) Notification to the care coordinator assigned in (a) of this  
26 subsection and to the transition team as provided in RCW 10.77.150 if  
27 reasonable efforts to engage the client fail to produce substantial  
28 compliance with court-ordered treatment conditions.

29 (3) Less restrictive alternative treatment pursuant to a  
30 conditional release order may additionally include requirements to  
31 participate in the following services:

32 (a) Medication management;

33 (b) Psychotherapy;

34 (c) Nursing;

35 (d) Substance use disorder counseling;

36 (e) Residential treatment;

37 (f) Partial hospitalization;

38 (g) Intensive outpatient treatment;

39 (h) Support for housing, benefits, education, and employment; and

40 (i) Periodic court review.

1 (4) Nothing in this section prohibits items in subsection (2) of  
2 this section from beginning before the conditional release of the  
3 individual.

4 (5) If the person was provided with involuntary medication under  
5 RCW 10.77.094 or pursuant to a judicial order during the involuntary  
6 commitment period, the less restrictive alternative treatment  
7 pursuant to the conditional release order may authorize the less  
8 restrictive alternative treatment provider or its designee to  
9 administer involuntary antipsychotic medication to the person if the  
10 provider has attempted and failed to obtain the informed consent of  
11 the person and there is a concurring medical opinion approving the  
12 medication by a psychiatrist, physician assistant working with a  
13 (~~supervising~~) psychiatrist who is acting as a participating  
14 physician as defined in RCW 18.71A.010, psychiatric advanced  
15 registered nurse practitioner, or physician or physician assistant in  
16 consultation with an independent mental health professional with  
17 prescribing authority.

18 (6) Less restrictive alternative treatment pursuant to a  
19 conditional release order must be administered by a provider that is  
20 certified or licensed to provide or coordinate the full scope of  
21 services required under the less restrictive alternative order and  
22 that has agreed to assume this responsibility.

23 (7) The care coordinator assigned to a person ordered to less  
24 restrictive alternative treatment pursuant to a conditional release  
25 order must submit an individualized plan for the person's treatment  
26 services to the court that entered the order. An initial plan must be  
27 submitted as soon as possible following the intake evaluation and a  
28 revised plan must be submitted upon any subsequent modification in  
29 which a type of service is removed from or added to the treatment  
30 plan.

31 (8) A care coordinator may disclose information and records  
32 related to mental health treatment under RCW 70.02.230(2)(k) for  
33 purposes of implementing less restrictive alternative treatment  
34 pursuant to a conditional release order.

35 (9) For the purpose of this section, "care coordinator" means a  
36 representative from the department of social and health services who  
37 coordinates the activities of less restrictive alternative treatment  
38 pursuant to a conditional release order. The care coordinator  
39 coordinates activities with the person's transition team that are  
40 necessary for enforcement and continuation of the conditional release

1 order and is responsible for coordinating service activities with  
2 other agencies and establishing and maintaining a therapeutic  
3 relationship with the individual on a continuing basis.

4 **Sec. 14.** RCW 18.71.030 and 2021 c 247 s 1 are each amended to  
5 read as follows:

6 Nothing in this chapter shall be construed to apply to or  
7 interfere in any way with the practice of religion or any kind of  
8 treatment by prayer; nor shall anything in this chapter be construed  
9 to prohibit:

10 (1) The furnishing of medical assistance in cases of emergency  
11 requiring immediate attention;

12 (2) The domestic administration of family remedies;

13 (3) The administration of oral medication of any nature to  
14 students by public school district employees or private elementary or  
15 secondary school employees as provided for in chapter 28A.210 RCW;

16 (4) The practice of dentistry, osteopathic medicine and surgery,  
17 nursing, chiropractic, podiatric medicine and surgery, optometry,  
18 naturopathy, or any other healing art licensed under the methods or  
19 means permitted by such license;

20 (5) The practice of medicine in this state by any commissioned  
21 medical officer serving in the armed forces of the United States or  
22 public health service or any medical officer on duty with the United  
23 States veterans administration while such medical officer is engaged  
24 in the performance of the duties prescribed for him or her by the  
25 laws and regulations of the United States;

26 (6) The consultation through telemedicine or other means by a  
27 practitioner, licensed by another state or territory in which he or  
28 she resides, with a practitioner licensed in this state who has  
29 responsibility for the diagnosis and treatment of the patient within  
30 this state;

31 (7) The in-person practice of medicine by any practitioner  
32 licensed by another state or territory in which he or she resides,  
33 provided that such practitioner shall not open an office or appoint a  
34 place of meeting patients or receiving calls within this state;

35 (8) The practice of medicine by a person who is a regular student  
36 in a school of medicine approved and accredited by the commission if:

37 (a) The performance of such services is only pursuant to a  
38 regular course of instruction or assignments from his or her  
39 instructor; or

1 (b) Such services are performed only under the supervision and  
2 control of a person licensed pursuant to this chapter; or

3 (c) (i) Such services are performed without compensation or  
4 expectation of compensation as part of a volunteer activity;

5 (ii) The student is under the direct supervision and control of a  
6 pharmacist licensed under chapter 18.64 RCW, an osteopathic physician  
7 and surgeon licensed under chapter 18.57 RCW, or a registered nurse  
8 or advanced registered nurse practitioner licensed under chapter  
9 18.79 RCW;

10 (iii) The services the student performs are within the scope of  
11 practice of: (A) A physician licensed under this chapter; and (B) the  
12 person supervising the student;

13 (iv) The school in which the student is enrolled verifies the  
14 student has demonstrated competency through his or her education and  
15 training to perform the services; and

16 (v) The student provides proof of current malpractice insurance  
17 to the volunteer activity organizer prior to performing any services;

18 (9) The practice of medicine by a person serving a period of  
19 postgraduate medical training in a program of clinical medical  
20 training sponsored by a college or university in this state or by a  
21 hospital accredited in this state, however, the performance of such  
22 services shall be only pursuant to his or her duties as a trainee;

23 (10) The practice of medicine by a person who is regularly  
24 enrolled in a physician assistant program approved by the commission,  
25 however, the performance of such services shall be only pursuant to a  
26 regular course of instruction in said program and such services are  
27 performed only under the supervision and control of a person licensed  
28 pursuant to this chapter;

29 (11) The practice of medicine by a licensed physician assistant  
30 which practice is performed under the supervision (~~and control~~) of  
31 or in collaboration with a physician licensed pursuant to this  
32 chapter;

33 (12) The practice of medicine, in any part of this state which  
34 shares a common border with Canada and which is surrounded on three  
35 sides by water, by a physician licensed to practice medicine and  
36 surgery in Canada or any province or territory thereof;

37 (13) The administration of nondental anesthesia by a dentist who  
38 has completed a residency in anesthesiology at a school of medicine  
39 approved by the commission, however, a dentist allowed to administer  
40 nondental anesthesia shall do so only under authorization of the

1 patient's attending surgeon, obstetrician, or psychiatrist, and the  
2 commission has jurisdiction to discipline a dentist practicing under  
3 this exemption and enjoin or suspend such dentist from the practice  
4 of nondental anesthesia according to this chapter and chapter 18.130  
5 RCW;

6 (14) Emergency lifesaving service rendered by a physician's  
7 trained advanced emergency medical technician and paramedic, as  
8 defined in RCW 18.71.200, if the emergency lifesaving service is  
9 rendered under the responsible supervision and control of a licensed  
10 physician;

11 (15) The provision of clean, intermittent bladder catheterization  
12 for students by public school district employees or private school  
13 employees as provided for in RCW 18.79.290 and 28A.210.280.

14 **Sec. 15.** RCW 7.68.030 and 2020 c 80 s 12 are each amended to  
15 read as follows:

16 (1) It shall be the duty of the director to establish and  
17 administer a program of benefits to innocent victims of criminal acts  
18 within the terms and limitations of this chapter. The director may  
19 apply for and, subject to appropriation, expend federal funds under  
20 Public Law 98-473 and any other federal program providing financial  
21 assistance to state crime victim compensation programs. The federal  
22 funds shall be deposited in the state general fund and may be  
23 expended only for purposes authorized by applicable federal law.

24 (2) The director shall:

25 (a) Establish and adopt rules governing the administration of  
26 this chapter in accordance with chapter 34.05 RCW;

27 (b) Regulate the proof of accident and extent thereof, the proof  
28 of death, and the proof of relationship and the extent of dependency;

29 (c) Supervise the medical, surgical, and hospital treatment to  
30 the intent that it may be in all cases efficient and up to the  
31 recognized standard of modern surgery;

32 (d) Issue proper receipts for moneys received and certificates  
33 for benefits accrued or accruing;

34 (e) Designate a medical director who is licensed under chapter  
35 18.57 or 18.71 RCW;

36 (f) Supervise the providing of prompt and efficient care and  
37 treatment, including care provided by physician assistants governed  
38 by the provisions of chapter 18.71A RCW, (~~(acting under a supervising~~  
39 ~~physician,~~) including chiropractic care, and including care provided



1 by licensed advanced registered nurse practitioners, to victims at  
2 the least cost consistent with promptness and efficiency, without  
3 discrimination or favoritism, and with as great uniformity as the  
4 various and diverse surrounding circumstances and locations of  
5 industries will permit and to that end shall, from time to time,  
6 establish and adopt and supervise the administration of printed  
7 forms, electronic communications, rules, regulations, and practices  
8 for the furnishing of such care and treatment. The medical coverage  
9 decisions of the department do not constitute a "rule" as used in RCW  
10 34.05.010(16), nor are such decisions subject to the rule-making  
11 provisions of chapter 34.05 RCW except that criteria for establishing  
12 medical coverage decisions shall be adopted by rule. The department  
13 may recommend to a victim particular health care services and  
14 providers where specialized treatment is indicated or where cost-  
15 effective payment levels or rates are obtained by the department, and  
16 the department may enter into contracts for goods and services  
17 including, but not limited to, durable medical equipment so long as  
18 statewide access to quality service is maintained for injured  
19 victims;

20 (g) In consultation with interested persons, establish and, in  
21 his or her discretion, periodically change as may be necessary, and  
22 make available a fee schedule of the maximum charges to be made by  
23 any physician, surgeon, chiropractor, hospital, druggist, licensed  
24 advanced registered nurse practitioner, (~~and~~) physician assistants  
25 as defined in chapter 18.71A RCW, acting under (~~a supervising~~  
26 ~~physician~~) the supervision of or in coordination with a  
27 participating physician, as defined in RCW 18.71A.010, or other  
28 agency or person rendering services to victims. The department shall  
29 coordinate with other state purchasers of health care services to  
30 establish as much consistency and uniformity in billing and coding  
31 practices as possible, taking into account the unique requirements  
32 and differences between programs. No service covered under this  
33 title, including services provided to victims, whether aliens or  
34 other victims, who are not residing in the United States at the time  
35 of receiving the services, shall be charged or paid at a rate or  
36 rates exceeding those specified in such fee schedule, and no contract  
37 providing for greater fees shall be valid as to the excess. The  
38 establishment of such a schedule, exclusive of conversion factors,  
39 does not constitute "agency action" as used in RCW 34.05.010(3), nor  
40 does such a fee schedule constitute a "rule" as used in RCW

1 34.05.010(16). Payments for providers' services under the fee  
2 schedule established pursuant to this subsection (2) may not be less  
3 than payments provided for comparable services under the workers'  
4 compensation program under Title 51 RCW, provided:

5 (i) If the department, using caseload estimates, projects a  
6 deficit in funding for the program by July 15th for the following  
7 fiscal year, the director shall notify the governor and the  
8 appropriate committees of the legislature and request funding  
9 sufficient to continue payments to not less than payments provided  
10 for comparable services under the workers' compensation program. If  
11 sufficient funding is not provided to continue payments to not less  
12 than payments provided for comparable services under the workers'  
13 compensation program, the director shall reduce the payments under  
14 the fee schedule for the following fiscal year based on caseload  
15 estimates and available funding, except payments may not be reduced  
16 to less than seventy percent of payments for comparable services  
17 under the workers' compensation program;

18 (ii) If an unforeseeable catastrophic event results in  
19 insufficient funding to continue payments to not less than payments  
20 provided for comparable services under the workers' compensation  
21 program, the director shall reduce the payments under the fee  
22 schedule to not less than seventy percent of payments provided for  
23 comparable services under the workers' compensation program, provided  
24 that the reduction may not be more than necessary to fund benefits  
25 under the program; and

26 (iii) Once sufficient funding is provided or otherwise available,  
27 the director shall increase the payments under the fee schedule to  
28 not less than payments provided for comparable services under the  
29 workers' compensation program;

30 (h) Make a record of the commencement of every disability and the  
31 termination thereof and, when bills are rendered for the care and  
32 treatment of injured victims, shall approve and pay those which  
33 conform to the adopted rules, regulations, established fee schedules,  
34 and practices of the director and may reject any bill or item thereof  
35 incurred in violation of the principles laid down in this section or  
36 the rules, regulations, or the established fee schedules and rules  
37 and regulations adopted under it.

38 (3) The director and his or her authorized assistants:

39 (a) Have power to issue subpoenas to enforce the attendance and  
40 testimony of witnesses and the production and examination of books,

1 papers, photographs, tapes, and records before the department in  
2 connection with any claim made to the department or any billing  
3 submitted to the department. The superior court has the power to  
4 enforce any such subpoena by proper proceedings;

5 (b) (i) May apply for and obtain a superior court order approving  
6 and authorizing a subpoena in advance of its issuance. The  
7 application may be made in the county where the subpoenaed person  
8 resides or is found, or the county where the subpoenaed records or  
9 documents are located, or in Thurston county. The application must  
10 (A) state that an order is sought pursuant to this subsection; (B)  
11 adequately specify the records, documents, or testimony; and (C)  
12 declare under oath that an investigation is being conducted for a  
13 lawfully authorized purpose related to an investigation within the  
14 department's authority and that the subpoenaed documents or testimony  
15 are reasonably related to an investigation within the department's  
16 authority.

17 (ii) Where the application under this subsection (3) (b) is made  
18 to the satisfaction of the court, the court must issue an order  
19 approving the subpoena. An order under this subsection constitutes  
20 authority of law for the agency to subpoena the records or testimony.

21 (iii) The director and his or her authorized assistants may seek  
22 approval and a court may issue an order under this subsection without  
23 prior notice to any person, including the person to whom the subpoena  
24 is directed and the person who is the subject of an investigation.

25 (4) In all hearings, actions, or proceedings before the  
26 department, any physician or licensed advanced registered nurse  
27 practitioner having theretofore examined or treated the claimant may  
28 be required to testify fully regarding such examination or treatment,  
29 and shall not be exempt from so testifying by reason of the relation  
30 of the physician or licensed advanced registered nurse practitioner  
31 to the patient.

32 **Sec. 16.** RCW 51.04.030 and 2020 c 80 s 38 are each amended to  
33 read as follows:

34 (1) The director shall supervise the providing of prompt and  
35 efficient care and treatment, including care provided by physician  
36 assistants governed by the provisions of chapter 18.71A RCW, (~~acting~~  
37 ~~under a supervising physician,~~) including chiropractic care, and  
38 including care provided by licensed advanced registered nurse  
39 practitioners, to workers injured during the course of their

1 employment at the least cost consistent with promptness and  
2 efficiency, without discrimination or favoritism, and with as great  
3 uniformity as the various and diverse surrounding circumstances and  
4 locations of industries will permit and to that end shall, from time  
5 to time, establish and adopt and supervise the administration of  
6 printed forms, rules, regulations, and practices for the furnishing  
7 of such care and treatment: PROVIDED, That the medical coverage  
8 decisions of the department do not constitute a "rule" as used in RCW  
9 34.05.010(16), nor are such decisions subject to the rule-making  
10 provisions of chapter 34.05 RCW except that criteria for establishing  
11 medical coverage decisions shall be adopted by rule after  
12 consultation with the workers' compensation advisory committee  
13 established in RCW 51.04.110: PROVIDED FURTHER, That the department  
14 may recommend to an injured worker particular health care services  
15 and providers where specialized treatment is indicated or where cost-  
16 effective payment levels or rates are obtained by the department: AND  
17 PROVIDED FURTHER, That the department may enter into contracts for  
18 goods and services including, but not limited to, durable medical  
19 equipment so long as statewide access to quality service is  
20 maintained for injured workers.

21 (2) The director shall, in consultation with interested persons,  
22 establish and, in his or her discretion, periodically change as may  
23 be necessary, and make available a fee schedule of the maximum  
24 charges to be made by any physician, surgeon, chiropractor, hospital,  
25 druggist, licensed advanced registered nurse practitioner,  
26 physician(~~s~~) assistants as defined in chapter 18.71A RCW, acting  
27 under (~~a supervising physician~~) the supervision of or in  
28 coordination with a participating physician, as defined in RCW  
29 18.71A.010, or other agency or person rendering services to injured  
30 workers. The department shall coordinate with other state purchasers  
31 of health care services to establish as much consistency and  
32 uniformity in billing and coding practices as possible, taking into  
33 account the unique requirements and differences between programs. No  
34 service covered under this title, including services provided to  
35 injured workers, whether aliens or other injured workers, who are not  
36 residing in the United States at the time of receiving the services,  
37 shall be charged or paid at a rate or rates exceeding those specified  
38 in such fee schedule, and no contract providing for greater fees  
39 shall be valid as to the excess. The establishment of such a  
40 schedule, exclusive of conversion factors, does not constitute

1 "agency action" as used in RCW 34.05.010(3), nor does such a fee  
2 schedule and its associated billing or payment instructions and  
3 policies constitute a "rule" as used in RCW 34.05.010(16).

4 (3) The director or self-insurer, as the case may be, shall make  
5 a record of the commencement of every disability and the termination  
6 thereof and, when bills are rendered for the care and treatment of  
7 injured workers, shall approve and pay those which conform to the  
8 adopted rules, regulations, established fee schedules, and practices  
9 of the director and may reject any bill or item thereof incurred in  
10 violation of the principles laid down in this section or the rules,  
11 regulations, or the established fee schedules and rules and  
12 regulations adopted under it.

13 **Sec. 17.** RCW 69.50.101 and 2023 c 365 s 2 and 2023 c 220 s 6 are  
14 each reenacted and amended to read as follows:

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

17 ~~((a) — [(1)]))~~ (1) "Administer" means to apply a controlled  
18 substance, whether by injection, inhalation, ingestion, or any other  
19 means, directly to the body of a patient or research subject by:

20 ~~((1) — [(a)]))~~ (a) a practitioner authorized to prescribe (or, by  
21 the practitioner's authorized agent); or

22 ~~((2) — [(b)]))~~ (b) the patient or research subject at the  
23 direction and in the presence of the practitioner.

24 ~~((b) — [(2)]))~~ (2) "Agent" means an authorized person who acts on  
25 behalf of or at the direction of a manufacturer, distributor, or  
26 dispenser. It does not include a common or contract carrier, public  
27 warehouseperson, or employee of the carrier or warehouseperson.

28 ~~((c) — [(3)]))~~ (3) "Board" means the Washington state liquor and  
29 cannabis board.

30 ~~((d) — [(4)]))~~ (4) "Cannabis" means all parts of the plant  
31 *Cannabis*, whether growing or not, with a THC concentration greater  
32 than 0.3 percent on a dry weight basis during the growing cycle  
33 through harvest and usable cannabis. "Cannabis" does not include hemp  
34 or industrial hemp as defined in RCW 15.140.020, or seeds used for  
35 licensed hemp production under chapter 15.140 RCW.

36 ~~((e) — [(5)]))~~ (5) "Cannabis concentrates" means products  
37 consisting wholly or in part of the resin extracted from any part of  
38 the plant *Cannabis* and having a THC concentration greater than ten  
39 percent.

1       (~~(f)~~—~~(6)~~) (6) "Cannabis processor" means a person licensed by  
2 the board to process cannabis into cannabis concentrates, useable  
3 cannabis, and cannabis-infused products, package and label cannabis  
4 concentrates, useable cannabis, and cannabis-infused products for  
5 sale in retail outlets, and sell cannabis concentrates, useable  
6 cannabis, and cannabis-infused products at wholesale to cannabis  
7 retailers.

8       (~~(g)~~—~~(7)~~) (7) "Cannabis producer" means a person licensed by  
9 the board to produce and sell cannabis at wholesale to cannabis  
10 processors and other cannabis producers.

11       (~~(h)(1)~~—~~(8)(a)~~) (8)(a) "Cannabis products" means useable  
12 cannabis, cannabis concentrates, and cannabis-infused products as  
13 defined in this section, including any product intended to be  
14 consumed or absorbed inside the body by any means including  
15 inhalation, ingestion, or insertion, with any detectable amount of  
16 THC.

17       (~~(2)~~—~~(b)~~) (b) "Cannabis products" also means any product  
18 containing only THC content.

19       (~~(3)~~—~~(e)~~) (c) "Cannabis products" does not include cannabis  
20 health and beauty aids as defined in RCW 69.50.575 or products  
21 approved by the United States food and drug administration.

22       (~~(i)~~—~~(9)~~) (9) "Cannabis researcher" means a person licensed  
23 by the board to produce, process, and possess cannabis for the  
24 purposes of conducting research on cannabis and cannabis-derived drug  
25 products.

26       (~~(j)~~—~~(10)~~) (10) "Cannabis retailer" means a person licensed  
27 by the board to sell cannabis concentrates, useable cannabis, and  
28 cannabis-infused products in a retail outlet.

