

## Washington State Board of Nursing Legislative Panel Bill Report: February 19, 2025

Possible Panel Positions:

Support Supp	ort Concept	Neutral	Concerns	Oppose
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# 2025 Legislative Session Cutoff Calendar:

	House of Origin				
January 13	First day of regular session				
February 21	Must pass Policy Committee				
February 28	Must pass Fiscal Committee				
March 12	Must pass House of Origin				
	Opposite House				
April 2	Must pass Policy Committee				
April 8	Must pass Fiscal Committee				
April 16	Must pass Opposite House				
End of Session					
April 27	Concurrence, Dispute, Conference Committee				
April 27	Sine die (last day of regular session)				

# **WABON Request Legislation**

Bill	Prime Sponsor(s)	Title	Brief Description	Status	WABON Action
<u>SB 5051</u>	Sen. Bateman  Sens. Riccelli, Cleveland, Nobles, Wellman	Consolidating regulatory	<ul> <li>Transfers discipline and credentialing regulatory authority for nursing assistants from DOH to WABON</li> <li>Adds two new CNA members to the Board of Nursing and converts one LPN member to an RN or LPN member with experience as an NA educator</li> </ul>	Passed the Senate (2/7): 49 yeas, 0 nays Referred to Health Care & Wellness	Testify in Support (H&LTC 1/21)
Companion HB 1792	Rep. Obras  Rep. Stonier, Parshley, Wylie, Reed	authority for nursing assistants	<ul> <li>Repeals RCW 18.88A.100. This outdated section applied only to individuals who filed an application for waiver by December 31, 1991</li> <li>Updates several definitions throughout the impacted statutes to align with the transition, including one that preserves WABON's disciplinary authority for NAs credentialed under Chapter 18.88A but are working as long-term care workers</li> </ul>	Referred to Health Care & Wellness	

### **House Bills**

Bill	Sponsor(s)	Title	Brief Description	Status	Position	WABON Action
<u>HB 1022</u> *F	Rep. Connors  Reps. McClintock, Low, Barkis, Reeves, Schmidt, Marshall, Taylor, Barnard, Klicker, Reed, Alvarado, Shavers, Eslick, Fosse, Simmons, Peterson	Creating a homes for heroes program	Creates a pilot program to provide assistance to targeted occupations to encourage relocation to and homeownership in Washington state (includes nurses licensed under chapter 18.79 RCW).  SUB: Added paraeducators as defined in RCW 28.A.413.010 to the list of eligible professions.	Public Hearing: House Committee on Capital Budget – 2/20, 1:30p	Neutral	
HB 1038	Rep. Jacobsen  Reps. Marshall, McEntire, Ley, Walsh, Schmidt, Eslick	Prohibiting puberty blocking medications, cross-sex hormones, and gender transition surgeries for minors	Restricts healthcare providers from performing certain gender-related medical procedures on minors, such as prescribing puberty blockers, hormones, or performing surgeries for gender transition. Exceptions are allowed for minors with medically verified sex development disorders or for treatments related to physical health issues, like infections or injuries. The bill defines "gender" as psychological, behavioral, and social traits, while "sex" is defined biologically. Limits gender-affirming procedures for minors unless specific medical conditions are present.	Referred to Health Care & Wellness	Concerns	
<u>HB 1049</u> *F	Rep. Shavers  Reps. Leavitt, Berry, Reed, Doglio, Fosse, Simmons, Hill, Goodman, Wylie, Pollet, Duerr, Nance, Davis, Ormsby, Reeves	Increasing the availability of sexual assault nurse examiners	Creates a stipend program in DOH to defray the out-of-pocket expenses incurred by RNs completing the training necessary to become adult/adolescent or pediatric sexual assault nurse examiners. The total amount of the stipend for any individual nurse may not exceed \$2,500.	Referred to House Appropriations	Support Concept	
<u>HB 1077</u>	Rep. Walen  Reps. Ryu, Leavitt, Ramel, Berry, Duerr, Reed, Taylor, Macri, Callan, Gregerson, Wylie, Pollet, Ormsby, Reeves, Bernbaum, Hill	Raising awareness of pain control options for intrauterine device placement and removal	Amends chapter 18.130 RCW to require health care providers to notify all patients seeking IUD placement or removal of the types of pain control options available prior to or at the time of scheduling the appointment for IUD intrauterine device placement or removal.	Public Hearing: Health Care & Wellness – 1/24, 8:00a	Neutral	Sign-in Other (1/23)

