
HOUSE BILL 1718

State of Washington

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2025 Regular Session

By Representatives Thai, Shavers, Parshley, Zahn, and Scott

Read first time 01/29/25. Referred to Committee on Health Care & Wellness.

1 AN ACT Relating to well-being programs for certain health care
2 professionals; amending RCW 18.130.020 and 18.130.070; and adding a
3 new section to chapter 18.130 RCW.

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

5 **Sec. 1.** RCW 18.130.020 and 2018 c 300 s 3 are each amended to
6 read as follows:

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

9 (1) "Board" means any of those boards specified in RCW
10 18.130.040.

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

15 (3) "Commission" means any of the commissions specified in RCW
16 18.130.040.

17 (4)(a) "Conversion therapy" means a regime that seeks to change
18 an individual's sexual orientation or gender identity. The term
19 includes efforts to change behaviors or gender expressions, or to
20 eliminate or reduce sexual or romantic attractions or feelings toward

1 individuals of the same sex. The term includes, but is not limited
2 to, practices commonly referred to as "reparative therapy."

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

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

9 (6) "Disciplinary action" means sanctions identified in RCW
10 18.130.160.

11 (7) "Disciplining authority" means the agency, board, or
12 commission having the authority to take disciplinary action against a
13 holder of, or applicant for, a professional or business license upon
14 a finding of a violation of this chapter or a chapter specified under
15 RCW 18.130.040.

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

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

22 (10)(a) "Physician well-being program" means a formal program
23 established for the purpose of addressing issues related to career
24 fatigue and well-being in physicians licensed under chapter 18.71
25 RCW, osteopathic physicians and surgeons licensed under chapter 18.57
26 RCW, and physician assistants licensed under chapter 18.71A RCW,
27 that:

28 (i) Uses primarily one-on-one, peer-to-peer interactions and
29 connects participants to physical and behavioral health resources and
30 professional supports when appropriate;

31 (ii) Is limited to no more than three sessions per participant
32 every 12 months;

33 (iii) May include discussions pertaining to career fatigue and
34 wellness arising from the physician's professional obligations, but
35 not for other purposes such as evaluation, discipline, quality
36 improvement, or the identification and prevention of medical
37 malpractice;

38 (iv) Is established in writing or contracted for, in advance of
39 any peer-to-peer interactions or referrals, by an employer of
40 physicians and physician assistants, a nonprofit professional medical

1 organization representing a specialty of physicians, or a statewide
2 organization representing physicians and physician assistants;

3 (v) Does not allow as participants any person employed by, or
4 with a financial ownership interest in, the program; and

5 (vi) Does not include the monitoring of physicians who may be
6 unable to practice medicine with reasonable skill and safety.

7 (b) A quality improvement plan established under RCW 43.70.510 or
8 70.41.200 is not a physician well-being program for purposes of this
9 section. RCW 43.70.510 and 70.41.200 therefore do not apply to a
10 physician well-being program established under this section.

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

17 ~~((11))~~ (12) "Secretary" means the secretary of health or the
18 secretary's designee.

19 ~~((12))~~ (13) "Standards of practice" means the care, skill, and
20 learning associated with the practice of a profession.

21 ~~((13))~~ (14) "Unlicensed practice" means:

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

25 (b) Representing to a consumer, through offerings,
26 advertisements, or use of a professional title or designation, that
27 the individual is qualified to practice a profession or operate a
28 business identified in RCW 18.130.040, without holding a valid,
29 unexpired, unrevoked, and unsuspended license to do so.

30 **Sec. 2.** RCW 18.130.070 and 2022 c 43 s 9 are each amended to
31 read as follows:

32 (1)(a) The secretary shall adopt rules requiring every license
33 holder to report to the appropriate disciplining authority any
34 conviction, determination, or finding that another license holder has
35 committed an act which constitutes unprofessional conduct, or to
36 report information to the disciplining authority, physician health
37 program, or voluntary substance use disorder monitoring program
38 approved by the disciplining authority, which indicates that the
39 other license holder may not be able to practice his or her

1 profession with reasonable skill and safety to consumers as a result
2 of a mental or physical condition.

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

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

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

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

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

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

37 (ii) A physician health program or voluntary substance use
38 disorder monitoring program approved by a disciplining authority
39 under RCW 18.130.175 if the license holder is currently enrolled in
40 the program, so long as the license holder actively participates in

1 the program and the license holder's impairment does not constitute a
2 clear and present danger to the public health, safety, or welfare; or
3 (iii) A physician well-being program, so long as the license
4 holder is competent to practice with reasonable skill and safety. If
5 the license holder is not competent to practice with reasonable skill
6 and safety, or if a patient has been harmed, the license holder shall
7 be reported by the physician wellness program medical director or
8 other licensee to the disciplining authority according to
9 requirements established and adopted in rule by the Washington
10 medical commission or, if permitted by rule, referred to a physicians
11 health program or voluntary substance use disorder monitoring program
12 approved under RCW 18.130.175.

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

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

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

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

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

30 (b) Failure to report within thirty days of notice of the
31 conviction, determination, finding, or disqualification constitutes
32 grounds for disciplinary action.

33 NEW SECTION. Sec. 3. A new section is added to chapter 18.130
34 RCW to read as follows:

35 (1)(a) Physician well-being program records relating to well-
36 being program participants created specifically for, and collected
37 and maintained by the physician well-being program, are confidential
38 and exempt from disclosure under chapter 42.56 RCW and shall not be
39 subject to discovery by subpoena or admissible as evidence. This

1 privilege does not protect information, communications, or documents
2 available from other original sources and does not protect any
3 document outside the scope of the privilege established under this
4 section.

5 (b) Nothing in this section precludes introduction into evidence
6 information about a license holder collected and maintained in a
7 physician well-being program in any civil action by the license
8 holder regarding:

9 (i) The individual's participation in the program;

10 (ii) The restriction of the license holder's clinical or staff
11 privileges when a report has been made under RCW
12 18.130.070(1)(d)(iii); or

13 (iii) Termination of the license holder's employment when a
14 report has been made under RCW 18.130.070(1)(d)(iii).

15 (c) The information admitted under (b) of this subsection must
16 not be reasonably discoverable, given the scope and limits of
17 discovery, from other nonprivileged sources.

18 (2) This section does not apply to the organizing documents or
19 contracts establishing a physician wellness program or to records
20 created prior to the establishment of the physician well-being
21 program.

22 (3) In the case that the license holder is unable to practice
23 with reasonable skill and safety or a patient has been harmed, a
24 report must be made to the disciplinary authority or the physicians
25 health program or voluntary substance use disorder monitoring program
26 approved by a disciplining authority under RCW 18.130.175 in
27 accordance with RCW 18.130.070(1)(d)(iii) and rules adopted by the
28 Washington medical commission.

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