29       (~~(k)~~—~~(11)~~) (11) "Cannabis-infused products" means products  
30 that contain cannabis or cannabis extracts, are intended for human  
31 use, are derived from cannabis as defined in subsection (~~(d)~~—~~(4)~~)  
32 (4) of this section, and have a THC concentration no greater than ten  
33 percent. The term "cannabis-infused products" does not include either  
34 useable cannabis or cannabis concentrates.

35       (~~(l)~~—~~(12)~~) (12) "CBD concentration" has the meaning provided  
36 in RCW 69.51A.010.

37       (~~(m)~~—~~(13)~~) (13) "CBD product" means any product containing or  
38 consisting of cannabidiol.

39       (~~(n)~~—~~(14)~~) (14) "Commission" means the pharmacy quality  
40 assurance commission.

1       (~~(e)~~—~~[(15)]~~) (15) "Controlled substance" means a drug,  
2 substance, or immediate precursor included in Schedules I through V  
3 as set forth in federal or state laws, or federal or commission  
4 rules, but does not include hemp or industrial hemp as defined in RCW  
5 15.140.020.

6       (~~(p)~~—~~[(16)(a)]~~) (16)(a) "Controlled substance analog" means  
7 a substance the chemical structure of which is substantially similar  
8 to the chemical structure of a controlled substance in Schedule I or  
9 II and:

10       (i) that has a stimulant, depressant, or hallucinogenic effect on  
11 the central nervous system substantially similar to the stimulant,  
12 depressant, or hallucinogenic effect on the central nervous system of  
13 a controlled substance included in Schedule I or II; or

14       (ii) with respect to a particular individual, that the individual  
15 represents or intends to have a stimulant, depressant, or  
16 hallucinogenic effect on the central nervous system substantially  
17 similar to the stimulant, depressant, or hallucinogenic effect on the  
18 central nervous system of a controlled substance included in Schedule  
19 I or II.

20       (~~(2)~~—~~[(b)]~~) (b) The term does not include:

21       (i) a controlled substance;

22       (ii) a substance for which there is an approved new drug  
23 application;

24       (iii) a substance with respect to which an exemption is in effect  
25 for investigational use by a particular person under Section 505 of  
26 the federal food, drug, and cosmetic act, 21 U.S.C. Sec. 355, or  
27 chapter 69.77 RCW to the extent conduct with respect to the substance  
28 is pursuant to the exemption; or

29       (iv) any substance to the extent not intended for human  
30 consumption before an exemption takes effect with respect to the  
31 substance.

32       (~~(g)~~—~~[(17)]~~) (17) "Deliver" or "delivery" means the actual or  
33 constructive transfer from one person to another of a substance,  
34 whether or not there is an agency relationship.

35       (~~(r)~~—~~[(18)]~~) (18) "Department" means the department of health.

36       (~~(s)~~—~~[(19)]~~) (19) "Designated provider" has the meaning  
37 provided in RCW 69.51A.010.

38       (~~(t)~~—~~[(20)]~~) (20) "Dispense" means the interpretation of a  
39 prescription or order for a controlled substance and, pursuant to  
40 that prescription or order, the proper selection, measuring,

1 compounding, labeling, or packaging necessary to prepare that  
2 prescription or order for delivery.

3 ~~((u) [(21)])~~ (21) "Dispenser" means a practitioner who  
4 dispenses.

5 ~~((v) [(22)])~~ (22) "Distribute" means to deliver other than by  
6 administering or dispensing a controlled substance.

7 ~~((w) [(23)])~~ (23) "Distributor" means a person who distributes.

8 ~~((x) [(24)])~~ (24) "Drug" means ~~((1) [(a)])~~ (a) a controlled  
9 substance recognized as a drug in the official United States  
10 pharmacopoeia/national formulary or the official homeopathic  
11 pharmacopoeia of the United States, or any supplement to them; ~~((2)~~  
12 ~~[(b)])~~ (b) controlled substances intended for use in the diagnosis,  
13 cure, mitigation, treatment, or prevention of disease in individuals  
14 or animals; ~~((3) [(c)])~~ (c) controlled substances (other than food)  
15 intended to affect the structure or any function of the body of  
16 individuals or animals; and ~~((4) [(d)])~~ (d) controlled substances  
17 intended for use as a component of any article specified in ~~((1),~~  
18 ~~(2), or (3) [(a), (b), or (c)])~~ (a), (b), or (c) of this subsection.  
19 The term does not include devices or their components, parts, or  
20 accessories.

21 ~~((y) [(25)])~~ (25) "Drug enforcement administration" means the  
22 drug enforcement administration in the United States Department of  
23 Justice, or its successor agency.

24 ~~((z) [(26)])~~ (26) "Electronic communication of prescription  
25 information" means the transmission of a prescription or refill  
26 authorization for a drug of a practitioner using computer systems.  
27 The term does not include a prescription or refill authorization  
28 verbally transmitted by telephone nor a facsimile manually signed by  
29 the practitioner.

30 ~~((aa) [(27)])~~ (27) "Immature plant or clone" means a plant or  
31 clone that has no flowers, is less than twelve inches in height, and  
32 is less than twelve inches in diameter.

33 ~~((bb) [(28)])~~ (28) "Immediate precursor" means a substance:

34 ~~((1) [(a)])~~ (a) that the commission has found to be and by rule  
35 designates as being the principal compound commonly used, or produced  
36 primarily for use, in the manufacture of a controlled substance;

37 ~~((2) [(b)])~~ (b) that is an immediate chemical intermediary used  
38 or likely to be used in the manufacture of a controlled substance;  
39 and



1       (~~(3)~~~~[(e)]~~) (c) the control of which is necessary to prevent,  
2 curtail, or limit the manufacture of the controlled substance.

3       (~~(ee)~~~~[(29)]~~) (29) "Isomer" means an optical isomer, but in  
4 subsection (~~(gg)~~~~(5)~~~~[(33)(e)]~~) (33)(e) of this section, RCW  
5 69.50.204(~~(a)~~~~(12)~~ and ~~(34)~~~~[(1)(1) and (hh)]~~) (1)(1) and (hh),  
6 and 69.50.206(~~(b)~~~~(4)~~~~[(2)(d)]~~) (2)(d), the term includes any  
7 geometrical isomer; in RCW 69.50.204(~~(a)~~~~(8)~~ and ~~(42)~~~~[(1)(h) and~~  
8 ~~(pp)]~~) (1)(h) and (pp), and 69.50.210(~~(e)~~~~[(3)]~~) (3) the term  
9 includes any positional isomer; and in RCW 69.50.204(~~(a)~~~~(35)~~  
10 ~~[(1)(ii)]~~) (1)(ii), 69.50.204(~~(e)~~~~[(3)]~~) (3), and 69.50.208(~~(a)~~  
11 ~~[(1)]~~) (1) the term includes any positional or geometric isomer.

12       (~~(dd)~~~~[(30)]~~) (30) "Lot" means a definite quantity of cannabis,  
13 cannabis concentrates, useable cannabis, or cannabis-infused product  
14 identified by a lot number, every portion or package of which is  
15 uniform within recognized tolerances for the factors that appear in  
16 the labeling.

17       (~~(ee)~~~~[(31)]~~) (31) "Lot number" must identify the licensee by  
18 business or trade name and Washington state unified business  
19 identifier number, and the date of harvest or processing for each lot  
20 of cannabis, cannabis concentrates, useable cannabis, or cannabis-  
21 infused product.

22       (~~(ff)~~~~[(32)]~~) (32) "Manufacture" means the production,  
23 preparation, propagation, compounding, conversion, or processing of a  
24 controlled substance, either directly or indirectly or by extraction  
25 from substances of natural origin, or independently by means of  
26 chemical synthesis, or by a combination of extraction and chemical  
27 synthesis, and includes any packaging or repackaging of the substance  
28 or labeling or relabeling of its container. The term does not include  
29 the preparation, compounding, packaging, repackaging, labeling, or  
30 relabeling of a controlled substance:

31       (~~(1)~~~~[(a)]~~) (a) by a practitioner as an incident to the  
32 practitioner's administering or dispensing of a controlled substance  
33 in the course of the practitioner's professional practice; or

34       (~~(2)~~~~[(b)]~~) (b) by a practitioner, or by the practitioner's  
35 authorized agent under the practitioner's supervision, for the  
36 purpose of, or as an incident to, research, teaching, or chemical  
37 analysis and not for sale.

38       (~~(gg)~~~~[(33)]~~) (33) "Narcotic drug" means any of the following,  
39 whether produced directly or indirectly by extraction from substances

1 of vegetable origin, or independently by means of chemical synthesis,  
2 or by a combination of extraction and chemical synthesis:

3 ~~((1) [(a)])~~ (a) Opium, opium derivative, and any derivative of  
4 opium or opium derivative, including their salts, isomers, and salts  
5 of isomers, whenever the existence of the salts, isomers, and salts  
6 of isomers is possible within the specific chemical designation. The  
7 term does not include the isoquinoline alkaloids of opium.

8 ~~((2) [(b)])~~ (b) Synthetic opiate and any derivative of  
9 synthetic opiate, including their isomers, esters, ethers, salts, and  
10 salts of isomers, esters, and ethers, whenever the existence of the  
11 isomers, esters, ethers, and salts is possible within the specific  
12 chemical designation.

13 ~~((3) [(c)])~~ (c) Poppy straw and concentrate of poppy straw.

14 ~~((4) [(d)])~~ (d) Coca leaves, except coca leaves and extracts of  
15 coca leaves from which cocaine, ecgonine, and derivatives or ecgonine  
16 or their salts have been removed.

17 ~~((5) [(e)])~~ (e) Cocaine, or any salt, isomer, or salt of isomer  
18 thereof.

19 ~~((6) [(f)])~~ (f) Cocaine base.

20 ~~((7) [(g)])~~ (g) Ecgonine, or any derivative, salt, isomer, or  
21 salt of isomer thereof.

22 ~~((8) [(h)])~~ (h) Any compound, mixture, or preparation  
23 containing any quantity of any substance referred to in ~~((1) [(a)])~~  
24 (a) through ~~((7) [(g)])~~ (g) of this subsection.

25 ~~((hh) [(34)])~~ (34) "Opiate" means any substance having an  
26 addiction-forming or addiction-sustaining liability similar to  
27 morphine or being capable of conversion into a drug having addiction-  
28 forming or addiction-sustaining liability. The term includes opium,  
29 substances derived from opium (opium derivatives), and synthetic  
30 opiates. The term does not include, unless specifically designated as  
31 controlled under RCW 69.50.201, the dextrorotatory isomer of 3-  
32 methoxy-n-methylmorphinan and its salts (dextromethorphan). The term  
33 includes the racemic and levorotatory forms of dextromethorphan.

34 ~~((ii) [(35)])~~ (35) "Opium poppy" means the plant of the species  
35 *Papaver somniferum* L., except its seeds.

36 ~~((jj) [(36)])~~ (36) "Package" means a container that has a  
37 single unit or group of units.

38 ~~((kk) [(37)])~~ (37) "Person" means individual, corporation,  
39 business trust, estate, trust, partnership, association, joint

1 venture, government, governmental subdivision or agency, or any other  
2 legal or commercial entity.

3 ~~((11) [(38)])~~ (38) "Plant" has the meaning provided in RCW  
4 69.51A.010.

5 ~~((mm) [(39)])~~ (39) "Poppy straw" means all parts, except the  
6 seeds, of the opium poppy, after mowing.

7 ~~((nn) [(40)])~~ (40) "Practitioner" means:

8 ~~((1) [(a)])~~ (a) A physician under chapter 18.71 RCW; a physician  
9 assistant under chapter 18.71A RCW; an osteopathic physician and  
10 surgeon under chapter 18.57 RCW; an optometrist licensed under  
11 chapter 18.53 RCW who is certified by the optometry board under RCW  
12 18.53.010 subject to any limitations in RCW 18.53.010; a dentist  
13 under chapter 18.32 RCW; a podiatric physician and surgeon under  
14 chapter 18.22 RCW; a veterinarian under chapter 18.92 RCW; a  
15 registered nurse, advanced registered nurse practitioner, or licensed  
16 practical nurse under chapter 18.79 RCW; a naturopathic physician  
17 under chapter 18.36A RCW who is licensed under RCW 18.36A.030 subject  
18 to any limitations in RCW 18.36A.040; a pharmacist under chapter  
19 18.64 RCW or a scientific investigator under this chapter, licensed,  
20 registered or otherwise permitted insofar as is consistent with those  
21 licensing laws to distribute, dispense, conduct research with respect  
22 to or administer a controlled substance in the course of their  
23 professional practice or research in this state.

24 ~~((2) [(b)])~~ (b) A pharmacy, hospital or other institution  
25 licensed, registered, or otherwise permitted to distribute, dispense,  
26 conduct research with respect to or to administer a controlled  
27 substance in the course of professional practice or research in this  
28 state.

29 ~~((3) [(e)])~~ (c) A physician licensed to practice medicine and  
30 surgery, a physician licensed to practice osteopathic medicine and  
31 surgery, a dentist licensed to practice dentistry, a podiatric  
32 physician and surgeon licensed to practice podiatric medicine and  
33 surgery, a licensed physician assistant or a licensed osteopathic  
34 physician assistant specifically approved to prescribe controlled  
35 substances by his or her state's medical commission or equivalent and  
36 his or her ~~(supervising)~~ participating physician as defined in RCW  
37 18.71A.010, an advanced registered nurse practitioner licensed to  
38 prescribe controlled substances, or a veterinarian licensed to  
39 practice veterinary medicine in any state of the United States.

1       (~~(40)~~—[(41)]) (41) "Prescription" means an order for controlled  
2 substances issued by a practitioner duly authorized by law or rule in  
3 the state of Washington to prescribe controlled substances within the  
4 scope of his or her professional practice for a legitimate medical  
5 purpose.

6       (~~(41)~~—[(42)]) (42) "Production" includes the manufacturing,  
7 planting, cultivating, growing, or harvesting of a controlled  
8 substance.

9       (~~(42)~~—[(43)]) (43) "Qualifying patient" has the meaning  
10 provided in RCW 69.51A.010.

11       (~~(43)~~—[(44)]) (44) "Recognition card" has the meaning provided  
12 in RCW 69.51A.010.

13       (~~(44)~~—[(45)]) (45) "Retail outlet" means a location licensed by  
14 the board for the retail sale of cannabis concentrates, useable  
15 cannabis, and cannabis-infused products.

16       (~~(45)~~—[(46)]) (46) "Secretary" means the secretary of health or  
17 the secretary's designee.

18       (~~(46)~~—[(47)]) (47) "Social equity plan" means a plan that  
19 addresses at least some of the elements outlined in this subsection  
20 (~~(47)~~—[(47)]) (47), along with any additional plan components or  
21 requirements approved by the board following consultation with the  
22 task force created in RCW 69.50.336. The plan may include:

23       (~~(1)~~—[(a)]) (a) A statement that indicates how the cannabis  
24 licensee will work to promote social equity goals in their community;

25       (~~(2)~~—[(b)]) (b) A description of how the cannabis licensee will  
26 meet social equity goals as defined in RCW 69.50.335;

27       (~~(3)~~—[(c)]) (c) The composition of the workforce the licensee  
28 has employed or intends to hire; and

29       (~~(4)~~—[(d)]) (d) Business plans involving partnerships or  
30 assistance to organizations or residents with connections to  
31 populations with a history of high rates of enforcement of cannabis  
32 prohibition.

33       (~~(47)~~—[(48)]) (48) "State," unless the context otherwise  
34 requires, means a state of the United States, the District of  
35 Columbia, the Commonwealth of Puerto Rico, or a territory or insular  
36 possession subject to the jurisdiction of the United States.

37       (~~(48)~~—[(49)]) (49) "THC concentration" means percent of  
38 tetrahydrocannabinol content of any part of the plant *Cannabis*, or  
39 per volume or weight of cannabis product, or the combined percent of

1 tetrahydrocannabinol and tetrahydrocannabinolic acid in any part of  
2 the plant *Cannabis* regardless of moisture content.

3 ~~((xx) [(50)])~~ (50) "Ultimate user" means an individual who  
4 lawfully possesses a controlled substance for the individual's own  
5 use or for the use of a member of the individual's household or for  
6 administering to an animal owned by the individual or by a member of  
7 the individual's household.

8 ~~((yy) [(51)])~~ (51) "Unit" means an individual consumable item  
9 within a package of one or more consumable items in solid, liquid,  
10 gas, or any form intended for human consumption.

11 ~~((zz) [(52)])~~ (52) "Useable cannabis" means dried cannabis  
12 flowers. The term "useable cannabis" does not include either  
13 cannabis-infused products or cannabis concentrates.

14 ~~((aaa) [(53)])~~ (53) "Youth access" means the level of interest  
15 persons under the age of twenty-one may have in a vapor product, as  
16 well as the degree to which the product is available or appealing to  
17 such persons, and the likelihood of initiation, use, or addiction by  
18 adolescents and young adults.

19 **Sec. 18.** RCW 71.05.020 and 2023 c 433 s 3 and 2023 c 425 s 20  
20 are each reenacted and amended to read as follows:

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

23 (1) "23-hour crisis relief center" has the same meaning as under  
24 RCW 71.24.025;

25 (2) "Admission" or "admit" means a decision by a physician,  
26 physician assistant, or psychiatric advanced registered nurse  
27 practitioner that a person should be examined or treated as a patient  
28 in a hospital;

29 (3) "Alcoholism" means a disease, characterized by a dependency  
30 on alcoholic beverages, loss of control over the amount and  
31 circumstances of use, symptoms of tolerance, physiological or  
32 psychological withdrawal, or both, if use is reduced or discontinued,  
33 and impairment of health or disruption of social or economic  
34 functioning;

35 (4) "Antipsychotic medications" means that class of drugs  
36 primarily used to treat serious manifestations of mental illness  
37 associated with thought disorders, which includes, but is not limited  
38 to atypical antipsychotic medications;

1 (5) "Approved substance use disorder treatment program" means a  
2 program for persons with a substance use disorder provided by a  
3 treatment program certified by the department as meeting standards  
4 adopted under chapter 71.24 RCW;

5 (6) "Attending staff" means any person on the staff of a public  
6 or private agency having responsibility for the care and treatment of  
7 a patient;

8 (7) "Authority" means the Washington state health care authority;

9 (8) "Behavioral health disorder" means either a mental disorder  
10 as defined in this section, a substance use disorder as defined in  
11 this section, or a co-occurring mental disorder and substance use  
12 disorder;

13 (9) "Behavioral health service provider" means a public or  
14 private agency that provides mental health, substance use disorder,  
15 or co-occurring disorder services to persons with behavioral health  
16 disorders as defined under this section and receives funding from  
17 public sources. This includes, but is not limited to: Hospitals  
18 licensed under chapter 70.41 RCW; evaluation and treatment facilities  
19 as defined in this section; community mental health service delivery  
20 systems or community behavioral health programs as defined in RCW  
21 71.24.025; licensed or certified behavioral health agencies under RCW  
22 71.24.037; facilities conducting competency evaluations and  
23 restoration under chapter 10.77 RCW; approved substance use disorder  
24 treatment programs as defined in this section; secure withdrawal  
25 management and stabilization facilities as defined in this section;  
26 and correctional facilities operated by state and local governments;

27 (10) "Co-occurring disorder specialist" means an individual  
28 possessing an enhancement granted by the department of health under  
29 chapter 18.205 RCW that certifies the individual to provide substance  
30 use disorder counseling subject to the practice limitations under RCW  
31 18.205.105;

32 (11) "Commitment" means the determination by a court that a  
33 person should be detained for a period of either evaluation or  
34 treatment, or both, in an inpatient or a less restrictive setting;

35 (12) "Community behavioral health agency" has the same meaning as  
36 "licensed or certified behavioral health agency" defined in RCW  
37 71.24.025;

38 (13) "Conditional release" means a revocable modification of a  
39 commitment, which may be revoked upon violation of any of its terms;

1 (14) "Crisis stabilization unit" means a short-term facility or a  
2 portion of a facility licensed or certified by the department, such  
3 as an evaluation and treatment facility or a hospital, which has been  
4 designed to assess, diagnose, and treat individuals experiencing an  
5 acute crisis without the use of long-term hospitalization, or to  
6 determine the need for involuntary commitment of an individual;

7 (15) "Custody" means involuntary detention under the provisions  
8 of this chapter or chapter 10.77 RCW, uninterrupted by any period of  
9 unconditional release from commitment from a facility providing  
10 involuntary care and treatment;

11 (16) "Department" means the department of health;

12 (17) "Designated crisis responder" means a mental health  
13 professional appointed by the county, by an entity appointed by the  
14 county, or by the authority in consultation with a federally  
15 recognized Indian tribe or after meeting and conferring with an  
16 Indian health care provider, to perform the duties specified in this  
17 chapter;

18 (18) "Detention" or "detain" means the lawful confinement of a  
19 person, under the provisions of this chapter;

20 (19) "Developmental disabilities professional" means a person who  
21 has specialized training and three years of experience in directly  
22 treating or working with persons with developmental disabilities and  
23 is a psychiatrist, physician assistant working with a (~~supervising~~)  
24 psychiatrist who is acting as a participating physician as defined in  
25 RCW 18.71A.010, psychologist, psychiatric advanced registered nurse  
26 practitioner, or social worker, and such other developmental  
27 disabilities professionals as may be defined by rules adopted by the  
28 secretary of the department of social and health services;

29 (20) "Developmental disability" means that condition defined in  
30 RCW 71A.10.020(6);

31 (21) "Director" means the director of the authority;

32 (22) "Discharge" means the termination of hospital medical  
33 authority. The commitment may remain in place, be terminated, or be  
34 amended by court order;

35 (23) "Drug addiction" means a disease, characterized by a  
36 dependency on psychoactive chemicals, loss of control over the amount  
37 and circumstances of use, symptoms of tolerance, physiological or  
38 psychological withdrawal, or both, if use is reduced or discontinued,  
39 and impairment of health or disruption of social or economic  
40 functioning;

1           (24) "Evaluation and treatment facility" means any facility which  
2 can provide directly, or by direct arrangement with other public or  
3 private agencies, emergency evaluation and treatment, outpatient  
4 care, and timely and appropriate inpatient care to persons suffering  
5 from a mental disorder, and which is licensed or certified as such by  
6 the department. The authority may certify single beds as temporary  
7 evaluation and treatment beds under RCW 71.05.745. A physically  
8 separate and separately operated portion of a state hospital may be  
9 designated as an evaluation and treatment facility. A facility which  
10 is part of, or operated by, the department of social and health  
11 services or any federal agency will not require certification. No  
12 correctional institution or facility, or jail, shall be an evaluation  
13 and treatment facility within the meaning of this chapter;

14           (25) "Gravely disabled" means a condition in which a person, as a  
15 result of a behavioral health disorder: (a) Is in danger of serious  
16 physical harm resulting from a failure to provide for his or her  
17 essential human needs of health or safety; or (b) manifests severe  
18 deterioration in routine functioning evidenced by repeated and  
19 escalating loss of cognitive or volitional control over his or her  
20 actions and is not receiving such care as is essential for his or her  
21 health or safety;

22           (26) "Habilitative services" means those services provided by  
23 program personnel to assist persons in acquiring and maintaining life  
24 skills and in raising their levels of physical, mental, social, and  
25 vocational functioning. Habilitative services include education,  
26 training for employment, and therapy. The habilitative process shall  
27 be undertaken with recognition of the risk to the public safety  
28 presented by the person being assisted as manifested by prior charged  
29 criminal conduct;

30           (27) "Hearing" means any proceeding conducted in open court that  
31 conforms to the requirements of RCW 71.05.820;

32           (28) "History of one or more violent acts" refers to the period  
33 of time ten years prior to the filing of a petition under this  
34 chapter, excluding any time spent, but not any violent acts  
35 committed, in a behavioral health facility, or in confinement as a  
36 result of a criminal conviction;

37           (29) "Imminent" means the state or condition of being likely to  
38 occur at any moment or near at hand, rather than distant or remote;



1 (30) "In need of assisted outpatient treatment" refers to a  
2 person who meets the criteria for assisted outpatient treatment  
3 established under RCW 71.05.148;

4 (31) "Individualized service plan" means a plan prepared by a  
5 developmental disabilities professional with other professionals as a  
6 team, for a person with developmental disabilities, which shall  
7 state:

8 (a) The nature of the person's specific problems, prior charged  
9 criminal behavior, and habilitation needs;

10 (b) The conditions and strategies necessary to achieve the  
11 purposes of habilitation;

12 (c) The intermediate and long-range goals of the habilitation  
13 program, with a projected timetable for the attainment;

14 (d) The rationale for using this plan of habilitation to achieve  
15 those intermediate and long-range goals;

16 (e) The staff responsible for carrying out the plan;

17 (f) Where relevant in light of past criminal behavior and due  
18 consideration for public safety, the criteria for proposed movement  
19 to less-restrictive settings, criteria for proposed eventual  
20 discharge or release, and a projected possible date for discharge or  
21 release; and

22 (g) The type of residence immediately anticipated for the person  
23 and possible future types of residences;

24 (32) "Intoxicated person" means a person whose mental or physical  
25 functioning is substantially impaired as a result of the use of  
26 alcohol or other psychoactive chemicals;

27 (33) "Judicial commitment" means a commitment by a court pursuant  
28 to the provisions of this chapter;

29 (34) "Legal counsel" means attorneys and staff employed by county  
30 prosecutor offices or the state attorney general acting in their  
31 capacity as legal representatives of public behavioral health service  
32 providers under RCW 71.05.130;

33 (35) "Less restrictive alternative treatment" means a program of  
34 individualized treatment in a less restrictive setting than inpatient  
35 treatment that includes the services described in RCW 71.05.585. This  
36 term includes: Treatment pursuant to a less restrictive alternative  
37 treatment order under RCW 71.05.240 or 71.05.320; treatment pursuant  
38 to a conditional release under RCW 71.05.340; and treatment pursuant  
39 to an assisted outpatient treatment order under RCW 71.05.148;

1 (36) "Licensed physician" means a person licensed to practice  
2 medicine or osteopathic medicine and surgery in the state of  
3 Washington;

4 (37) "Likelihood of serious harm" means:

5 (a) A substantial risk that: (i) Physical harm will be inflicted  
6 by a person upon his or her own person, as evidenced by threats or  
7 attempts to commit suicide or inflict physical harm on oneself; (ii)  
8 physical harm will be inflicted by a person upon another, as  
9 evidenced by behavior which has caused such harm or which places  
10 another person or persons in reasonable fear of sustaining such harm;  
11 or (iii) physical harm will be inflicted by a person upon the  
12 property of others, as evidenced by behavior which has caused  
13 substantial loss or damage to the property of others; or

14 (b) The person has threatened the physical safety of another and  
15 has a history of one or more violent acts;

16 (38) "Medical clearance" means a physician or other health care  
17 provider has determined that a person is medically stable and ready  
18 for referral to the designated crisis responder;

19 (39) "Mental disorder" means any organic, mental, or emotional  
20 impairment which has substantial adverse effects on a person's  
21 cognitive or volitional functions;

22 (40) "Mental health professional" means an individual practicing  
23 within the mental health professional's statutory scope of practice  
24 who is:

25 (a) A psychiatrist, psychologist, physician assistant working  
26 with a (~~supervising~~) psychiatrist who is acting as a participating  
27 physician as defined in RCW 18.71A.010, psychiatric advanced  
28 registered nurse practitioner, psychiatric nurse, or social worker,  
29 as defined in this chapter and chapter 71.34 RCW;

30 (b) A mental health counselor, mental health counselor associate,  
31 marriage and family therapist, or marriage and family therapist  
32 associate, as defined in chapter 18.225 RCW; or

33 (c) A certified or licensed agency affiliated counselor, as  
34 defined in chapter 18.19 RCW;

35 (41) "Peace officer" means a law enforcement official of a public  
36 agency or governmental unit, and includes persons specifically given  
37 peace officer powers by any state law, local ordinance, or judicial  
38 order of appointment;

39 (42) "Physician assistant" means a person licensed as a physician  
40 assistant under chapter 18.71A RCW;

1 (43) "Private agency" means any person, partnership, corporation,  
2 or association that is not a public agency, whether or not financed  
3 in whole or in part by public funds, which constitutes an evaluation  
4 and treatment facility or private institution, or hospital, or  
5 approved substance use disorder treatment program, which is conducted  
6 for, or includes a department or ward conducted for, the care and  
7 treatment of persons with behavioral health disorders;

8 (44) "Professional person" means a mental health professional,  
9 substance use disorder professional, or designated crisis responder  
10 and shall also mean a physician, physician assistant, psychiatric  
11 advanced registered nurse practitioner, registered nurse, and such  
12 others as may be defined by rules adopted by the secretary pursuant  
13 to the provisions of this chapter;

14 (45) "Psychiatric advanced registered nurse practitioner" means a  
15 person who is licensed as an advanced registered nurse practitioner  
16 pursuant to chapter 18.79 RCW; and who is board certified in advanced  
17 practice psychiatric and mental health nursing;

18 (46) "Psychiatrist" means a person having a license as a  
19 physician and surgeon in this state who has in addition completed  
20 three years of graduate training in psychiatry in a program approved  
21 by the American medical association or the American osteopathic  
22 association and is certified or eligible to be certified by the  
23 American board of psychiatry and neurology;

24 (47) "Psychologist" means a person who has been licensed as a  
25 psychologist pursuant to chapter 18.83 RCW;

26 (48) "Public agency" means any evaluation and treatment facility  
27 or institution, secure withdrawal management and stabilization  
28 facility, approved substance use disorder treatment program, or  
29 hospital which is conducted for, or includes a department or ward  
30 conducted for, the care and treatment of persons with behavioral  
31 health disorders, if the agency is operated directly by federal,  
32 state, county, or municipal government, or a combination of such  
33 governments;

34 (49) "Release" means legal termination of the commitment under  
35 the provisions of this chapter;

36 (50) "Resource management services" has the meaning given in  
37 chapter 71.24 RCW;

38 (51) "Secretary" means the secretary of the department of health,  
39 or his or her designee;

1 (52) "Secure withdrawal management and stabilization facility"  
2 means a facility operated by either a public or private agency or by  
3 the program of an agency which provides care to voluntary individuals  
4 and individuals involuntarily detained and committed under this  
5 chapter for whom there is a likelihood of serious harm or who are  
6 gravely disabled due to the presence of a substance use disorder.  
7 Secure withdrawal management and stabilization facilities must:

8 (a) Provide the following services:

9 (i) Assessment and treatment, provided by certified substance use  
10 disorder professionals or co-occurring disorder specialists;

11 (ii) Clinical stabilization services;

12 (iii) Acute or subacute detoxification services for intoxicated  
13 individuals; and

14 (iv) Discharge assistance provided by certified substance use  
15 disorder professionals or co-occurring disorder specialists,  
16 including facilitating transitions to appropriate voluntary or  
17 involuntary inpatient services or to less restrictive alternatives as  
18 appropriate for the individual;

19 (b) Include security measures sufficient to protect the patients,  
20 staff, and community; and

21 (c) Be licensed or certified as such by the department of health;

22 (53) "Social worker" means a person with a master's or further  
23 advanced degree from a social work educational program accredited and  
24 approved as provided in RCW 18.320.010;

25 (54) "Substance use disorder" means a cluster of cognitive,  
26 behavioral, and physiological symptoms indicating that an individual  
27 continues using the substance despite significant substance-related  
28 problems. The diagnosis of a substance use disorder is based on a  
29 pathological pattern of behaviors related to the use of the  
30 substances;

31 (55) "Substance use disorder professional" means a person  
32 certified as a substance use disorder professional by the department  
33 of health under chapter 18.205 RCW;

34 (56) "Therapeutic court personnel" means the staff of a mental  
35 health court or other therapeutic court which has jurisdiction over  
36 defendants who are dually diagnosed with mental disorders, including  
37 court personnel, probation officers, a court monitor, prosecuting  
38 attorney, or defense counsel acting within the scope of therapeutic  
39 court duties;

1 (57) "Treatment records" include registration and all other  
2 records concerning persons who are receiving or who at any time have  
3 received services for behavioral health disorders, which are  
4 maintained by the department of social and health services, the  
5 department, the authority, behavioral health administrative services  
6 organizations and their staffs, managed care organizations and their  
7 staffs, and by treatment facilities. Treatment records include mental  
8 health information contained in a medical bill including but not  
9 limited to mental health drugs, a mental health diagnosis, provider  
10 name, and dates of service stemming from a medical service. Treatment  
11 records do not include notes or records maintained for personal use  
12 by a person providing treatment services for the department of social  
13 and health services, the department, the authority, behavioral health  
14 administrative services organizations, managed care organizations, or  
15 a treatment facility if the notes or records are not available to  
16 others;

17 (58) "Video," unless the context clearly indicates otherwise,  
18 means the delivery of behavioral health services through the use of  
19 interactive audio and video technology, permitting real-time  
20 communication between a person and a designated crisis responder, for  
21 the purpose of evaluation. "Video" does not include the use of audio-  
22 only telephone, facsimile, email, or store and forward technology.  
23 "Store and forward technology" means use of an asynchronous  
24 transmission of a person's medical information from a mental health  
25 service provider to the designated crisis responder which results in  
26 medical diagnosis, consultation, or treatment;

27 (59) "Violent act" means behavior that resulted in homicide,  
28 attempted suicide, injury, or substantial loss or damage to property.

29 **Sec. 19.** RCW 71.05.020 and 2023 c 433 s 4 and 2023 c 425 s 21  
30 are each reenacted and amended to read as follows:

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

33 (1) "23-hour crisis relief center" has the same meaning as under  
34 RCW 71.24.025;

35 (2) "Admission" or "admit" means a decision by a physician,  
36 physician assistant, or psychiatric advanced registered nurse  
37 practitioner that a person should be examined or treated as a patient  
38 in a hospital;

1 (3) "Alcoholism" means a disease, characterized by a dependency  
2 on alcoholic beverages, loss of control over the amount and  
3 circumstances of use, symptoms of tolerance, physiological or  
4 psychological withdrawal, or both, if use is reduced or discontinued,  
5 and impairment of health or disruption of social or economic  
6 functioning;

7 (4) "Antipsychotic medications" means that class of drugs  
8 primarily used to treat serious manifestations of mental illness  
9 associated with thought disorders, which includes, but is not limited  
10 to atypical antipsychotic medications;

11 (5) "Approved substance use disorder treatment program" means a  
12 program for persons with a substance use disorder provided by a  
13 treatment program certified by the department as meeting standards  
14 adopted under chapter 71.24 RCW;

15 (6) "Attending staff" means any person on the staff of a public  
16 or private agency having responsibility for the care and treatment of  
17 a patient;

18 (7) "Authority" means the Washington state health care authority;

19 (8) "Behavioral health disorder" means either a mental disorder  
20 as defined in this section, a substance use disorder as defined in  
21 this section, or a co-occurring mental disorder and substance use  
22 disorder;

23 (9) "Behavioral health service provider" means a public or  
24 private agency that provides mental health, substance use disorder,  
25 or co-occurring disorder services to persons with behavioral health  
26 disorders as defined under this section and receives funding from  
27 public sources. This includes, but is not limited to: Hospitals  
28 licensed under chapter 70.41 RCW; evaluation and treatment facilities  
29 as defined in this section; community mental health service delivery  
30 systems or community behavioral health programs as defined in RCW  
31 71.24.025; licensed or certified behavioral health agencies under RCW  
32 71.24.037; facilities conducting competency evaluations and  
33 restoration under chapter 10.77 RCW; approved substance use disorder  
34 treatment programs as defined in this section; secure withdrawal  
35 management and stabilization facilities as defined in this section;  
36 and correctional facilities operated by state and local governments;

37 (10) "Co-occurring disorder specialist" means an individual  
38 possessing an enhancement granted by the department of health under  
39 chapter 18.205 RCW that certifies the individual to provide substance

1 use disorder counseling subject to the practice limitations under RCW  
2 18.205.105;

3 (11) "Commitment" means the determination by a court that a  
4 person should be detained for a period of either evaluation or  
5 treatment, or both, in an inpatient or a less restrictive setting;

6 (12) "Community behavioral health agency" has the same meaning as  
7 "licensed or certified behavioral health agency" defined in RCW  
8 71.24.025;

9 (13) "Conditional release" means a revocable modification of a  
10 commitment, which may be revoked upon violation of any of its terms;

11 (14) "Crisis stabilization unit" means a short-term facility or a  
12 portion of a facility licensed or certified by the department, such  
13 as an evaluation and treatment facility or a hospital, which has been  
14 designed to assess, diagnose, and treat individuals experiencing an  
15 acute crisis without the use of long-term hospitalization, or to  
16 determine the need for involuntary commitment of an individual;

17 (15) "Custody" means involuntary detention under the provisions  
18 of this chapter or chapter 10.77 RCW, uninterrupted by any period of  
19 unconditional release from commitment from a facility providing  
20 involuntary care and treatment;

21 (16) "Department" means the department of health;

22 (17) "Designated crisis responder" means a mental health  
23 professional appointed by the county, by an entity appointed by the  
24 county, or by the authority in consultation with a federally  
25 recognized Indian tribe or after meeting and conferring with an  
26 Indian health care provider, to perform the duties specified in this  
27 chapter;

28 (18) "Detention" or "detain" means the lawful confinement of a  
29 person, under the provisions of this chapter;

30 (19) "Developmental disabilities professional" means a person who  
31 has specialized training and three years of experience in directly  
32 treating or working with persons with developmental disabilities and  
33 is a psychiatrist, physician assistant working with a (~~supervising~~)  
34 psychiatrist who is acting as a participating physician as defined in  
35 RCW 18.71A.010, psychologist, psychiatric advanced registered nurse  
36 practitioner, or social worker, and such other developmental  
37 disabilities professionals as may be defined by rules adopted by the  
38 secretary of the department of social and health services;

39 (20) "Developmental disability" means that condition defined in  
40 RCW 71A.10.020(6);

1 (21) "Director" means the director of the authority;

2 (22) "Discharge" means the termination of hospital medical  
3 authority. The commitment may remain in place, be terminated, or be  
4 amended by court order;

5 (23) "Drug addiction" means a disease, characterized by a  
6 dependency on psychoactive chemicals, loss of control over the amount  
7 and circumstances of use, symptoms of tolerance, physiological or  
8 psychological withdrawal, or both, if use is reduced or discontinued,  
9 and impairment of health or disruption of social or economic  
10 functioning;

11 (24) "Evaluation and treatment facility" means any facility which  
12 can provide directly, or by direct arrangement with other public or  
13 private agencies, emergency evaluation and treatment, outpatient  
14 care, and timely and appropriate inpatient care to persons suffering  
15 from a mental disorder, and which is licensed or certified as such by  
16 the department. The authority may certify single beds as temporary  
17 evaluation and treatment beds under RCW 71.05.745. A physically  
18 separate and separately operated portion of a state hospital may be  
19 designated as an evaluation and treatment facility. A facility which  
20 is part of, or operated by, the department of social and health  
21 services or any federal agency will not require certification. No  
22 correctional institution or facility, or jail, shall be an evaluation  
23 and treatment facility within the meaning of this chapter;

24 (25) "Gravely disabled" means a condition in which a person, as a  
25 result of a behavioral health disorder: (a) Is in danger of serious  
26 physical harm resulting from a failure to provide for his or her  
27 essential human needs of health or safety; or (b) manifests severe  
28 deterioration from safe behavior evidenced by repeated and escalating  
29 loss of cognitive or volitional control over his or her actions and  
30 is not receiving such care as is essential for his or her health or  
31 safety;

32 (26) "Habilitative services" means those services provided by  
33 program personnel to assist persons in acquiring and maintaining life  
34 skills and in raising their levels of physical, mental, social, and  
35 vocational functioning. Habilitative services include education,  
36 training for employment, and therapy. The habilitative process shall  
37 be undertaken with recognition of the risk to the public safety  
38 presented by the person being assisted as manifested by prior charged  
39 criminal conduct;



1 (27) "Hearing" means any proceeding conducted in open court that  
2 conforms to the requirements of RCW 71.05.820;

3 (28) "History of one or more violent acts" refers to the period  
4 of time ten years prior to the filing of a petition under this  
5 chapter, excluding any time spent, but not any violent acts  
6 committed, in a behavioral health facility, or in confinement as a  
7 result of a criminal conviction;

8 (29) "Imminent" means the state or condition of being likely to  
9 occur at any moment or near at hand, rather than distant or remote;

10 (30) "In need of assisted outpatient treatment" refers to a  
11 person who meets the criteria for assisted outpatient treatment  
12 established under RCW 71.05.148;

13 (31) "Individualized service plan" means a plan prepared by a  
14 developmental disabilities professional with other professionals as a  
15 team, for a person with developmental disabilities, which shall  
16 state:

17 (a) The nature of the person's specific problems, prior charged  
18 criminal behavior, and habilitation needs;

19 (b) The conditions and strategies necessary to achieve the  
20 purposes of habilitation;

21 (c) The intermediate and long-range goals of the habilitation  
22 program, with a projected timetable for the attainment;

23 (d) The rationale for using this plan of habilitation to achieve  
24 those intermediate and long-range goals;

25 (e) The staff responsible for carrying out the plan;

26 (f) Where relevant in light of past criminal behavior and due  
27 consideration for public safety, the criteria for proposed movement  
28 to less-restrictive settings, criteria for proposed eventual  
29 discharge or release, and a projected possible date for discharge or  
30 release; and

31 (g) The type of residence immediately anticipated for the person  
32 and possible future types of residences;

33 (32) "Intoxicated person" means a person whose mental or physical  
34 functioning is substantially impaired as a result of the use of  
35 alcohol or other psychoactive chemicals;

36 (33) "Judicial commitment" means a commitment by a court pursuant  
37 to the provisions of this chapter;

38 (34) "Legal counsel" means attorneys and staff employed by county  
39 prosecutor offices or the state attorney general acting in their

1 capacity as legal representatives of public behavioral health service  
2 providers under RCW 71.05.130;

3 (35) "Less restrictive alternative treatment" means a program of  
4 individualized treatment in a less restrictive setting than inpatient  
5 treatment that includes the services described in RCW 71.05.585. This  
6 term includes: Treatment pursuant to a less restrictive alternative  
7 treatment order under RCW 71.05.240 or 71.05.320; treatment pursuant  
8 to a conditional release under RCW 71.05.340; and treatment pursuant  
9 to an assisted outpatient treatment order under RCW 71.05.148;

10 (36) "Licensed physician" means a person licensed to practice  
11 medicine or osteopathic medicine and surgery in the state of  
12 Washington;

13 (37) "Likelihood of serious harm" means:

14 (a) A substantial risk that: (i) Physical harm will be inflicted  
15 by a person upon his or her own person, as evidenced by threats or  
16 attempts to commit suicide or inflict physical harm on oneself; (ii)  
17 physical harm will be inflicted by a person upon another, as  
18 evidenced by behavior which has caused harm, substantial pain, or  
19 which places another person or persons in reasonable fear of harm to  
20 themselves or others; or (iii) physical harm will be inflicted by a  
21 person upon the property of others, as evidenced by behavior which  
22 has caused substantial loss or damage to the property of others; or

23 (b) The person has threatened the physical safety of another and  
24 has a history of one or more violent acts;

25 (38) "Medical clearance" means a physician or other health care  
26 provider has determined that a person is medically stable and ready  
27 for referral to the designated crisis responder;

28 (39) "Mental disorder" means any organic, mental, or emotional  
29 impairment which has substantial adverse effects on a person's  
30 cognitive or volitional functions;

31 (40) "Mental health professional" means an individual practicing  
32 within the mental health professional's statutory scope of practice  
33 who is:

34 (a) A psychiatrist, psychologist, physician assistant working  
35 with a (~~supervising~~) psychiatrist who is acting as a participating  
36 physician as defined in RCW 18.71A.010, psychiatric advanced  
37 registered nurse practitioner, psychiatric nurse, or social worker,  
38 as defined in this chapter and chapter 71.34 RCW;

1 (b) A mental health counselor, mental health counselor associate,  
2 marriage and family therapist, or marriage and family therapist  
3 associate, as defined in chapter 18.225 RCW; or

4 (c) A certified or licensed agency affiliated counselor, as  
5 defined in chapter 18.19 RCW;

6 (41) "Peace officer" means a law enforcement official of a public  
7 agency or governmental unit, and includes persons specifically given  
8 peace officer powers by any state law, local ordinance, or judicial  
9 order of appointment;

10 (42) "Physician assistant" means a person licensed as a physician  
11 assistant under chapter 18.71A RCW;

12 (43) "Private agency" means any person, partnership, corporation,  
13 or association that is not a public agency, whether or not financed  
14 in whole or in part by public funds, which constitutes an evaluation  
15 and treatment facility or private institution, or hospital, or  
16 approved substance use disorder treatment program, which is conducted  
17 for, or includes a department or ward conducted for, the care and  
18 treatment of persons with behavioral health disorders;

19 (44) "Professional person" means a mental health professional,  
20 substance use disorder professional, or designated crisis responder  
21 and shall also mean a physician, physician assistant, psychiatric  
22 advanced registered nurse practitioner, registered nurse, and such  
23 others as may be defined by rules adopted by the secretary pursuant  
24 to the provisions of this chapter;

25 (45) "Psychiatric advanced registered nurse practitioner" means a  
26 person who is licensed as an advanced registered nurse practitioner  
27 pursuant to chapter 18.79 RCW; and who is board certified in advanced  
28 practice psychiatric and mental health nursing;

29 (46) "Psychiatrist" means a person having a license as a  
30 physician and surgeon in this state who has in addition completed  
31 three years of graduate training in psychiatry in a program approved  
32 by the American medical association or the American osteopathic  
33 association and is certified or eligible to be certified by the  
34 American board of psychiatry and neurology;

35 (47) "Psychologist" means a person who has been licensed as a  
36 psychologist pursuant to chapter 18.83 RCW;

37 (48) "Public agency" means any evaluation and treatment facility  
38 or institution, secure withdrawal management and stabilization  
39 facility, approved substance use disorder treatment program, or  
40 hospital which is conducted for, or includes a department or ward

1 conducted for, the care and treatment of persons with behavioral  
2 health disorders, if the agency is operated directly by federal,  
3 state, county, or municipal government, or a combination of such  
4 governments;

5 (49) "Release" means legal termination of the commitment under  
6 the provisions of this chapter;

7 (50) "Resource management services" has the meaning given in  
8 chapter 71.24 RCW;

9 (51) "Secretary" means the secretary of the department of health,  
10 or his or her designee;

11 (52) "Secure withdrawal management and stabilization facility"  
12 means a facility operated by either a public or private agency or by  
13 the program of an agency which provides care to voluntary individuals  
14 and individuals involuntarily detained and committed under this  
15 chapter for whom there is a likelihood of serious harm or who are  
16 gravely disabled due to the presence of a substance use disorder.  
17 Secure withdrawal management and stabilization facilities must:

18 (a) Provide the following services:

19 (i) Assessment and treatment, provided by certified substance use  
20 disorder professionals or co-occurring disorder specialists;

21 (ii) Clinical stabilization services;

22 (iii) Acute or subacute detoxification services for intoxicated  
23 individuals; and

24 (iv) Discharge assistance provided by certified substance use  
25 disorder professionals or co-occurring disorder specialists,  
26 including facilitating transitions to appropriate voluntary or  
27 involuntary inpatient services or to less restrictive alternatives as  
28 appropriate for the individual;

29 (b) Include security measures sufficient to protect the patients,  
30 staff, and community; and

31 (c) Be licensed or certified as such by the department of health;

32 (53) "Severe deterioration from safe behavior" means that a  
33 person will, if not treated, suffer or continue to suffer severe and  
34 abnormal mental, emotional, or physical distress, and this distress  
35 is associated with significant impairment of judgment, reason, or  
36 behavior;

37 (54) "Social worker" means a person with a master's or further  
38 advanced degree from a social work educational program accredited and  
39 approved as provided in RCW 18.320.010;

1 (55) "Substance use disorder" means a cluster of cognitive,  
2 behavioral, and physiological symptoms indicating that an individual  
3 continues using the substance despite significant substance-related  
4 problems. The diagnosis of a substance use disorder is based on a  
5 pathological pattern of behaviors related to the use of the  
6 substances;

7 (56) "Substance use disorder professional" means a person  
8 certified as a substance use disorder professional by the department  
9 of health under chapter 18.205 RCW;

10 (57) "Therapeutic court personnel" means the staff of a mental  
11 health court or other therapeutic court which has jurisdiction over  
12 defendants who are dually diagnosed with mental disorders, including  
13 court personnel, probation officers, a court monitor, prosecuting  
14 attorney, or defense counsel acting within the scope of therapeutic  
15 court duties;

16 (58) "Treatment records" include registration and all other  
17 records concerning persons who are receiving or who at any time have  
18 received services for behavioral health disorders, which are  
19 maintained by the department of social and health services, the  
20 department, the authority, behavioral health administrative services  
21 organizations and their staffs, managed care organizations and their  
22 staffs, and by treatment facilities. Treatment records include mental  
23 health information contained in a medical bill including but not  
24 limited to mental health drugs, a mental health diagnosis, provider  
25 name, and dates of service stemming from a medical service. Treatment  
26 records do not include notes or records maintained for personal use  
27 by a person providing treatment services for the department of social  
28 and health services, the department, the authority, behavioral health  
29 administrative services organizations, managed care organizations, or  
30 a treatment facility if the notes or records are not available to  
31 others;

32 (59) "Video," unless the context clearly indicates otherwise,  
33 means the delivery of behavioral health services through the use of  
34 interactive audio and video technology, permitting real-time  
35 communication between a person and a designated crisis responder, for  
36 the purpose of evaluation. "Video" does not include the use of audio-  
37 only telephone, facsimile, email, or store and forward technology.  
38 "Store and forward technology" means use of an asynchronous  
39 transmission of a person's medical information from a mental health

1 service provider to the designated crisis responder which results in  
2 medical diagnosis, consultation, or treatment;

3 (60) "Violent act" means behavior that resulted in homicide,  
4 attempted suicide, injury, or substantial loss or damage to property.

5 **Sec. 20.** RCW 71.05.215 and 2020 c 302 s 30 are each amended to  
6 read as follows:

7 (1) A person found to be gravely disabled or to present a  
8 likelihood of serious harm as a result of a behavioral health  
9 disorder has a right to refuse antipsychotic medication unless it is  
10 determined that the failure to medicate may result in a likelihood of  
11 serious harm or substantial deterioration or substantially prolong  
12 the length of involuntary commitment and there is no less intrusive  
13 course of treatment than medication in the best interest of that  
14 person.

15 (2) The authority shall adopt rules to carry out the purposes of  
16 this chapter. These rules shall include:

17 (a) An attempt to obtain the informed consent of the person prior  
18 to administration of antipsychotic medication.

19 (b) For short-term treatment up to thirty days, the right to  
20 refuse antipsychotic medications unless there is an additional  
21 concurring medical opinion approving medication by a psychiatrist,  
22 physician assistant working with a (~~supervising~~) psychiatrist who  
23 is acting as a participating physician as defined in RCW 18.71A.010,  
24 psychiatric advanced registered nurse practitioner, or physician or  
25 physician assistant in consultation with a mental health professional  
26 with prescriptive authority.

27 (c) For continued treatment beyond thirty days through the  
28 hearing on any petition filed under RCW 71.05.217, the right to  
29 periodic review of the decision to medicate by the medical director  
30 or designee.

31 (d) Administration of antipsychotic medication in an emergency  
32 and review of this decision within twenty-four hours. An emergency  
33 exists if the person presents an imminent likelihood of serious harm,  
34 and medically acceptable alternatives to administration of  
35 antipsychotic medications are not available or are unlikely to be  
36 successful; and in the opinion of the physician, physician assistant,  
37 or psychiatric advanced registered nurse practitioner, the person's  
38 condition constitutes an emergency requiring the treatment be  
39 instituted prior to obtaining a second medical opinion.

1 (e) Documentation in the medical record of the attempt by the  
2 physician, physician assistant, or psychiatric advanced registered  
3 nurse practitioner to obtain informed consent and the reasons why  
4 antipsychotic medication is being administered over the person's  
5 objection or lack of consent.

6 **Sec. 21.** RCW 71.05.217 and 2020 c 302 s 32 are each amended to  
7 read as follows:

8 (1) Insofar as danger to the individual or others is not created,  
9 each person involuntarily detained, treated in a less restrictive  
10 alternative course of treatment, or committed for treatment and  
11 evaluation pursuant to this chapter shall have, in addition to other  
12 rights not specifically withheld by law, the following rights, a list  
13 of which shall be prominently posted in all facilities, institutions,  
14 and hospitals providing such services:

15 (a) To wear his or her own clothes and to keep and use his or her  
16 own personal possessions, except when deprivation of same is  
17 essential to protect the safety of the resident or other persons;

18 (b) To keep and be allowed to spend a reasonable sum of his or  
19 her own money for canteen expenses and small purchases;

20 (c) To have access to individual storage space for his or her  
21 private use;

22 (d) To have visitors at reasonable times;

23 (e) To have reasonable access to a telephone, both to make and  
24 receive confidential calls;

25 (f) To have ready access to letter writing materials, including  
26 stamps, and to send and receive uncensored correspondence through the  
27 mails;

28 (g) To have the right to individualized care and adequate  
29 treatment;

30 (h) To discuss treatment plans and decisions with professional  
31 persons;

32 (i) To not be denied access to treatment by spiritual means  
33 through prayer in accordance with the tenets and practices of a  
34 church or religious denomination in addition to the treatment  
35 otherwise proposed;

36 (j) Not to consent to the administration of antipsychotic  
37 medications beyond the hearing conducted pursuant to RCW 71.05.320(4)  
38 or the performance of electroconvulsant therapy or surgery, except

1 emergency lifesaving surgery, unless ordered by a court of competent  
2 jurisdiction pursuant to the following standards and procedures:

3 (i) The administration of antipsychotic medication or  
4 electroconvulsant therapy shall not be ordered unless the petitioning  
5 party proves by clear, cogent, and convincing evidence that there  
6 exists a compelling state interest that justifies overriding the  
7 patient's lack of consent to the administration of antipsychotic  
8 medications or electroconvulsant therapy, that the proposed treatment  
9 is necessary and effective, and that medically acceptable alternative  
10 forms of treatment are not available, have not been successful, or  
11 are not likely to be effective.

12 (ii) The court shall make specific findings of fact concerning:  
13 (A) The existence of one or more compelling state interests; (B) the  
14 necessity and effectiveness of the treatment; and (C) the person's  
15 desires regarding the proposed treatment. If the patient is unable to  
16 make a rational and informed decision about consenting to or refusing  
17 the proposed treatment, the court shall make a substituted judgment  
18 for the patient as if he or she were competent to make such a  
19 determination.

20 (iii) The person shall be present at any hearing on a request to  
21 administer antipsychotic medication or electroconvulsant therapy  
22 filed pursuant to this subsection. The person has the right: (A) To  
23 be represented by an attorney; (B) to present evidence; (C) to cross-  
24 examine witnesses; (D) to have the rules of evidence enforced; (E) to  
25 remain silent; (F) to view and copy all petitions and reports in the  
26 court file; and (G) to be given reasonable notice and an opportunity  
27 to prepare for the hearing. The court may appoint a psychiatrist,  
28 physician assistant working with a ~~((supervising))~~ psychiatrist who  
29 is acting as a participating physician as defined in RCW 18.71A.010,  
30 psychiatric advanced registered nurse practitioner, psychologist  
31 within their scope of practice, physician assistant, or physician to  
32 examine and testify on behalf of such person. The court shall appoint  
33 a psychiatrist, physician assistant working with a ~~((supervising))~~  
34 psychiatrist who is acting as a participating physician as defined in  
35 RCW 18.71A.010, psychiatric advanced registered nurse practitioner,  
36 psychologist within their scope of practice, physician assistant, or  
37 physician designated by such person or the person's counsel to  
38 testify on behalf of the person in cases where an order for  
39 electroconvulsant therapy is sought.



1 (iv) An order for the administration of antipsychotic medications  
2 entered following a hearing conducted pursuant to this section shall  
3 be effective for the period of the current involuntary treatment  
4 order, and any interim period during which the person is awaiting  
5 trial or hearing on a new petition for involuntary treatment or  
6 involuntary medication.

7 (v) Any person detained pursuant to RCW 71.05.320(4), who  
8 subsequently refuses antipsychotic medication, shall be entitled to  
9 the procedures set forth in this subsection.

10 (vi) Antipsychotic medication may be administered to a  
11 nonconsenting person detained or committed pursuant to this chapter  
12 without a court order pursuant to RCW 71.05.215(2) or under the  
13 following circumstances:

14 (A) A person presents an imminent likelihood of serious harm;

15 (B) Medically acceptable alternatives to administration of  
16 antipsychotic medications are not available, have not been  
17 successful, or are not likely to be effective; and

18 (C) In the opinion of the physician, physician assistant, or  
19 psychiatric advanced registered nurse practitioner with  
20 responsibility for treatment of the person, or his or her designee,  
21 the person's condition constitutes an emergency requiring the  
22 treatment be instituted before a judicial hearing as authorized  
23 pursuant to this section can be held.

24 If antipsychotic medications are administered over a person's  
25 lack of consent pursuant to this subsection, a petition for an order  
26 authorizing the administration of antipsychotic medications shall be  
27 filed on the next judicial day. The hearing shall be held within two  
28 judicial days. If deemed necessary by the physician, physician  
29 assistant, or psychiatric advanced registered nurse practitioner with  
30 responsibility for the treatment of the person, administration of  
31 antipsychotic medications may continue until the hearing is held;

32 (k) To dispose of property and sign contracts unless such person  
33 has been adjudicated an incompetent in a court proceeding directed to  
34 that particular issue;

35 (l) Not to have psychosurgery performed on him or her under any  
36 circumstances.

37 (2) Every person involuntarily detained or committed under the  
38 provisions of this chapter is entitled to all the rights set forth in  
39 this chapter and retains all rights not denied him or her under this  
40 chapter except as limited by chapter 9.41 RCW.

1 (3) No person may be presumed incompetent as a consequence of  
2 receiving evaluation or treatment for a behavioral health disorder.  
3 Competency may not be determined or withdrawn except under the  
4 provisions of chapter 10.77 (~~or 11.88~~) RCW.

5 (4) Subject to RCW 71.05.745 and related regulations, persons  
6 receiving evaluation or treatment under this chapter must be given a  
7 reasonable choice of an available physician, physician assistant,  
8 psychiatric advanced registered nurse practitioner, or other  
9 professional person qualified to provide such services.

10 (5) Whenever any person is detained under this chapter, the  
11 person must be advised that unless the person is released or  
12 voluntarily admits himself or herself for treatment within one  
13 hundred twenty hours of the initial detention, a judicial hearing  
14 must be held in a superior court within one hundred twenty hours to  
15 determine whether there is probable cause to detain the person for up  
16 to an additional fourteen days based on an allegation that because of  
17 a behavioral health disorder the person presents a likelihood of  
18 serious harm or is gravely disabled, and that at the probable cause  
19 hearing the person has the following rights:

20 (a) To communicate immediately with an attorney; to have an  
21 attorney appointed if the person is indigent; and to be told the name  
22 and address of the attorney that has been designated;

23 (b) To remain silent, and to know that any statement the person  
24 makes may be used against him or her;

25 (c) To present evidence on the person's behalf;

26 (d) To cross-examine witnesses who testify against him or her;

27 (e) To be proceeded against by the rules of evidence;

28 (f) To have the court appoint a reasonably available independent  
29 professional person to examine the person and testify in the hearing,  
30 at public expense unless the person is able to bear the cost;

31 (g) To view and copy all petitions and reports in the court file;  
32 and

33 (h) To refuse psychiatric medications, including antipsychotic  
34 medication beginning twenty-four hours prior to the probable cause  
35 hearing.

36 (6) The judicial hearing described in subsection (5) of this  
37 section must be held according to the provisions of subsection (5) of  
38 this section and rules promulgated by the supreme court.

39 (7)(a) Privileges between patients and physicians, physician  
40 assistants, psychologists, or psychiatric advanced registered nurse

1 practitioners are deemed waived in proceedings under this chapter  
2 relating to the administration of antipsychotic medications. As to  
3 other proceedings under this chapter, the privileges are waived when  
4 a court of competent jurisdiction in its discretion determines that  
5 such waiver is necessary to protect either the detained person or the  
6 public.

7 (b) The waiver of a privilege under this section is limited to  
8 records or testimony relevant to evaluation of the detained person  
9 for purposes of a proceeding under this chapter. Upon motion by the  
10 detained person or on its own motion, the court shall examine a  
11 record or testimony sought by a petitioner to determine whether it is  
12 within the scope of the waiver.

13 (c) The record maker may not be required to testify in order to  
14 introduce medical or psychological records of the detained person so  
15 long as the requirements of RCW 5.45.020 are met except that portions  
16 of the record which contain opinions as to the detained person's  
17 mental state must be deleted from such records unless the person  
18 making such conclusions is available for cross-examination.

19 (8) Nothing contained in this chapter prohibits the patient from  
20 petitioning by writ of habeas corpus for release.

21 (9) Nothing in this section permits any person to knowingly  
22 violate a no-contact order or a condition of an active judgment and  
23 sentence or an active condition of supervision by the department of  
24 corrections.

25 (10) The rights set forth under this section apply equally to  
26 ninety-day or one hundred eighty-day hearings under RCW 71.05.310.

27 **Sec. 22.** RCW 71.05.585 and 2022 c 210 s 20 are each amended to  
28 read as follows:

29 (1) Less restrictive alternative treatment, at a minimum,  
30 includes the following services:

31 (a) Assignment of a care coordinator;

32 (b) An intake evaluation with the provider of the less  
33 restrictive alternative treatment;

34 (c) A psychiatric evaluation, a substance use disorder  
35 evaluation, or both;

36 (d) A schedule of regular contacts with the provider of the  
37 treatment services for the duration of the order;

38 (e) A transition plan addressing access to continued services at  
39 the expiration of the order;

1 (f) An individual crisis plan;

2 (g) Consultation about the formation of a mental health advance  
3 directive under chapter 71.32 RCW; and

4 (h) Notification to the care coordinator assigned in (a) of this  
5 subsection if reasonable efforts to engage the client fail to produce  
6 substantial compliance with court-ordered treatment conditions.

7 (2) Less restrictive alternative treatment may additionally  
8 include requirements to participate in the following services:

9 (a) Medication management;

10 (b) Psychotherapy;

11 (c) Nursing;

12 (d) Substance use disorder counseling;

13 (e) Residential treatment;

14 (f) Partial hospitalization;

15 (g) Intensive outpatient treatment;

16 (h) Support for housing, benefits, education, and employment; and

17 (i) Periodic court review.

18 (3) If the person was provided with involuntary medication under  
19 RCW 71.05.215 or pursuant to a judicial order during the involuntary  
20 commitment period, the less restrictive alternative treatment order  
21 may authorize the less restrictive alternative treatment provider or  
22 its designee to administer involuntary antipsychotic medication to  
23 the person if the provider has attempted and failed to obtain the  
24 informed consent of the person and there is a concurring medical  
25 opinion approving the medication by a psychiatrist, physician  
26 assistant working with a ~~((supervising))~~ psychiatrist who is acting  
27 as a participating physician as defined in RCW 18.71A.010,  
28 psychiatric advanced registered nurse practitioner, or physician or  
29 physician assistant in consultation with an independent mental health  
30 professional with prescribing authority.

31 (4) Less restrictive alternative treatment must be administered  
32 by a provider that is certified or licensed to provide or coordinate  
33 the full scope of services required under the less restrictive  
34 alternative order and that has agreed to assume this responsibility.

35 (5) The care coordinator assigned to a person ordered to less  
36 restrictive alternative treatment must submit an individualized plan  
37 for the person's treatment services to the court that entered the  
38 order. An initial plan must be submitted as soon as possible  
39 following the intake evaluation and a revised plan must be submitted

1 upon any subsequent modification in which a type of service is  
2 removed from or added to the treatment plan.

3 (6) A care coordinator may disclose information and records  
4 related to mental health services pursuant to RCW 70.02.230(2)(k) for  
5 purposes of implementing less restrictive alternative treatment.

6 (7) For the purpose of this section, "care coordinator" means a  
7 clinical practitioner who coordinates the activities of less  
8 restrictive alternative treatment. The care coordinator coordinates  
9 activities with the designated crisis responders that are necessary  
10 for enforcement and continuation of less restrictive alternative  
11 orders and is responsible for coordinating service activities with  
12 other agencies and establishing and maintaining a therapeutic  
13 relationship with the individual on a continuing basis.

14 **Sec. 23.** RCW 71.32.110 and 2021 c 287 s 11 are each amended to  
15 read as follows:

16 (1) For the purposes of this chapter, a principal, agent,  
17 professional person, or health care provider may seek a determination  
18 whether the principal is incapacitated or has regained capacity.

19 (2)(a) For the purposes of this chapter, no adult may be declared  
20 an incapacitated person except by:

21 (i) A court, if the request is made by the principal or the  
22 principal's agent;

23 (ii) One mental health professional or substance use disorder  
24 professional and one health care provider; or

25 (iii) Two health care providers.

26 (b) One of the persons making the determination under (a)(ii) or  
27 (iii) of this subsection must be a psychiatrist, physician assistant  
28 working with a (~~supervising~~) psychiatrist who is acting as a  
29 participating physician as defined in RCW 18.71A.010, psychologist,  
30 or a psychiatric advanced registered nurse practitioner.

31 (3) When a professional person or health care provider requests a  
32 capacity determination, he or she shall promptly inform the principal  
33 that:

34 (a) A request for capacity determination has been made; and

35 (b) The principal may request that the determination be made by a  
36 court.

37 (4) At least one mental health professional, substance use  
38 disorder professional, or health care provider must personally  
39 examine the principal prior to making a capacity determination.

1 (5) (a) When a court makes a determination whether a principal has  
2 capacity, the court shall, at a minimum, be informed by the testimony  
3 of one mental health professional or substance use disorder  
4 professional familiar with the principal and shall, except for good  
5 cause, give the principal an opportunity to appear in court prior to  
6 the court making its determination.

7 (b) To the extent that local court rules permit, any party or  
8 witness may testify telephonically.

9 (6) When a court has made a determination regarding a principal's  
10 capacity and there is a subsequent change in the principal's  
11 condition, subsequent determinations whether the principal is  
12 incapacitated may be made in accordance with any of the provisions of  
13 subsection (2) of this section.

14 **Sec. 24.** RCW 71.32.140 and 2021 c 287 s 13 are each amended to  
15 read as follows:

16 (1) A principal who:

17 (a) Chose not to be able to revoke his or her directive during  
18 any period of incapacity;

19 (b) Consented to voluntary admission to inpatient behavioral  
20 health treatment, or authorized an agent to consent on the  
21 principal's behalf; and

22 (c) At the time of admission to inpatient treatment, refuses to  
23 be admitted, may only be admitted into inpatient behavioral health  
24 treatment under subsection (2) of this section.

25 (2) A principal may only be admitted to inpatient behavioral  
26 health treatment under his or her directive if, prior to admission, a  
27 member of the treating facility's professional staff who is a  
28 physician, physician assistant, or psychiatric advanced registered  
29 nurse practitioner:

30 (a) Evaluates the principal's mental condition, including a  
31 review of reasonably available psychiatric and psychological history,  
32 diagnosis, and treatment needs, and determines, in conjunction with  
33 another health care provider, mental health professional, or  
34 substance use disorder professional, that the principal is  
35 incapacitated;

36 (b) Obtains the informed consent of the agent, if any, designated  
37 in the directive;

38 (c) Makes a written determination that the principal needs an  
39 inpatient evaluation or is in need of inpatient treatment and that

1 the evaluation or treatment cannot be accomplished in a less  
2 restrictive setting; and

3 (d) Documents in the principal's medical record a summary of the  
4 physician's, physician assistant's, or psychiatric advanced  
5 registered nurse practitioner's findings and recommendations for  
6 treatment or evaluation.

7 (3) In the event the admitting physician is not a psychiatrist,  
8 the admitting physician assistant is not (~~supervised by~~) working  
9 with a psychiatrist who is acting as a participating physician as  
10 defined in RCW 18.71A.010, or the advanced registered nurse  
11 practitioner is not a psychiatric advanced registered nurse  
12 practitioner, the principal shall receive a complete behavioral  
13 health assessment by a mental health professional or substance use  
14 disorder professional within 24 hours of admission to determine the  
15 continued need for inpatient evaluation or treatment.

16 (4) (a) If it is determined that the principal has capacity, then  
17 the principal may only be admitted to, or remain in, inpatient  
18 treatment if he or she consents at the time, is admitted for family-  
19 initiated treatment under chapter 71.34 RCW, or is detained under the  
20 involuntary treatment provisions of chapter 71.05 or 71.34 RCW.

21 (b) If a principal who is determined by two health care providers  
22 or one mental health professional or substance use disorder  
23 professional and one health care provider to be incapacitated  
24 continues to refuse inpatient treatment, the principal may  
25 immediately seek injunctive relief for release from the facility.

26 (5) If, at the end of the period of time that the principal or  
27 the principal's agent, if any, has consented to voluntary inpatient  
28 treatment, but no more than 14 days after admission, the principal  
29 has not regained capacity or has regained capacity but refuses to  
30 consent to remain for additional treatment, the principal must be  
31 released during reasonable daylight hours, unless detained under  
32 chapter 71.05 or 71.34 RCW.

33 (6) (a) Except as provided in (b) of this subsection, any  
34 principal who is voluntarily admitted to inpatient behavioral health  
35 treatment under this chapter shall have all the rights provided to  
36 individuals who are voluntarily admitted to inpatient treatment under  
37 chapter 71.05, 71.34, or 72.23 RCW.

38 (b) Notwithstanding RCW 71.05.050 regarding consent to inpatient  
39 treatment for a specified length of time, the choices an  
40 incapacitated principal expressed in his or her directive shall

1 control, provided, however, that a principal who takes action  
2 demonstrating a desire to be discharged, in addition to making  
3 statements requesting to be discharged, shall be discharged, and no  
4 principal shall be restrained in any way in order to prevent his or  
5 her discharge. Nothing in this subsection shall be construed to  
6 prevent detention and evaluation for civil commitment under chapter  
7 71.05 RCW.

8 (7) Consent to inpatient admission in a directive is effective  
9 only while the professional person, health care provider, and health  
10 care facility are in substantial compliance with the material  
11 provisions of the directive related to inpatient treatment.

12 **Sec. 25.** RCW 71.32.250 and 2021 c 287 s 18 are each amended to  
13 read as follows:

14 (1) If a principal who is a resident of a long-term care facility  
15 is admitted to inpatient behavioral health treatment pursuant to his  
16 or her directive, the principal shall be allowed to be readmitted to  
17 the same long-term care facility as if his or her inpatient admission  
18 had been for a physical condition on the same basis that the  
19 principal would be readmitted under state or federal statute or rule  
20 when:

21 (a) The treating facility's professional staff determine that  
22 inpatient behavioral health treatment is no longer medically  
23 necessary for the resident. The determination shall be made in  
24 writing by a psychiatrist, physician assistant working with a  
25 (~~supervising~~) psychiatrist who is acting as a participating  
26 physician as defined in RCW 18.71A.010, or a psychiatric advanced  
27 registered nurse practitioner, or (i) one physician and a mental  
28 health professional or substance use disorder professional; (ii) one  
29 physician assistant and a mental health professional or substance use  
30 disorder professional; or (iii) one psychiatric advanced registered  
31 nurse practitioner and a mental health professional or substance use  
32 disorder professional; or

33 (b) The person's consent to admission in his or her directive has  
34 expired.

35 (2)(a) If the long-term care facility does not have a bed  
36 available at the time of discharge, the treating facility may  
37 discharge the resident, in consultation with the resident and agent  
38 if any, and in accordance with a medically appropriate discharge  
39 plan, to another long-term care facility.



1 (b) This section shall apply to inpatient behavioral health  
2 treatment admission of long-term care facility residents, regardless  
3 of whether the admission is directly from a facility, hospital  
4 emergency room, or other location.

5 (c) This section does not restrict the right of the resident to  
6 an earlier release from the inpatient treatment facility. This  
7 section does not restrict the right of a long-term care facility to  
8 initiate transfer or discharge of a resident who is readmitted  
9 pursuant to this section, provided that the facility has complied  
10 with the laws governing the transfer or discharge of a resident.

11 (3) The joint legislative audit and review committee shall  
12 conduct an evaluation of the operation and impact of this section.  
13 The committee shall report its findings to the appropriate committees  
14 of the legislature by December 1, 2004.

15 **Sec. 26.** RCW 71.34.020 and 2023 c 433 s 12 are each amended to  
16 read as follows:

17 Unless the context clearly requires otherwise, the definitions in  
18 this section apply throughout this chapter.

19 (1) "Admission" or "admit" means a decision by a physician,  
20 physician assistant, or psychiatric advanced registered nurse  
21 practitioner that a minor should be examined or treated as a patient  
22 in a hospital.

23 (2) "Adolescent" means a minor thirteen years of age or older.

24 (3) "Alcoholism" means a disease, characterized by a dependency  
25 on alcoholic beverages, loss of control over the amount and  
26 circumstances of use, symptoms of tolerance, physiological or  
27 psychological withdrawal, or both, if use is reduced or discontinued,  
28 and impairment of health or disruption of social or economic  
29 functioning.

30 (4) "Antipsychotic medications" means that class of drugs  
31 primarily used to treat serious manifestations of mental illness  
32 associated with thought disorders, which includes, but is not limited  
33 to, atypical antipsychotic medications.

34 (5) "Approved substance use disorder treatment program" means a  
35 program for minors with substance use disorders provided by a  
36 treatment program licensed or certified by the department of health  
37 as meeting standards adopted under chapter 71.24 RCW.

1 (6) "Attending staff" means any person on the staff of a public  
2 or private agency having responsibility for the care and treatment of  
3 a minor patient.

4 (7) "Authority" means the Washington state health care authority.

5 (8) "Behavioral health administrative services organization" has  
6 the same meaning as provided in RCW 71.24.025.

7 (9) "Behavioral health disorder" means either a mental disorder  
8 as defined in this section, a substance use disorder as defined in  
9 this section, or a co-occurring mental disorder and substance use  
10 disorder.

11 (10) "Child psychiatrist" means a person having a license as a  
12 physician and surgeon in this state, who has had graduate training in  
13 child psychiatry in a program approved by the American Medical  
14 Association or the American Osteopathic Association, and who is board  
15 eligible or board certified in child psychiatry.

16 (11) "Children's mental health specialist" means:

17 (a) A mental health professional who has completed a minimum of  
18 one hundred actual hours, not quarter or semester hours, of  
19 specialized training devoted to the study of child development and  
20 the treatment of children; and

21 (b) A mental health professional who has the equivalent of one  
22 year of full-time experience in the treatment of children under the  
23 supervision of a children's mental health specialist.

24 (12) "Commitment" means a determination by a judge or court  
25 commissioner, made after a commitment hearing, that the minor is in  
26 need of inpatient diagnosis, evaluation, or treatment or that the  
27 minor is in need of less restrictive alternative treatment.

28 (13) "Conditional release" means a revocable modification of a  
29 commitment, which may be revoked upon violation of any of its terms.

30 (14) "Co-occurring disorder specialist" means an individual  
31 possessing an enhancement granted by the department of health under  
32 chapter 18.205 RCW that certifies the individual to provide substance  
33 use disorder counseling subject to the practice limitations under RCW  
34 18.205.105.

35 (15) "Crisis stabilization unit" means a short-term facility or a  
36 portion of a facility licensed or certified by the department of  
37 health under RCW 71.24.035, such as a residential treatment facility  
38 or a hospital, which has been designed to assess, diagnose, and treat  
39 individuals experiencing an acute crisis without the use of long-term

1 hospitalization, or to determine the need for involuntary commitment  
2 of an individual.

3 (16) "Custody" means involuntary detention under the provisions  
4 of this chapter or chapter 10.77 RCW, uninterrupted by any period of  
5 unconditional release from commitment from a facility providing  
6 involuntary care and treatment.

7 (17) "Department" means the department of social and health  
8 services.

9 (18) "Designated crisis responder" has the same meaning as  
10 provided in RCW 71.05.020.

11 (19) "Detention" or "detain" means the lawful confinement of a  
12 person, under the provisions of this chapter.

13 (20) "Developmental disabilities professional" means a person who  
14 has specialized training and three years of experience in directly  
15 treating or working with persons with developmental disabilities and  
16 is a psychiatrist, physician assistant working with a (~~supervising~~)  
17 psychiatrist who is acting as a participating physician as defined in  
18 RCW 18.71A.010, psychologist, psychiatric advanced registered nurse  
19 practitioner, or social worker, and such other developmental  
20 disabilities professionals as may be defined by rules adopted by the  
21 secretary of the department.

22 (21) "Developmental disability" has the same meaning as defined  
23 in RCW 71A.10.020.

24 (22) "Director" means the director of the authority.

25 (23) "Discharge" means the termination of hospital medical  
26 authority. The commitment may remain in place, be terminated, or be  
27 amended by court order.

28 (24) "Evaluation and treatment facility" means a public or  
29 private facility or unit that is licensed or certified by the  
30 department of health to provide emergency, inpatient, residential, or  
31 outpatient mental health evaluation and treatment services for  
32 minors. A physically separate and separately operated portion of a  
33 state hospital may be designated as an evaluation and treatment  
34 facility for minors. A facility which is part of or operated by the  
35 state or federal agency does not require licensure or certification.  
36 No correctional institution or facility, juvenile court detention  
37 facility, or jail may be an evaluation and treatment facility within  
38 the meaning of this chapter.

39 (25) "Evaluation and treatment program" means the total system of  
40 services and facilities coordinated and approved by a county or

1 combination of counties for the evaluation and treatment of minors  
2 under this chapter.

3 (26) "Gravely disabled minor" means a minor who, as a result of a  
4 behavioral health disorder, (a) is in danger of serious physical harm  
5 resulting from a failure to provide for his or her essential human  
6 needs of health or safety, or (b) manifests severe deterioration in  
7 routine functioning evidenced by repeated and escalating loss of  
8 cognitive or volitional control over his or her actions and is not  
9 receiving such care as is essential for his or her health or safety.

10 (27) "Habilitative services" means those services provided by  
11 program personnel to assist minors in acquiring and maintaining life  
12 skills and in raising their levels of physical, behavioral, social,  
13 and vocational functioning. Habilitative services include education,  
14 training for employment, and therapy.

15 (28) "Hearing" means any proceeding conducted in open court that  
16 conforms to the requirements of RCW 71.34.910.

17 (29) "History of one or more violent acts" refers to the period  
18 of time five years prior to the filing of a petition under this  
19 chapter, excluding any time spent, but not any violent acts  
20 committed, in a mental health facility, a long-term substance use  
21 disorder treatment facility, or in confinement as a result of a  
22 criminal conviction.

23 (30) "Individualized service plan" means a plan prepared by a  
24 developmental disabilities professional with other professionals as a  
25 team, for a person with developmental disabilities, which states:

26 (a) The nature of the person's specific problems, prior charged  
27 criminal behavior, and habilitation needs;

28 (b) The conditions and strategies necessary to achieve the  
29 purposes of habilitation;

30 (c) The intermediate and long-range goals of the habilitation  
31 program, with a projected timetable for the attainment;

32 (d) The rationale for using this plan of habilitation to achieve  
33 those intermediate and long-range goals;

34 (e) The staff responsible for carrying out the plan;

35 (f) Where relevant in light of past criminal behavior and due  
36 consideration for public safety, the criteria for proposed movement  
37 to less-restrictive settings, criteria for proposed eventual  
38 discharge or release, and a projected possible date for discharge or  
39 release; and

1 (g) The type of residence immediately anticipated for the person  
2 and possible future types of residences.

3 (31)(a) "Inpatient treatment" means twenty-four-hour-per-day  
4 mental health care provided within a general hospital, psychiatric  
5 hospital, residential treatment facility licensed or certified by the  
6 department of health as an evaluation and treatment facility for  
7 minors, secure withdrawal management and stabilization facility for  
8 minors, or approved substance use disorder treatment program for  
9 minors.

10 (b) For purposes of family-initiated treatment under RCW  
11 71.34.600 through 71.34.670, "inpatient treatment" has the meaning  
12 included in (a) of this subsection and any other residential  
13 treatment facility licensed under chapter 71.12 RCW.

14 (32) "Intoxicated minor" means a minor whose mental or physical  
15 functioning is substantially impaired as a result of the use of  
16 alcohol or other psychoactive chemicals.

17 (33) "Judicial commitment" means a commitment by a court pursuant  
18 to the provisions of this chapter.

19 (34) "Kinship caregiver" has the same meaning as in RCW  
20 74.13.031(~~((19)(a))~~) (22)(a).

21 (35) "Legal counsel" means attorneys and staff employed by county  
22 prosecutor offices or the state attorney general acting in their  
23 capacity as legal representatives of public behavioral health service  
24 providers under RCW 71.05.130.

25 (36) "Less restrictive alternative" or "less restrictive setting"  
26 means outpatient treatment provided to a minor as a program of  
27 individualized treatment in a less restrictive setting than inpatient  
28 treatment that includes the services described in RCW 71.34.755,  
29 including residential treatment.

30 (37) "Licensed physician" means a person licensed to practice  
31 medicine or osteopathic medicine and surgery in the state of  
32 Washington.

33 (38) "Likelihood of serious harm" means:

34 (a) A substantial risk that: (i) Physical harm will be inflicted  
35 by a minor upon his or her own person, as evidenced by threats or  
36 attempts to commit suicide or inflict physical harm on oneself; (ii)  
37 physical harm will be inflicted by a minor upon another individual,  
38 as evidenced by behavior which has caused such harm or which places  
39 another person or persons in reasonable fear of sustaining such harm;  
40 or (iii) physical harm will be inflicted by a minor upon the property

1 of others, as evidenced by behavior which has caused substantial loss  
2 or damage to the property of others; or

3 (b) The minor has threatened the physical safety of another and  
4 has a history of one or more violent acts.

5 (39) "Managed care organization" has the same meaning as provided  
6 in RCW 71.24.025.

7 (40) "Medical clearance" means a physician or other health care  
8 provider has determined that a person is medically stable and ready  
9 for referral to the designated crisis responder.

10 (41) "Medical necessity" for inpatient care means a requested  
11 service which is reasonably calculated to: (a) Diagnose, correct,  
12 cure, or alleviate a mental disorder or substance use disorder; or  
13 (b) prevent the progression of a mental disorder or substance use  
14 disorder that endangers life or causes suffering and pain, or results  
15 in illness or infirmity or threatens to cause or aggravate a  
16 disability, or causes physical deformity or malfunction, and there is  
17 no adequate less restrictive alternative available.

18 (42) "Mental disorder" means any organic, mental, or emotional  
19 impairment that has substantial adverse effects on an individual's  
20 cognitive or volitional functions. The presence of alcohol abuse,  
21 drug abuse, juvenile criminal history, antisocial behavior, or  
22 intellectual disabilities alone is insufficient to justify a finding  
23 of "mental disorder" within the meaning of this section.

24 (43) "Mental health professional" means a psychiatrist,  
25 psychiatric advanced registered nurse practitioner, physician  
26 assistant working with a (~~supervising~~) psychiatrist who is acting  
27 as a participating physician as defined in RCW 18.71A.010,  
28 psychologist, psychiatric nurse, social worker, and such other mental  
29 health professionals as defined by rules adopted by the secretary of  
30 the department of health under this chapter.

31 (44) "Minor" means any person under the age of eighteen years.

32 (45) "Outpatient treatment" means any of the nonresidential  
33 services mandated under chapter 71.24 RCW and provided by licensed or  
34 certified behavioral health agencies as identified by RCW 71.24.025.

35 (46)(a) "Parent" has the same meaning as defined in RCW  
36 26.26A.010, including either parent if custody is shared under a  
37 joint custody agreement, or a person or agency judicially appointed  
38 as legal guardian or custodian of the child.

39 (b) For purposes of family-initiated treatment under RCW  
40 71.34.600 through 71.34.670, "parent" also includes a person to whom

1 a parent defined in (a) of this subsection has given a signed  
2 authorization to make health care decisions for the adolescent, a  
3 stepparent who is involved in caring for the adolescent, a kinship  
4 caregiver who is involved in caring for the adolescent, or another  
5 relative who is responsible for the health care of the adolescent,  
6 who may be required to provide a declaration under penalty of perjury  
7 stating that he or she is a relative responsible for the health care  
8 of the adolescent pursuant to chapter 5.50 RCW. If a dispute arises  
9 between individuals authorized to act as a parent for the purpose of  
10 RCW 71.34.600 through 71.34.670, the disagreement must be resolved  
11 according to the priority established under RCW 7.70.065(2)(a).

12 (47) "Peace officer" means a law enforcement official of a public  
13 agency or governmental unit, and includes persons specifically given  
14 peace officer powers by any state law, local ordinance, or judicial  
15 order of appointment.

16 (48) "Physician assistant" means a person licensed as a physician  
17 assistant under chapter 18.71A RCW.

18 (49) "Private agency" means any person, partnership, corporation,  
19 or association that is not a public agency, whether or not financed  
20 in whole or in part by public funds, that constitutes an evaluation  
21 and treatment facility or private institution, or hospital, or  
22 approved substance use disorder treatment program, that is conducted  
23 for, or includes a distinct unit, floor, or ward conducted for, the  
24 care and treatment of persons with mental illness, substance use  
25 disorders, or both mental illness and substance use disorders.

26 (50) "Professional person in charge" or "professional person"  
27 means a physician, other mental health professional, or other person  
28 empowered by an evaluation and treatment facility, secure withdrawal  
29 management and stabilization facility, or approved substance use  
30 disorder treatment program with authority to make admission and  
31 discharge decisions on behalf of that facility.

32 (51) "Psychiatric nurse" means a registered nurse who has  
33 experience in the direct treatment of persons who have a mental  
34 illness or who are emotionally disturbed, such experience gained  
35 under the supervision of a mental health professional.

36 (52) "Psychiatrist" means a person having a license as a  
37 physician in this state who has completed residency training in  
38 psychiatry in a program approved by the American Medical Association  
39 or the American Osteopathic Association, and is board eligible or  
40 board certified in psychiatry.

1 (53) "Psychologist" means a person licensed as a psychologist  
2 under chapter 18.83 RCW.

3 (54) "Public agency" means any evaluation and treatment facility  
4 or institution, or hospital, or approved substance use disorder  
5 treatment program that is conducted for, or includes a distinct unit,  
6 floor, or ward conducted for, the care and treatment of persons with  
7 mental illness, substance use disorders, or both mental illness and  
8 substance use disorders if the agency is operated directly by  
9 federal, state, county, or municipal government, or a combination of  
10 such governments.

11 (55) "Release" means legal termination of the commitment under  
12 the provisions of this chapter.

13 (56) "Resource management services" has the meaning given in  
14 chapter 71.24 RCW.

15 (57) "Responsible other" means the minor, the minor's parent or  
16 estate, or any other person legally responsible for support of the  
17 minor.

18 (58) "Secretary" means the secretary of the department or  
19 secretary's designee.

20 (59) "Secure withdrawal management and stabilization facility"  
21 means a facility operated by either a public or private agency or by  
22 the program of an agency which provides care to voluntary individuals  
23 and individuals involuntarily detained and committed under this  
24 chapter for whom there is a likelihood of serious harm or who are  
25 gravely disabled due to the presence of a substance use disorder.  
26 Secure withdrawal management and stabilization facilities must:

27 (a) Provide the following services:

28 (i) Assessment and treatment, provided by certified substance use  
29 disorder professionals or co-occurring disorder specialists;

30 (ii) Clinical stabilization services;

31 (iii) Acute or subacute detoxification services for intoxicated  
32 individuals; and

33 (iv) Discharge assistance provided by certified substance use  
34 disorder professionals or co-occurring disorder specialists,  
35 including facilitating transitions to appropriate voluntary or  
36 involuntary inpatient services or to less restrictive alternatives as  
37 appropriate for the individual;

38 (b) Include security measures sufficient to protect the patients,  
39 staff, and community; and

40 (c) Be licensed or certified as such by the department of health.



1 (60) "Social worker" means a person with a master's or further  
2 advanced degree from a social work educational program accredited and  
3 approved as provided in RCW 18.320.010.

4 (61) "Start of initial detention" means the time of arrival of  
5 the minor at the first evaluation and treatment facility, secure  
6 withdrawal management and stabilization facility, or approved  
7 substance use disorder treatment program offering inpatient treatment  
8 if the minor is being involuntarily detained at the time. With regard  
9 to voluntary patients, "start of initial detention" means the time at  
10 which the minor gives notice of intent to leave under the provisions  
11 of this chapter.

12 (62) "Store and forward technology" means use of an asynchronous  
13 transmission of a person's medical information from a mental health  
14 service provider to the designated crisis responder which results in  
15 medical diagnosis, consultation, or treatment.

16 (63) "Substance use disorder" means a cluster of cognitive,  
17 behavioral, and physiological symptoms indicating that an individual  
18 continues using the substance despite significant substance-related  
19 problems. The diagnosis of a substance use disorder is based on a  
20 pathological pattern of behaviors related to the use of the  
21 substances.

22 (64) "Substance use disorder professional" means a person  
23 certified as a substance use disorder professional by the department  
24 of health under chapter 18.205 RCW.

25 (65) "Therapeutic court personnel" means the staff of a mental  
26 health court or other therapeutic court which has jurisdiction over  
27 defendants who are dually diagnosed with mental disorders, including  
28 court personnel, probation officers, a court monitor, prosecuting  
29 attorney, or defense counsel acting within the scope of therapeutic  
30 court duties.

31 (66) "Treatment records" include registration and all other  
32 records concerning persons who are receiving or who at any time have  
33 received services for mental illness, which are maintained by the  
34 department, the department of health, the authority, behavioral  
35 health organizations and their staffs, and by treatment facilities.  
36 Treatment records include mental health information contained in a  
37 medical bill including but not limited to mental health drugs, a  
38 mental health diagnosis, provider name, and dates of service stemming  
39 from a medical service. Treatment records do not include notes or  
40 records maintained for personal use by a person providing treatment

1 services for the department, the department of health, the authority,  
2 behavioral health organizations, or a treatment facility if the notes  
3 or records are not available to others.

4 (67) "Video" means the delivery of behavioral health services  
5 through the use of interactive audio and video technology, permitting  
6 real-time communication between a person and a designated crisis  
7 responder, for the purpose of evaluation. "Video" does not include  
8 the use of audio-only telephone, facsimile, email, or store and  
9 forward technology.

10 (68) "Violent act" means behavior that resulted in homicide,  
11 attempted suicide, injury, or substantial loss or damage to property.

12 **Sec. 27.** RCW 71.34.020 and 2023 c 433 s 13 are each amended to  
13 read as follows:

14 Unless the context clearly requires otherwise, the definitions in  
15 this section apply throughout this chapter.

16 (1) "Admission" or "admit" means a decision by a physician,  
17 physician assistant, or psychiatric advanced registered nurse  
18 practitioner that a minor should be examined or treated as a patient  
19 in a hospital.

20 (2) "Adolescent" means a minor thirteen years of age or older.

21 (3) "Alcoholism" means a disease, characterized by a dependency  
22 on alcoholic beverages, loss of control over the amount and  
23 circumstances of use, symptoms of tolerance, physiological or  
24 psychological withdrawal, or both, if use is reduced or discontinued,  
25 and impairment of health or disruption of social or economic  
26 functioning.

27 (4) "Antipsychotic medications" means that class of drugs  
28 primarily used to treat serious manifestations of mental illness  
29 associated with thought disorders, which includes, but is not limited  
30 to, atypical antipsychotic medications.

31 (5) "Approved substance use disorder treatment program" means a  
32 program for minors with substance use disorders provided by a  
33 treatment program licensed or certified by the department of health  
34 as meeting standards adopted under chapter 71.24 RCW.

35 (6) "Attending staff" means any person on the staff of a public  
36 or private agency having responsibility for the care and treatment of  
37 a minor patient.

38 (7) "Authority" means the Washington state health care authority.

1 (8) "Behavioral health administrative services organization" has  
2 the same meaning as provided in RCW 71.24.025.

3 (9) "Behavioral health disorder" means either a mental disorder  
4 as defined in this section, a substance use disorder as defined in  
5 this section, or a co-occurring mental disorder and substance use  
6 disorder.

7 (10) "Child psychiatrist" means a person having a license as a  
8 physician and surgeon in this state, who has had graduate training in  
9 child psychiatry in a program approved by the American Medical  
10 Association or the American Osteopathic Association, and who is board  
11 eligible or board certified in child psychiatry.

12 (11) "Children's mental health specialist" means:

13 (a) A mental health professional who has completed a minimum of  
14 one hundred actual hours, not quarter or semester hours, of  
15 specialized training devoted to the study of child development and  
16 the treatment of children; and

17 (b) A mental health professional who has the equivalent of one  
18 year of full-time experience in the treatment of children under the  
19 supervision of a children's mental health specialist.

20 (12) "Commitment" means a determination by a judge or court  
21 commissioner, made after a commitment hearing, that the minor is in  
22 need of inpatient diagnosis, evaluation, or treatment or that the  
23 minor is in need of less restrictive alternative treatment.

24 (13) "Conditional release" means a revocable modification of a  
25 commitment, which may be revoked upon violation of any of its terms.

26 (14) "Co-occurring disorder specialist" means an individual  
27 possessing an enhancement granted by the department of health under  
28 chapter 18.205 RCW that certifies the individual to provide substance  
29 use disorder counseling subject to the practice limitations under RCW  
30 18.205.105.

31 (15) "Crisis stabilization unit" means a short-term facility or a  
32 portion of a facility licensed or certified by the department of  
33 health under RCW 71.24.035, such as a residential treatment facility  
34 or a hospital, which has been designed to assess, diagnose, and treat  
35 individuals experiencing an acute crisis without the use of long-term  
36 hospitalization, or to determine the need for involuntary commitment  
37 of an individual.

38 (16) "Custody" means involuntary detention under the provisions  
39 of this chapter or chapter 10.77 RCW, uninterrupted by any period of

1 unconditional release from commitment from a facility providing  
2 involuntary care and treatment.

3 (17) "Department" means the department of social and health  
4 services.

5 (18) "Designated crisis responder" has the same meaning as  
6 provided in RCW 71.05.020.

7 (19) "Detention" or "detain" means the lawful confinement of a  
8 person, under the provisions of this chapter.

9 (20) "Developmental disabilities professional" means a person who  
10 has specialized training and three years of experience in directly  
11 treating or working with persons with developmental disabilities and  
12 is a psychiatrist, physician assistant working with a (~~supervising~~)  
13 psychiatrist who is acting as a participating physician as defined in  
14 RCW 18.71A.010, psychologist, psychiatric advanced registered nurse  
15 practitioner, or social worker, and such other developmental  
16 disabilities professionals as may be defined by rules adopted by the  
17 secretary of the department.

18 (21) "Developmental disability" has the same meaning as defined  
19 in RCW 71A.10.020.

20 (22) "Director" means the director of the authority.

21 (23) "Discharge" means the termination of hospital medical  
22 authority. The commitment may remain in place, be terminated, or be  
23 amended by court order.

24 (24) "Evaluation and treatment facility" means a public or  
25 private facility or unit that is licensed or certified by the  
26 department of health to provide emergency, inpatient, residential, or  
27 outpatient mental health evaluation and treatment services for  
28 minors. A physically separate and separately operated portion of a  
29 state hospital may be designated as an evaluation and treatment  
30 facility for minors. A facility which is part of or operated by the  
31 state or federal agency does not require licensure or certification.  
32 No correctional institution or facility, juvenile court detention  
33 facility, or jail may be an evaluation and treatment facility within  
34 the meaning of this chapter.

35 (25) "Evaluation and treatment program" means the total system of  
36 services and facilities coordinated and approved by a county or  
37 combination of counties for the evaluation and treatment of minors  
38 under this chapter.

39 (26) "Gravely disabled minor" means a minor who, as a result of a  
40 behavioral health disorder, (a) is in danger of serious physical harm

1 resulting from a failure to provide for his or her essential human  
2 needs of health or safety, or (b) manifests severe deterioration from  
3 safe behavior evidenced by repeated and escalating loss of cognitive  
4 or volitional control over his or her actions and is not receiving  
5 such care as is essential for his or her health or safety.

6 (27) "Habilitative services" means those services provided by  
7 program personnel to assist minors in acquiring and maintaining life  
8 skills and in raising their levels of physical, behavioral, social,  
9 and vocational functioning. Habilitative services include education,  
10 training for employment, and therapy.

11 (28) "Hearing" means any proceeding conducted in open court that  
12 conforms to the requirements of RCW 71.34.910.

13 (29) "History of one or more violent acts" refers to the period  
14 of time five years prior to the filing of a petition under this  
15 chapter, excluding any time spent, but not any violent acts  
16 committed, in a mental health facility, a long-term substance use  
17 disorder treatment facility, or in confinement as a result of a  
18 criminal conviction.

19 (30) "Individualized service plan" means a plan prepared by a  
20 developmental disabilities professional with other professionals as a  
21 team, for a person with developmental disabilities, which states:

22 (a) The nature of the person's specific problems, prior charged  
23 criminal behavior, and habilitation needs;

24 (b) The conditions and strategies necessary to achieve the  
25 purposes of habilitation;

26 (c) The intermediate and long-range goals of the habilitation  
27 program, with a projected timetable for the attainment;

28 (d) The rationale for using this plan of habilitation to achieve  
29 those intermediate and long-range goals;

30 (e) The staff responsible for carrying out the plan;

31 (f) Where relevant in light of past criminal behavior and due  
32 consideration for public safety, the criteria for proposed movement  
33 to less-restrictive settings, criteria for proposed eventual  
34 discharge or release, and a projected possible date for discharge or  
35 release; and

36 (g) The type of residence immediately anticipated for the person  
37 and possible future types of residences.

38 (31)(a) "Inpatient treatment" means twenty-four-hour-per-day  
39 mental health care provided within a general hospital, psychiatric  
40 hospital, residential treatment facility licensed or certified by the

1 department of health as an evaluation and treatment facility for  
2 minors, secure withdrawal management and stabilization facility for  
3 minors, or approved substance use disorder treatment program for  
4 minors.

5 (b) For purposes of family-initiated treatment under RCW  
6 71.34.600 through 71.34.670, "inpatient treatment" has the meaning  
7 included in (a) of this subsection and any other residential  
8 treatment facility licensed under chapter 71.12 RCW.

9 (32) "Intoxicated minor" means a minor whose mental or physical  
10 functioning is substantially impaired as a result of the use of  
11 alcohol or other psychoactive chemicals.

12 (33) "Judicial commitment" means a commitment by a court pursuant  
13 to the provisions of this chapter.

14 (34) "Kinship caregiver" has the same meaning as in RCW  
15 74.13.031(~~((19)(a))~~) (22)(a).

16 (35) "Legal counsel" means attorneys and staff employed by county  
17 prosecutor offices or the state attorney general acting in their  
18 capacity as legal representatives of public behavioral health service  
19 providers under RCW 71.05.130.

20 (36) "Less restrictive alternative" or "less restrictive setting"  
21 means outpatient treatment provided to a minor as a program of  
22 individualized treatment in a less restrictive setting than inpatient  
23 treatment that includes the services described in RCW 71.34.755,  
24 including residential treatment.

25 (37) "Licensed physician" means a person licensed to practice  
26 medicine or osteopathic medicine and surgery in the state of  
27 Washington.

28 (38) "Likelihood of serious harm" means:

29 (a) A substantial risk that: (i) Physical harm will be inflicted  
30 by a minor upon his or her own person, as evidenced by threats or  
31 attempts to commit suicide or inflict physical harm on oneself; (ii)  
32 physical harm will be inflicted by a minor upon another individual,  
33 as evidenced by behavior which has caused harm, substantial pain, or  
34 which places another person or persons in reasonable fear of harm to  
35 themselves or others; or (iii) physical harm will be inflicted by a  
36 minor upon the property of others, as evidenced by behavior which has  
37 caused substantial loss or damage to the property of others; or

38 (b) The minor has threatened the physical safety of another and  
39 has a history of one or more violent acts.

1 (39) "Managed care organization" has the same meaning as provided  
2 in RCW 71.24.025.

3 (40) "Medical clearance" means a physician or other health care  
4 provider has determined that a person is medically stable and ready  
5 for referral to the designated crisis responder.

6 (41) "Medical necessity" for inpatient care means a requested  
7 service which is reasonably calculated to: (a) Diagnose, correct,  
8 cure, or alleviate a mental disorder or substance use disorder; or  
9 (b) prevent the progression of a mental disorder or substance use  
10 disorder that endangers life or causes suffering and pain, or results  
11 in illness or infirmity or threatens to cause or aggravate a  
12 disability, or causes physical deformity or malfunction, and there is  
13 no adequate less restrictive alternative available.

14 (42) "Mental disorder" means any organic, mental, or emotional  
15 impairment that has substantial adverse effects on an individual's  
16 cognitive or volitional functions. The presence of alcohol abuse,  
17 drug abuse, juvenile criminal history, antisocial behavior, or  
18 intellectual disabilities alone is insufficient to justify a finding  
19 of "mental disorder" within the meaning of this section.

20 (43) "Mental health professional" means a psychiatrist,  
21 psychiatric advanced registered nurse practitioner, physician  
22 assistant working with a (~~supervising~~) psychiatrist who is acting  
23 as a participating physician as defined in RCW 18.71A.010,  
24 psychologist, psychiatric nurse, social worker, and such other mental  
25 health professionals as defined by rules adopted by the secretary of  
26 the department of health under this chapter.

27 (44) "Minor" means any person under the age of eighteen years.

28 (45) "Outpatient treatment" means any of the nonresidential  
29 services mandated under chapter 71.24 RCW and provided by licensed or  
30 certified behavioral health agencies as identified by RCW 71.24.025.

31 (46)(a) "Parent" has the same meaning as defined in RCW  
32 26.26A.010, including either parent if custody is shared under a  
33 joint custody agreement, or a person or agency judicially appointed  
34 as legal guardian or custodian of the child.

35 (b) For purposes of family-initiated treatment under RCW  
36 71.34.600 through 71.34.670, "parent" also includes a person to whom  
37 a parent defined in (a) of this subsection has given a signed  
38 authorization to make health care decisions for the adolescent, a  
39 stepparent who is involved in caring for the adolescent, a kinship  
40 caregiver who is involved in caring for the adolescent, or another

1 relative who is responsible for the health care of the adolescent,  
2 who may be required to provide a declaration under penalty of perjury  
3 stating that he or she is a relative responsible for the health care  
4 of the adolescent pursuant to chapter 5.50 RCW. If a dispute arises  
5 between individuals authorized to act as a parent for the purpose of  
6 RCW 71.34.600 through 71.34.670, the disagreement must be resolved  
7 according to the priority established under RCW 7.70.065(2)(a).

8 (47) "Peace officer" means a law enforcement official of a public  
9 agency or governmental unit, and includes persons specifically given  
10 peace officer powers by any state law, local ordinance, or judicial  
11 order of appointment.

12 (48) "Physician assistant" means a person licensed as a physician  
13 assistant under chapter 18.71A RCW.

14 (49) "Private agency" means any person, partnership, corporation,  
15 or association that is not a public agency, whether or not financed  
16 in whole or in part by public funds, that constitutes an evaluation  
17 and treatment facility or private institution, or hospital, or  
18 approved substance use disorder treatment program, that is conducted  
19 for, or includes a distinct unit, floor, or ward conducted for, the  
20 care and treatment of persons with mental illness, substance use  
21 disorders, or both mental illness and substance use disorders.

22 (50) "Professional person in charge" or "professional person"  
23 means a physician, other mental health professional, or other person  
24 empowered by an evaluation and treatment facility, secure withdrawal  
25 management and stabilization facility, or approved substance use  
26 disorder treatment program with authority to make admission and  
27 discharge decisions on behalf of that facility.

28 (51) "Psychiatric nurse" means a registered nurse who has  
29 experience in the direct treatment of persons who have a mental  
30 illness or who are emotionally disturbed, such experience gained  
31 under the supervision of a mental health professional.

32 (52) "Psychiatrist" means a person having a license as a  
33 physician in this state who has completed residency training in  
34 psychiatry in a program approved by the American Medical Association  
35 or the American Osteopathic Association, and is board eligible or  
36 board certified in psychiatry.

37 (53) "Psychologist" means a person licensed as a psychologist  
38 under chapter 18.83 RCW.

39 (54) "Public agency" means any evaluation and treatment facility  
40 or institution, or hospital, or approved substance use disorder



1 treatment program that is conducted for, or includes a distinct unit,  
2 floor, or ward conducted for, the care and treatment of persons with  
3 mental illness, substance use disorders, or both mental illness and  
4 substance use disorders if the agency is operated directly by  
5 federal, state, county, or municipal government, or a combination of  
6 such governments.

7 (55) "Release" means legal termination of the commitment under  
8 the provisions of this chapter.

9 (56) "Resource management services" has the meaning given in  
10 chapter 71.24 RCW.

11 (57) "Responsible other" means the minor, the minor's parent or  
12 estate, or any other person legally responsible for support of the  
13 minor.

14 (58) "Secretary" means the secretary of the department or  
15 secretary's designee.

16 (59) "Secure withdrawal management and stabilization facility"  
17 means a facility operated by either a public or private agency or by  
18 the program of an agency which provides care to voluntary individuals  
19 and individuals involuntarily detained and committed under this  
20 chapter for whom there is a likelihood of serious harm or who are  
21 gravely disabled due to the presence of a substance use disorder.  
22 Secure withdrawal management and stabilization facilities must:

23 (a) Provide the following services:

24 (i) Assessment and treatment, provided by certified substance use  
25 disorder professionals or co-occurring disorder specialists;

26 (ii) Clinical stabilization services;

27 (iii) Acute or subacute detoxification services for intoxicated  
28 individuals; and

29 (iv) Discharge assistance provided by certified substance use  
30 disorder professionals or co-occurring disorder specialists,  
31 including facilitating transitions to appropriate voluntary or  
32 involuntary inpatient services or to less restrictive alternatives as  
33 appropriate for the individual;

34 (b) Include security measures sufficient to protect the patients,  
35 staff, and community; and

36 (c) Be licensed or certified as such by the department of health.

37 (60) "Severe deterioration from safe behavior" means that a  
38 person will, if not treated, suffer or continue to suffer severe and  
39 abnormal mental, emotional, or physical distress, and this distress

1 is associated with significant impairment of judgment, reason, or  
2 behavior.

3 (61) "Social worker" means a person with a master's or further  
4 advanced degree from a social work educational program accredited and  
5 approved as provided in RCW 18.320.010.

6 (62) "Start of initial detention" means the time of arrival of  
7 the minor at the first evaluation and treatment facility, secure  
8 withdrawal management and stabilization facility, or approved  
9 substance use disorder treatment program offering inpatient treatment  
10 if the minor is being involuntarily detained at the time. With regard  
11 to voluntary patients, "start of initial detention" means the time at  
12 which the minor gives notice of intent to leave under the provisions  
13 of this chapter.

14 (63) "Store and forward technology" means use of an asynchronous  
15 transmission of a person's medical information from a mental health  
16 service provider to the designated crisis responder which results in  
17 medical diagnosis, consultation, or treatment.

18 (64) "Substance use disorder" means a cluster of cognitive,  
19 behavioral, and physiological symptoms indicating that an individual  
20 continues using the substance despite significant substance-related  
21 problems. The diagnosis of a substance use disorder is based on a  
22 pathological pattern of behaviors related to the use of the  
23 substances.

24 (65) "Substance use disorder professional" means a person  
25 certified as a substance use disorder professional by the department  
26 of health under chapter 18.205 RCW.

27 (66) "Therapeutic court personnel" means the staff of a mental  
28 health court or other therapeutic court which has jurisdiction over  
29 defendants who are dually diagnosed with mental disorders, including  
30 court personnel, probation officers, a court monitor, prosecuting  
31 attorney, or defense counsel acting within the scope of therapeutic  
32 court duties.

33 (67) "Treatment records" include registration and all other  
34 records concerning persons who are receiving or who at any time have  
35 received services for mental illness, which are maintained by the  
36 department, the department of health, the authority, behavioral  
37 health organizations and their staffs, and by treatment facilities.  
38 Treatment records include mental health information contained in a  
39 medical bill including but not limited to mental health drugs, a  
40 mental health diagnosis, provider name, and dates of service stemming

1 from a medical service. Treatment records do not include notes or  
2 records maintained for personal use by a person providing treatment  
3 services for the department, the department of health, the authority,  
4 behavioral health organizations, or a treatment facility if the notes  
5 or records are not available to others.

6 (68) "Video" means the delivery of behavioral health services  
7 through the use of interactive audio and video technology, permitting  
8 real-time communication between a person and a designated crisis  
9 responder, for the purpose of evaluation. "Video" does not include  
10 the use of audio-only telephone, facsimile, email, or store and  
11 forward technology.

12 (69) "Violent act" means behavior that resulted in homicide,  
13 attempted suicide, injury, or substantial loss or damage to property.

14 **Sec. 28.** RCW 71.34.750 and 2020 c 302 s 94 and 2020 c 185 s 6  
15 are each reenacted and amended to read as follows:

16 (1) At any time during the minor's period of fourteen-day  
17 commitment, the professional person in charge may petition the court  
18 for an order requiring the minor to undergo an additional one hundred  
19 eighty-day period of treatment. The evidence in support of the  
20 petition shall be presented by the county prosecutor unless the  
21 petition is filed by the professional person in charge of a state-  
22 operated facility in which case the evidence shall be presented by  
23 the attorney general.

24 (2) The petition for one hundred eighty-day commitment shall  
25 contain the following:

26 (a) The name and address of the petitioner or petitioners;

27 (b) The name of the minor alleged to meet the criteria for one  
28 hundred eighty-day commitment;

29 (c) A statement that the petitioner is the professional person in  
30 charge of the evaluation and treatment facility, secure withdrawal  
31 management and stabilization facility, or approved substance use  
32 disorder treatment program responsible for the treatment of the  
33 minor;

34 (d) The date of the fourteen-day commitment order; and

35 (e) A summary of the facts supporting the petition.

36 (3) The petition shall be supported by accompanying affidavits  
37 signed by: (a) Two examining physicians, one of whom shall be a child  
38 psychiatrist, or two psychiatric advanced registered nurse  
39 practitioners, one of whom shall be a child and adolescent or family

1 psychiatric advanced registered nurse practitioner. If the petition  
2 is for substance use disorder treatment, the petition may be signed  
3 by a substance use disorder professional instead of a mental health  
4 professional and by an advanced registered nurse practitioner instead  
5 of a psychiatric advanced registered nurse practitioner, or two  
6 physician assistants, one of whom must be supervised by or  
7 collaborating with a child psychiatrist; (b) one children's mental  
8 health specialist and either an examining physician, physician  
9 assistant, or a psychiatric advanced registered nurse practitioner;  
10 or (c) two among an examining physician, physician assistant, and a  
11 psychiatric advanced registered nurse practitioner, one of which  
12 needs to be a child psychiatrist, a physician assistant supervised by  
13 or collaborating with a child psychiatrist, or a child and adolescent  
14 psychiatric nurse practitioner. The affidavits shall describe in  
15 detail the behavior of the detained minor which supports the petition  
16 and shall state whether a less restrictive alternative to inpatient  
17 treatment is in the best interests of the minor.

18 (4) The petition for one hundred eighty-day commitment shall be  
19 filed with the clerk of the court at least three days before the  
20 expiration of the fourteen-day commitment period. The petitioner or  
21 the petitioner's designee shall within twenty-four hours of filing  
22 serve a copy of the petition on the minor and notify the minor's  
23 attorney and the minor's parent. A copy of the petition shall be  
24 provided to such persons at least twenty-four hours prior to the  
25 hearing.

26 (5) At the time of filing, the court shall set a date within  
27 seven days for the hearing on the petition. If the hearing is not  
28 commenced within thirty days after the filing of the petition,  
29 including extensions of time requested by the detained person or his  
30 or her attorney or the court in the administration of justice under  
31 RCW 71.34.735, the minor must be released. The minor or the parents  
32 shall be afforded the same rights as in a fourteen-day commitment  
33 hearing. Treatment of the minor shall continue pending the  
34 proceeding.

35 (6) For one hundred eighty-day commitment:

36 (a) The court must find by clear, cogent, and convincing evidence  
37 that the minor:

38 (i) Is suffering from a mental disorder or substance use  
39 disorder;

1 (ii) Presents a likelihood of serious harm or is gravely  
2 disabled; and

3 (iii) Is in need of further treatment that only can be provided  
4 in a one hundred eighty-day commitment.

5 (b) If commitment is for a substance use disorder, the court must  
6 find that there is an available approved substance use disorder  
7 treatment program that has adequate space for the minor.

8 (7) In determining whether an inpatient or less restrictive  
9 alternative commitment is appropriate, great weight must be given to  
10 evidence of a prior history or pattern of decompensation and  
11 discontinuation of treatment resulting in: (a) Repeated  
12 hospitalizations; or (b) repeated peace officer interventions  
13 resulting in juvenile charges. Such evidence may be used to provide a  
14 factual basis for concluding that the minor would not receive, if  
15 released, such care as is essential for his or her health or safety.

16 (8) (a) If the court finds that the criteria for commitment are  
17 met and that less restrictive treatment in a community setting is not  
18 appropriate or available, the court shall order the minor committed  
19 to the custody of the director for further inpatient mental health  
20 treatment, to an approved substance use disorder treatment program  
21 for further substance use disorder treatment, or to a private  
22 treatment and evaluation facility for inpatient mental health or  
23 substance use disorder treatment if the minor's parents have assumed  
24 responsibility for payment for the treatment. If the court finds that  
25 a less restrictive alternative is in the best interest of the minor,  
26 the court shall order less restrictive alternative treatment upon  
27 such conditions as necessary.

28 (b) If the court determines that the minor does not meet the  
29 criteria for one hundred eighty-day commitment, the minor shall be  
30 released.

31 (9) Successive one hundred eighty-day commitments are permissible  
32 on the same grounds and under the same procedures as the original one  
33 hundred eighty-day commitment. Such petitions shall be filed at least  
34 three days prior to the expiration of the previous one hundred  
35 eighty-day commitment order.

36 **Sec. 29.** RCW 71.34.750 and 2020 c 302 s 95 and 2020 c 185 s 7  
37 are each reenacted and amended to read as follows:

38 (1) At any time during the minor's period of fourteen-day  
39 commitment, the professional person in charge may petition the court

1 for an order requiring the minor to undergo an additional one hundred  
2 eighty-day period of treatment. The evidence in support of the  
3 petition shall be presented by the county prosecutor unless the  
4 petition is filed by the professional person in charge of a state-  
5 operated facility in which case the evidence shall be presented by  
6 the attorney general.

7 (2) The petition for one hundred eighty-day commitment shall  
8 contain the following:

9 (a) The name and address of the petitioner or petitioners;

10 (b) The name of the minor alleged to meet the criteria for one  
11 hundred eighty-day commitment;

12 (c) A statement that the petitioner is the professional person in  
13 charge of the evaluation and treatment facility, secure withdrawal  
14 management and stabilization facility, or approved substance use  
15 disorder treatment program responsible for the treatment of the  
16 minor;

17 (d) The date of the fourteen-day commitment order; and

18 (e) A summary of the facts supporting the petition.

19 (3) The petition shall be supported by accompanying affidavits  
20 signed by: (a) Two examining physicians, one of whom shall be a child  
21 psychiatrist, or two psychiatric advanced registered nurse  
22 practitioners, one of whom shall be a child and adolescent or family  
23 psychiatric advanced registered nurse practitioner. If the petition  
24 is for substance use disorder treatment, the petition may be signed  
25 by a substance use disorder professional instead of a mental health  
26 professional and by an advanced registered nurse practitioner instead  
27 of a psychiatric advanced registered nurse practitioner, or two  
28 physician assistants, one of whom must be supervised by or  
29 collaborating with a child psychiatrist; (b) one children's mental  
30 health specialist and either an examining physician, physician  
31 assistant, or a psychiatric advanced registered nurse practitioner;  
32 or (c) two among an examining physician, physician assistant, and a  
33 psychiatric advanced registered nurse practitioner, one of which  
34 needs to be a child psychiatrist, a physician assistant supervised by  
35 or collaborating with a child psychiatrist, or a child and adolescent  
36 psychiatric nurse practitioner. The affidavits shall describe in  
37 detail the behavior of the detained minor which supports the petition  
38 and shall state whether a less restrictive alternative to inpatient  
39 treatment is in the best interests of the minor.

1 (4) The petition for one hundred eighty-day commitment shall be  
2 filed with the clerk of the court at least three days before the  
3 expiration of the fourteen-day commitment period. The petitioner or  
4 the petitioner's designee shall within twenty-four hours of filing  
5 serve a copy of the petition on the minor and notify the minor's  
6 attorney and the minor's parent. A copy of the petition shall be  
7 provided to such persons at least twenty-four hours prior to the  
8 hearing.

9 (5) At the time of filing, the court shall set a date within  
10 seven days for the hearing on the petition. If the hearing is not  
11 commenced within thirty days after the filing of the petition,  
12 including extensions of time requested by the detained person or his  
13 or her attorney or the court in the administration of justice under  
14 RCW 71.34.735, the minor must be released. The minor or the parents  
15 shall be afforded the same rights as in a fourteen-day commitment  
16 hearing. Treatment of the minor shall continue pending the  
17 proceeding.

18 (6) For one hundred eighty-day commitment, the court must find by  
19 clear, cogent, and convincing evidence that the minor:

20 (a) Is suffering from a mental disorder or substance use  
21 disorder;

22 (b) Presents a likelihood of serious harm or is gravely disabled;  
23 and

24 (c) Is in need of further treatment that only can be provided in  
25 a one hundred eighty-day commitment.

26 (7) In determining whether an inpatient or less restrictive  
27 alternative commitment is appropriate, great weight must be given to  
28 evidence of a prior history or pattern of decompensation and  
29 discontinuation of treatment resulting in: (a) Repeated  
30 hospitalizations; or (b) repeated peace officer interventions  
31 resulting in juvenile charges. Such evidence may be used to provide a  
32 factual basis for concluding that the minor would not receive, if  
33 released, such care as is essential for his or her health or safety.

34 (8) (a) If the court finds that the criteria for commitment are  
35 met and that less restrictive treatment in a community setting is not  
36 appropriate or available, the court shall order the minor committed  
37 to the custody of the director for further inpatient mental health  
38 treatment, to an approved substance use disorder treatment program  
39 for further substance use disorder treatment, or to a private  
40 treatment and evaluation facility for inpatient mental health or

1 substance use disorder treatment if the minor's parents have assumed  
2 responsibility for payment for the treatment. If the court finds that  
3 a less restrictive alternative is in the best interest of the minor,  
4 the court shall order less restrictive alternative treatment upon  
5 such conditions as necessary.

6 (b) If the court determines that the minor does not meet the  
7 criteria for one hundred eighty-day commitment, the minor shall be  
8 released.

9 (9) Successive one hundred eighty-day commitments are permissible  
10 on the same grounds and under the same procedures as the original one  
11 hundred eighty-day commitment. Such petitions shall be filed at least  
12 three days prior to the expiration of the previous one hundred  
13 eighty-day commitment order.

14 **Sec. 30.** RCW 71.34.755 and 2022 c 210 s 21 are each amended to  
15 read as follows:

16 (1) Less restrictive alternative treatment, at a minimum, must  
17 include the following services:

18 (a) Assignment of a care coordinator;

19 (b) An intake evaluation with the provider of the less  
20 restrictive alternative treatment;

21 (c) A psychiatric evaluation, a substance use disorder  
22 evaluation, or both;

23 (d) A schedule of regular contacts with the provider of the less  
24 restrictive alternative treatment services for the duration of the  
25 order;

26 (e) A transition plan addressing access to continued services at  
27 the expiration of the order;

28 (f) An individual crisis plan;

29 (g) Consultation about the formation of a mental health advance  
30 directive under chapter 71.32 RCW; and

31 (h) Notification to the care coordinator assigned in (a) of this  
32 subsection if reasonable efforts to engage the client fail to produce  
33 substantial compliance with court-ordered treatment conditions.

34 (2) Less restrictive alternative treatment may include the  
35 following additional services:

36 (a) Medication management;

37 (b) Psychotherapy;

38 (c) Nursing;

39 (d) Substance use disorder counseling;



- 1 (e) Residential treatment;
- 2 (f) Partial hospitalization;
- 3 (g) Intensive outpatient treatment;
- 4 (h) Support for housing, benefits, education, and employment; and
- 5 (i) Periodic court review.

6 (3) If the minor was provided with involuntary medication during  
7 the involuntary commitment period, the less restrictive alternative  
8 treatment order may authorize the less restrictive alternative  
9 treatment provider or its designee to administer involuntary  
10 antipsychotic medication to the person if the provider has attempted  
11 and failed to obtain the informed consent of the person and there is  
12 a concurring medical opinion approving the medication by a  
13 psychiatrist, physician assistant working with a ~~((supervising))~~  
14 psychiatrist who is acting as a participating physician as defined in  
15 RCW 18.71A.010, psychiatric advanced registered nurse practitioner,  
16 or physician or physician assistant in consultation with an  
17 independent mental health professional with prescribing authority.

18 (4) Less restrictive alternative treatment must be administered  
19 by a provider that is certified or licensed to provide or coordinate  
20 the full scope of services required under the less restrictive  
21 alternative order and that has agreed to assume this responsibility.

22 (5) The care coordinator assigned to a minor ordered to less  
23 restrictive alternative treatment must submit an individualized plan  
24 for the minor's treatment services to the court that entered the  
25 order. An initial plan must be submitted as soon as possible  
26 following the intake evaluation and a revised plan must be submitted  
27 upon any subsequent modification in which a type of service is  
28 removed from or added to the treatment plan.

29 (6) A care coordinator may disclose information and records  
30 related to mental health services pursuant to RCW 70.02.230(2)(k) for  
31 purposes of implementing less restrictive alternative treatment.

32 (7) For the purpose of this section, "care coordinator" means a  
33 clinical practitioner who coordinates the activities of less  
34 restrictive alternative treatment. The care coordinator coordinates  
35 activities with the designated crisis responders that are necessary  
36 for enforcement and continuation of less restrictive alternative  
37 treatment orders and is responsible for coordinating service  
38 activities with other agencies and establishing and maintaining a  
39 therapeutic relationship with the individual on a continuing basis.

1       **Sec. 31.** RCW 74.09.497 and 2017 c 226 s 2 are each amended to  
2 read as follows:

3       (1) By August 1, 2017, the authority must complete a review of  
4 payment codes available to health plans and providers related to  
5 primary care and behavioral health. The review must include  
6 adjustments to payment rules if needed to facilitate bidirectional  
7 integration. The review must involve stakeholders and include  
8 consideration of the following principles to the extent allowed by  
9 federal law:

10       (a) Payment rules must allow professionals to operate within the  
11 full scope of their practice;

12       (b) Payment rules should allow medically necessary behavioral  
13 health services for covered patients to be provided in any setting;

14       (c) Payment rules should allow medically necessary primary care  
15 services for covered patients to be provided in any setting;

16       (d) Payment rules and provider communications related to payment  
17 should facilitate integration of physical and behavioral health  
18 services through multifaceted models, including primary care  
19 behavioral health, whole-person care in behavioral health,  
20 collaborative care, and other models;

21       (e) Payment rules should be designed liberally to encourage  
22 innovation and ease future transitions to more integrated models of  
23 payment and more integrated models of care;

24       (f) Payment rules should allow health and behavior codes to be  
25 reimbursed for all patients in primary care settings as provided by  
26 any licensed behavioral health professional operating within their  
27 scope of practice, including but not limited to psychiatrists,  
28 psychologists, psychiatric advanced registered nurse professionals,  
29 physician assistants working with a (~~supervising~~) psychiatrist who  
30 is acting as a participating physician as defined in RCW 18.71A.010,  
31 psychiatric nurses, mental health counselors, social workers,  
32 chemical dependency professionals, chemical dependency professional  
33 trainees, marriage and family therapists, and mental health counselor  
34 associates under the supervision of a licensed clinician;

35       (g) Payment rules should allow health and behavior codes to be  
36 reimbursed for all patients in behavioral health settings as provided  
37 by any licensed health care provider within the provider's scope of  
38 practice;

39       (h) Payment rules which limit same-day billing for providers  
40 using the same provider number, require prior authorization for low-

1 level or routine behavioral health care, or prohibit payment when the  
2 patient is not present should be implemented only when consistent  
3 with national coding conventions and consonant with accepted best  
4 practices in the field.

5 (2) Concurrent with the review described in subsection (1) of  
6 this section, the authority must create matrices listing the  
7 following codes available for provider payment through medical  
8 assistance programs: All behavioral health-related codes; and all  
9 physical health-related codes available for payment when provided in  
10 licensed behavioral health agencies. The authority must clearly  
11 explain applicable payment rules in order to increase awareness among  
12 providers, standardize billing practices, and reduce common and  
13 avoidable billing errors. The authority must disseminate this  
14 information in a manner calculated to maximally reach all relevant  
15 plans and providers. The authority must update the provider billing  
16 guide to maintain consistency of information.

17 (3) The authority must inform the governor and relevant  
18 committees of the legislature by letter of the steps taken pursuant  
19 to this section and results achieved once the work has been  
20 completed.

21 **Sec. 32.** RCW 9.41.010 and 2023 c 295 s 2, 2023 c 262 s 1, and  
22 2023 c 162 s 2 are each reenacted and amended to read as follows:

23 Unless the context clearly requires otherwise, the definitions in  
24 this section apply throughout this chapter.

25 (1) "Antique firearm" means a firearm or replica of a firearm not  
26 designed or redesigned for using rim fire or conventional center fire  
27 ignition with fixed ammunition and manufactured in or before 1898,  
28 including any matchlock, flintlock, percussion cap, or similar type  
29 of ignition system and also any firearm using fixed ammunition  
30 manufactured in or before 1898, for which ammunition is no longer  
31 manufactured in the United States and is not readily available in the  
32 ordinary channels of commercial trade.

33 (2) (a) "Assault weapon" means:

34 (i) Any of the following specific firearms regardless of which  
35 company produced and manufactured the firearm:

AK-47 in all forms
AK-74 in all forms
Algimec AGM-1 type semiautomatic

1	American Arms Spectre da semiautomatic carbine
2	AR15, M16, or M4 in all forms
3	AR 180 type semiautomatic
4	Argentine L.S.R. semiautomatic
5	Australian Automatic
6	Auto-Ordnance Thompson M1 and 1927 semiautomatics
7	Barrett .50 cal light semiautomatic
8	Barrett .50 cal M87
9	Barrett .50 cal M107A1
10	Barrett REC7
11	Beretta AR70/S70 type semiautomatic
12	Bushmaster Carbon 15
13	Bushmaster ACR
14	Bushmaster XM-15
15	Bushmaster MOE
16	Calico models M100 and M900
17	CETME Sporter
18	CIS SR 88 type semiautomatic
19	Colt CAR 15
20	Daewoo K-1
21	Daewoo K-2
22	Dragunov semiautomatic
23	Fabrique Nationale FAL in all forms
24	Fabrique Nationale F2000
25	Fabrique Nationale L1A1 Sporter
26	Fabrique Nationale M249S
27	Fabrique Nationale PS90
28	Fabrique Nationale SCAR
29	FAMAS .223 semiautomatic
30	Galil
31	Heckler & Koch G3 in all forms
32	Heckler & Koch HK-41/91

1	Heckler & Koch HK-43/93
2	Heckler & Koch HK94A2/3
3	Heckler & Koch MP-5 in all forms
4	Heckler & Koch PSG-1
5	Heckler & Koch SL8
6	Heckler & Koch UMP
7	Manchester Arms Commando MK-45
8	Manchester Arms MK-9
9	SAR-4800
10	SIG AMT SG510 in all forms
11	SIG SG550 in all forms
12	SKS
13	Spectre M4
14	Springfield Armory BM-59
15	Springfield Armory G3
16	Springfield Armory SAR-8
17	Springfield Armory SAR-48
18	Springfield Armory SAR-3
19	Springfield Armory M-21 sniper
20	Springfield Armory M1A
21	Smith & Wesson M&P 15
22	Sterling Mk 1
23	Sterling Mk 6/7
24	Steyr AUG
25	TNW M230
26	FAMAS F11
27	Uzi 9mm carbine/rifle

28 (ii) A semiautomatic rifle that has an overall length of less  
 29 than 30 inches;

30 (iii) A conversion kit, part, or combination of parts, from which  
 31 an assault weapon can be assembled or from which a firearm can be  
 32 converted into an assault weapon if those parts are in the possession  
 33 or under the control of the same person; or

1 (iv) A semiautomatic, center fire rifle that has the capacity to  
2 accept a detachable magazine and has one or more of the following:

3 (A) A grip that is independent or detached from the stock that  
4 protrudes conspicuously beneath the action of the weapon. The  
5 addition of a fin attaching the grip to the stock does not exempt the  
6 grip if it otherwise resembles the grip found on a pistol;

7 (B) Thumbhole stock;

8 (C) Folding or telescoping stock;

9 (D) Forward pistol, vertical, angled, or other grip designed for  
10 use by the nonfiring hand to improve control;

11 (E) Flash suppressor, flash guard, flash eliminator, flash hider,  
12 sound suppressor, silencer, or any item designed to reduce the visual  
13 or audio signature of the firearm;

14 (F) Muzzle brake, recoil compensator, or any item designed to be  
15 affixed to the barrel to reduce recoil or muzzle rise;

16 (G) Threaded barrel designed to attach a flash suppressor, sound  
17 suppressor, muzzle break, or similar item;

18 (H) Grenade launcher or flare launcher; or

19 (I) A shroud that encircles either all or part of the barrel  
20 designed to shield the bearer's hand from heat, except a solid  
21 forearm of a stock that covers only the bottom of the barrel;

22 (v) A semiautomatic, center fire rifle that has a fixed magazine  
23 with the capacity to accept more than 10 rounds;

24 (vi) A semiautomatic pistol that has the capacity to accept a  
25 detachable magazine and has one or more of the following:

26 (A) A threaded barrel, capable of accepting a flash suppressor,  
27 forward handgrip, or silencer;

28 (B) A second hand grip;

29 (C) A shroud that encircles either all or part of the barrel  
30 designed to shield the bearer's hand from heat, except a solid  
31 forearm of a stock that covers only the bottom of the barrel; or

32 (D) The capacity to accept a detachable magazine at some location  
33 outside of the pistol grip;

34 (vii) A semiautomatic shotgun that has any of the following:

35 (A) A folding or telescoping stock;

36 (B) A grip that is independent or detached from the stock that  
37 protrudes conspicuously beneath the action of the weapon. The  
38 addition of a fin attaching the grip to the stock does not exempt the  
39 grip if it otherwise resembles the grip found on a pistol;

40 (C) A thumbhole stock;

1 (D) A forward pistol, vertical, angled, or other grip designed  
2 for use by the nonfiring hand to improve control;

3 (E) A fixed magazine in excess of seven rounds; or

4 (F) A revolving cylinder shotgun.

5 (b) For the purposes of this subsection, "fixed magazine" means  
6 an ammunition feeding device contained in, or permanently attached  
7 to, a firearm in such a manner that the device cannot be removed  
8 without disassembly of the firearm action.

9 (c) "Assault weapon" does not include antique firearms, any  
10 firearm that has been made permanently inoperable, or any firearm  
11 that is manually operated by bolt, pump, lever, or slide action.

12 (3) "Assemble" means to fit together component parts.

13 (4) "Barrel length" means the distance from the bolt face of a  
14 closed action down the length of the axis of the bore to the crown of  
15 the muzzle, or in the case of a barrel with attachments to the end of  
16 any legal device permanently attached to the end of the muzzle.

17 (5) "Bump-fire stock" means a butt stock designed to be attached  
18 to a semiautomatic firearm with the effect of increasing the rate of  
19 fire achievable with the semiautomatic firearm to that of a fully  
20 automatic firearm by using the energy from the recoil of the firearm  
21 to generate reciprocating action that facilitates repeated activation  
22 of the trigger.

23 (6) "Conviction" or "convicted" means, whether in an adult court  
24 or adjudicated in a juvenile court, that a plea of guilty has been  
25 accepted or a verdict of guilty has been filed, or a finding of guilt  
26 has been entered, notwithstanding the pendency of any future  
27 proceedings including, but not limited to, sentencing or disposition,  
28 posttrial or post-fact-finding motions, and appeals. "Conviction"  
29 includes a dismissal entered after a period of probation, suspension,  
30 or deferral of sentence, and also includes equivalent dispositions by  
31 courts in jurisdictions other than Washington state.

32 (7) "Crime of violence" means:

33 (a) Any of the following felonies, as now existing or hereafter  
34 amended: Any felony defined under any law as a class A felony or an  
35 attempt to commit a class A felony, criminal solicitation of or  
36 criminal conspiracy to commit a class A felony, manslaughter in the  
37 first degree, manslaughter in the second degree, indecent liberties  
38 if committed by forcible compulsion, kidnapping in the second degree,  
39 arson in the second degree, assault in the second degree, assault of  
40 a child in the second degree, extortion in the first degree, burglary

1 in the second degree, residential burglary, and robbery in the second  
2 degree;

3 (b) Any conviction for a felony offense in effect at any time  
4 prior to June 6, 1996, which is comparable to a felony classified as  
5 a crime of violence in (a) of this subsection; and

6 (c) Any federal or out-of-state conviction for an offense  
7 comparable to a felony classified as a crime of violence under (a) or  
8 (b) of this subsection.

9 (8) "Curio or relic" has the same meaning as provided in 27  
10 C.F.R. Sec. 478.11.

11 (9) "Dealer" means a person engaged in the business of selling  
12 firearms at wholesale or retail who has, or is required to have, a  
13 federal firearms license under 18 U.S.C. Sec. 923(a). A person who  
14 does not have, and is not required to have, a federal firearms  
15 license under 18 U.S.C. Sec. 923(a), is not a dealer if that person  
16 makes only occasional sales, exchanges, or purchases of firearms for  
17 the enhancement of a personal collection or for a hobby, or sells all  
18 or part of his or her personal collection of firearms.

19 (10) "Detachable magazine" means an ammunition feeding device  
20 that can be loaded or unloaded while detached from a firearm and  
21 readily inserted into a firearm.

22 (11) "Distribute" means to give out, provide, make available, or  
23 deliver a firearm or large capacity magazine to any person in this  
24 state, with or without consideration, whether the distributor is in-  
25 state or out-of-state. "Distribute" includes, but is not limited to,  
26 filling orders placed in this state, online or otherwise.  
27 "Distribute" also includes causing a firearm or large capacity  
28 magazine to be delivered in this state.

29 (12) "Domestic violence" has the same meaning as provided in RCW  
30 10.99.020.

31 (13) "Family or household member" has the same meaning as in RCW  
32 7.105.010.

33 (14) "Federal firearms dealer" means a licensed dealer as defined  
34 in 18 U.S.C. Sec. 921(a)(11).

35 (15) "Federal firearms importer" means a licensed importer as  
36 defined in 18 U.S.C. Sec. 921(a)(9).

37 (16) "Federal firearms manufacturer" means a licensed  
38 manufacturer as defined in 18 U.S.C. Sec. 921(a)(10).



1 (17) "Felony" means any felony offense under the laws of this  
2 state or any federal or out-of-state offense comparable to a felony  
3 offense under the laws of this state.

4 (18) "Felony firearm offender" means a person who has previously  
5 been convicted or found not guilty by reason of insanity in this  
6 state of any felony firearm offense. A person is not a felony firearm  
7 offender under this chapter if any and all qualifying offenses have  
8 been the subject of an expungement, pardon, annulment, certificate,  
9 or rehabilitation, or other equivalent procedure based on a finding  
10 of the rehabilitation of the person convicted or a pardon, annulment,  
11 or other equivalent procedure based on a finding of innocence.

12 (19) "Felony firearm offense" means:

13 (a) Any felony offense that is a violation of this chapter;

14 (b) A violation of RCW 9A.36.045;

15 (c) A violation of RCW 9A.56.300;

16 (d) A violation of RCW 9A.56.310;

17 (e) Any felony offense if the offender was armed with a firearm  
18 in the commission of the offense.

19 (20) "Firearm" means a weapon or device from which a projectile  
20 or projectiles may be fired by an explosive such as gunpowder. For  
21 the purposes of RCW 9.41.040, "firearm" also includes frames and  
22 receivers. "Firearm" does not include a flare gun or other  
23 pyrotechnic visual distress signaling device, or a powder-actuated  
24 tool or other device designed solely to be used for construction  
25 purposes.

26 (21)(a) "Frame or receiver" means a part of a firearm that, when  
27 the complete firearm is assembled, is visible from the exterior and  
28 provides housing or a structure designed to hold or integrate one or  
29 more fire control components, even if pins or other attachments are  
30 required to connect the fire control components. Any such part  
31 identified with a serial number shall be presumed, absent an official  
32 determination by the bureau of alcohol, tobacco, firearms, and  
33 explosives or other reliable evidence to the contrary, to be a frame  
34 or receiver.

35 (b) For purposes of this subsection, "fire control component"  
36 means a component necessary for the firearm to initiate, complete, or  
37 continue the firing sequence, including any of the following: Hammer,  
38 bolt, bolt carrier, breechblock, cylinder, trigger mechanism, firing  
39 pin, striker, or slide rails.

40 (22) "Gun" has the same meaning as firearm.

1 (23) "Import" means to move, transport, or receive an item from a  
2 place outside the territorial limits of the state of Washington to a  
3 place inside the territorial limits of the state of Washington.  
4 "Import" does not mean situations where an individual possesses a  
5 large capacity magazine or assault weapon when departing from, and  
6 returning to, Washington state, so long as the individual is  
7 returning to Washington in possession of the same large capacity  
8 magazine or assault weapon the individual transported out of state.

9 (24) "Intimate partner" has the same meaning as provided in RCW  
10 7.105.010.

11 (25) "Large capacity magazine" means an ammunition feeding device  
12 with the capacity to accept more than 10 rounds of ammunition, or any  
13 conversion kit, part, or combination of parts, from which such a  
14 device can be assembled if those parts are in possession of or under  
15 the control of the same person, but shall not be construed to include  
16 any of the following:

17 (a) An ammunition feeding device that has been permanently  
18 altered so that it cannot accommodate more than 10 rounds of  
19 ammunition;

20 (b) A 22 caliber tube ammunition feeding device; or

21 (c) A tubular magazine that is contained in a lever-action  
22 firearm.

23 (26) "Law enforcement officer" includes a general authority  
24 Washington peace officer as defined in RCW 10.93.020, or a specially  
25 commissioned Washington peace officer as defined in RCW 10.93.020.  
26 "Law enforcement officer" also includes a limited authority  
27 Washington peace officer as defined in RCW 10.93.020 if such officer  
28 is duly authorized by his or her employer to carry a concealed  
29 pistol.

30 (27) "Lawful permanent resident" has the same meaning afforded a  
31 person "lawfully admitted for permanent residence" in 8 U.S.C. Sec.  
32 1101(a)(20).

33 (28) "Licensed collector" means a person who is federally  
34 licensed under 18 U.S.C. Sec. 923(b).

35 (29) "Licensed dealer" means a person who is federally licensed  
36 under 18 U.S.C. Sec. 923(a).

37 (30) "Loaded" means:

38 (a) There is a cartridge in the chamber of the firearm;

39 (b) Cartridges are in a clip that is locked in place in the  
40 firearm;

1 (c) There is a cartridge in the cylinder of the firearm, if the  
2 firearm is a revolver;

3 (d) There is a cartridge in the tube or magazine that is inserted  
4 in the action; or

5 (e) There is a ball in the barrel and the firearm is capped or  
6 primed if the firearm is a muzzle loader.

7 (31) "Machine gun" means any firearm known as a machine gun,  
8 mechanical rifle, submachine gun, or any other mechanism or  
9 instrument not requiring that the trigger be pressed for each shot  
10 and having a reservoir clip, disc, drum, belt, or other separable  
11 mechanical device for storing, carrying, or supplying ammunition  
12 which can be loaded into the firearm, mechanism, or instrument, and  
13 fired therefrom at the rate of five or more shots per second.

14 (32) "Manufacture" means, with respect to a firearm or large  
15 capacity magazine, the fabrication, making, formation, production, or  
16 construction of a firearm or large capacity magazine, by manual labor  
17 or by machinery.

18 (33) "Mental health professional" means a psychiatrist,  
19 psychologist, or physician assistant working with a (~~supervising~~)  
20 psychiatrist who is acting as a participating physician as defined in  
21 RCW 18.71A.010, psychiatric advanced registered nurse practitioner,  
22 psychiatric nurse, social worker, mental health counselor, marriage  
23 and family therapist, or such other mental health professionals as  
24 may be defined in statute or by rules adopted by the department of  
25 health pursuant to the provisions of chapter 71.05 RCW.

26 (34) "Nonimmigrant alien" means a person defined as such in 8  
27 U.S.C. Sec. 1101(a) (15).

28 (35) "Person" means any individual, corporation, company,  
29 association, firm, partnership, club, organization, society, joint  
30 stock company, or other legal entity.

31 (36) "Pistol" means any firearm with a barrel less than 16 inches  
32 in length, or is designed to be held and fired by the use of a single  
33 hand.

34 (37) "Rifle" means a weapon designed or redesigned, made or  
35 remade, and intended to be fired from the shoulder and designed or  
36 redesigned, made or remade, and intended to use the energy of the  
37 explosive in a fixed metallic cartridge to fire only a single  
38 projectile through a rifled bore for each single pull of the trigger.

39 (38) "Sale" and "sell" mean the actual approval of the delivery  
40 of a firearm in consideration of payment or promise of payment.

1 (39) "Secure gun storage" means:

2 (a) A locked box, gun safe, or other secure locked storage space  
3 that is designed to prevent unauthorized use or discharge of a  
4 firearm; and

5 (b) The act of keeping an unloaded firearm stored by such means.

6 (40) "Semiautomatic" means any firearm which utilizes a portion  
7 of the energy of a firing cartridge to extract the fired cartridge  
8 case and chamber the next round, and which requires a separate pull  
9 of the trigger to fire each cartridge.

10 (41)(a) "Semiautomatic assault rifle" means any rifle which  
11 utilizes a portion of the energy of a firing cartridge to extract the  
12 fired cartridge case and chamber the next round, and which requires a  
13 separate pull of the trigger to fire each cartridge.

14 (b) "Semiautomatic assault rifle" does not include antique  
15 firearms, any firearm that has been made permanently inoperable, or  
16 any firearm that is manually operated by bolt, pump, lever, or slide  
17 action.

18 (42) "Serious offense" means any of the following felonies or a  
19 felony attempt to commit any of the following felonies, as now  
20 existing or hereafter amended:

21 (a) Any crime of violence;

22 (b) Any felony violation of the uniform controlled substances  
23 act, chapter 69.50 RCW, that is classified as a class B felony or  
24 that has a maximum term of imprisonment of at least 10 years;

25 (c) Child molestation in the second degree;

26 (d) Incest when committed against a child under age 14;

27 (e) Indecent liberties;

28 (f) Leading organized crime;

29 (g) Promoting prostitution in the first degree;

30 (h) Rape in the third degree;

31 (i) Drive-by shooting;

32 (j) Sexual exploitation;

33 (k) Vehicular assault, when caused by the operation or driving of  
34 a vehicle by a person while under the influence of intoxicating  
35 liquor or any drug or by the operation or driving of a vehicle in a  
36 reckless manner;

37 (l) Vehicular homicide, when proximately caused by the driving of  
38 any vehicle by any person while under the influence of intoxicating  
39 liquor or any drug as defined by RCW 46.61.502, or by the operation  
40 of any vehicle in a reckless manner;

1 (m) Any other class B felony offense with a finding of sexual  
2 motivation, as "sexual motivation" is defined under RCW 9.94A.030;

3 (n) Any other felony with a deadly weapon verdict under RCW  
4 9.94A.825;

5 (o) Any felony offense in effect at any time prior to June 6,  
6 1996, that is comparable to a serious offense, or any federal or out-  
7 of-state conviction for an offense that under the laws of this state  
8 would be a felony classified as a serious offense;

9 (p) Any felony conviction under RCW 9.41.115; or

10 (q) Any felony charged under RCW 46.61.502(6) or 46.61.504(6).

11 (43) "Sex offense" has the same meaning as provided in RCW  
12 9.94A.030.

13 (44) "Short-barreled rifle" means a rifle having one or more  
14 barrels less than 16 inches in length and any weapon made from a  
15 rifle by any means of modification if such modified weapon has an  
16 overall length of less than 26 inches.

17 (45) "Short-barreled shotgun" means a shotgun having one or more  
18 barrels less than 18 inches in length and any weapon made from a  
19 shotgun by any means of modification if such modified weapon has an  
20 overall length of less than 26 inches.

21 (46) "Shotgun" means a weapon with one or more barrels, designed  
22 or redesigned, made or remade, and intended to be fired from the  
23 shoulder and designed or redesigned, made or remade, and intended to  
24 use the energy of the explosive in a fixed shotgun shell to fire  
25 through a smooth bore either a number of ball shot or a single  
26 projectile for each single pull of the trigger.

27 (47) "Substance use disorder professional" means a person  
28 certified under chapter 18.205 RCW.

29 (48) "Transfer" means the intended delivery of a firearm to  
30 another person without consideration of payment or promise of payment  
31 including, but not limited to, gifts and loans. "Transfer" does not  
32 include the delivery of a firearm owned or leased by an entity  
33 licensed or qualified to do business in the state of Washington to,  
34 or return of such a firearm by, any of that entity's employees or  
35 agents, defined to include volunteers participating in an honor  
36 guard, for lawful purposes in the ordinary course of business.

37 (49) "Undetectable firearm" means any firearm that is not as  
38 detectable as 3.7 ounces of 17-4 PH stainless steel by walk-through  
39 metal detectors or magnetometers commonly used at airports or any  
40 firearm where the barrel, the slide or cylinder, or the frame or

1 receiver of the firearm would not generate an image that accurately  
2 depicts the shape of the part when examined by the types of X-ray  
3 machines commonly used at airports.

4 (50)(a) "Unfinished frame or receiver" means a frame or receiver  
5 that is partially complete, disassembled, or inoperable, that: (i)  
6 Has reached a stage in manufacture where it may readily be completed,  
7 assembled, converted, or restored to a functional state; or (ii) is  
8 marketed or sold to the public to become or be used as the frame or  
9 receiver of a functional firearm once finished or completed,  
10 including without limitation products marketed or sold to the public  
11 as an 80 percent frame or receiver or unfinished frame or receiver.

12 (b) For purposes of this subsection:

13 (i) "Readily" means a process that is fairly or reasonably  
14 efficient, quick, and easy, but not necessarily the most efficient,  
15 speedy, or easy process. Factors relevant in making this  
16 determination, with no single one controlling, include the following:  
17 (A) Time, i.e., how long it takes to finish the process; (B) ease,  
18 i.e., how difficult it is to do so; (C) expertise, i.e., what  
19 knowledge and skills are required; (D) equipment, i.e., what tools  
20 are required; (E) availability, i.e., whether additional parts are  
21 required, and how easily they can be obtained; (F) expense, i.e., how  
22 much it costs; (G) scope, i.e., the extent to which the subject of  
23 the process must be changed to finish it; and (H) feasibility, i.e.,  
24 whether the process would damage or destroy the subject of the  
25 process, or cause it to malfunction.

26 (ii) "Partially complete," as it modifies frame or receiver,  
27 means a forging, casting, printing, extrusion, machined body, or  
28 similar article that has reached a stage in manufacture where it is  
29 clearly identifiable as an unfinished component part of a firearm.

30 (51) "Unlicensed person" means any person who is not a licensed  
31 dealer under this chapter.

32 (52) "Untraceable firearm" means any firearm manufactured after  
33 July 1, 2019, that is not an antique firearm and that cannot be  
34 traced by law enforcement by means of a serial number affixed to the  
35 firearm by a federal firearms manufacturer, federal firearms  
36 importer, or federal firearms dealer in compliance with all federal  
37 laws and regulations.

1        NEW SECTION.    **Sec. 33.**    Sections 1 through 8, 10 through 18, 20  
2 through 26, 28, and 30 through 32 of this act take effect January 1,  
3 2025.

4        NEW SECTION.    **Sec. 34.**    Section 18 of this act expires when  
5 section 2, chapter 210, Laws of 2022 takes effect.

6        NEW SECTION.    **Sec. 35.**    Section 19 of this act takes effect when  
7 section 18 of this act expires.

8        NEW SECTION.    **Sec. 36.**    Section 26 of this act expires when  
9 section 13, chapter 433, Laws of 2023 takes effect.

10       NEW SECTION.    **Sec. 37.**    Section 27 of this act takes effect when  
11 section 26 of this act expires.

12       NEW SECTION.    **Sec. 38.**    Section 28 of this act expires July 1,  
13 2026.

14       NEW SECTION.    **Sec. 39.**    Section 29 of this act takes effect July  
15 1, 2026.

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