Bill	Sponsor(s)	Title	Brief Description	Status	Position	WABON Action
<u>HB 1124</u> *F	Rep. Simmons  Reps. Macri, Senn, Stonier, Ormsby, Tharinger, Kloba, Duerr, Ryu, Hill, Morgan, Reed, Callan, Obras, Doglio, Ortiz-Self, Goodman, Reeves	Establishing a prescribing psychologist certification in Washington state	Creates a prescribing psychologist certification. A licensed psychologist may apply for certification as a prescribing psychologist if they:  1) hold a current license as a psychologist; 2) hold a doctorate degree obtained from an integrated program of graduate study in psychology; 3) have completed a master's degree program in psychopharmacology; 4) have completed at least 80 hours of supervised experience in physical assessment; 5) have completed a supervised clinical prescribing fellowship comprised of at least 500 hours and 100 individual patients; and 6) pass an	Referred to Health Care & Wellness	Neutral	
Companion SB 5112	Sen. Bateman  Sens. Harris, Shewmake, Trudeau, Conway, Nobles, Riccelli, Wilson, Robinson		examination in prescribing competence developed by a nationally recognized organization and approved by the Examining Board of Psychology.  Allows prescribing psychologists, within scope of their license, to delegate to RNs.	Public Hearing: Health & Long-Term Care – 2/13, 8:00a		
<u>HB 1129</u> *F	Reps. Macri, Street, Shavers, Farivar, Simmons, Tharinger, Parshley, Obras, Fosse, Reeves, Bernbaum, Mena, Fey, Taylor, Berry, Pollet, Entenman, Alvarado, Reed, Fitzgibbon, Callan, Cortes, Timmons, Ortiz-Self, Hill, Peterson, Berg, Goodman, Wylie, Ormsby, Lekanoff, Salahuddin	Concerning health plan coverage of fertility- related services	Mandates the coverage of fertility-related services in certain health plans in Washington state, with specific provisions for group health plans, employee health plans, and Medicaid.  Effective January 1, 2026, all group health plans and employee health plans issued or renewed on or after January 1, 2026, must include coverage for standard fertility preservation services. These services are for individuals who may face fertility risks due to medical conditions or treatments like surgery, chemotherapy, or radiation.  Effective January 1, 2027, group health plans and employee health plans issued or renewed on or after January 1, 2027, must include coverage for the diagnosis of and treatment for	SUB Adopted:  1. Removes small group health plans from the provisions of the bill  2. Includes ARNPs and PAs in relevant sections	Support Concept	Request Amendment (1/23)
Companion SB 5121	Sen. Frame  Sens. Cleveland, Bateman, Cortes, Liias, Nobles, Orwall, Pedersen, Riccelli, Saldaña, Valdez, Wellman, Wilson, C.		Requires Medicaid to cover standard fertility preservation services for individuals who are at risk of infertility due to medical conditions or treatments.	Public Hearing: Health & Long-Term Care – 1/24, 8:00a		Request Amendment (1/23) Testify (Quiana testified 1/24)

Bill	Sponsor(s)	Title	Brief Description	Status	Position	WABON Action
<u>HB 1162</u> *F	Rep. Leavitt  Reps. Schmidt, Berry, Ryu, Macri, Bronoske, Pollet, Nance, Timmons, Ormsby, Hill		Amends RCW 49.19.020 to require that each health care setting develop and implement a workplace violence prevention plan to be reviewed annually as opposed to once every three years.  New section requires every health care setting to conduct a timely investigation of every workplace violence incident and submit a quarterly report to the health care setting's respective	Public Hearing: Appropriations – 2/5, 4:00p		
Companion SB 5162	Sen. Lovick  Sen. Saldaña, Bateman, Dhingra, Hasegawa, Nobles, Pedersen, Robinson, Salomon, Stanford, Valdez, Wilson, C.	Concerning workplace violence in health care settings	SHB 1162 SUB: The bill requires healthcare settings to submit a "summary" with specific elements to their safety committees, instead of a full "report." It changes the submission frequency for certain hospitals to twice a year, including those with fewer than 25 acute care beds, and sole community hospitals not part of a larger health system. The bill removes references to HIPAA, instead mandating that personal information be deidentified in line with federal and state laws, without superseding other privacy regulations. Additionally, the bill's effective date is postponed to January 1, 2026, instead of 90 days after the legislative session concludes.	Referred to Labor & Commerce	Support	
<u>HB 1176</u>	Rep. Walsh  Reps. Corry, Jacobsen, Couture, Marshall	Concerning greater consistency in the provision of health care services for minors under the age of 17	Amends several statutes to increase the age of consent for minors receiving health care from 13 years or older to 17 years or older. These heath care services include outpatient treatment, substance use treatment, behavioral and mental health services, reproductive services, and treatment for sexually transmitted diseases.	Referred to Health Care & Wellness	Oppose	
<u>HB 1186</u>	Rep. Parshley  Rep. Rule, Low, Reed, Ramel, Macri, Obras, Farivar, Doglio, Fosse, Ormsby, Salahuddin, Bernbaum, Hill	Expanding the situations in which medications can be dispensed or delivered	Amends RCW 70.41.480 to include HIV postexposure prophylaxis drugs, anti-infectives, and drugs that come prepackaged by the manufacturer for patients being released from hospital emergency departments to maintain access to emergency medications when community or hospital pharmacy services are not available. Amends the 48-hour supply limit to except anti-infectives and drugs or therapies packaged directly by the manufacturer in quantities larger than a 48-hour supply.	Placed on second reading.	Support Concept	
Companion SB 5019	Sen. Chapman  Sens. Bateman, Christian, Dhingra, Harris, Riccelli, Saldaña, Slatter, Wellman	from hospitals and health care entities	Amends RCW 18.64.450 to provide the same exceptions to the 72-hour limit for legend drugs and controlled substances. <b>SUB</b> : Specifies that the drug or therapy cannot be altered to limit the quantity of the drug or therapy to a 48-hour or 72-hour supply to be dispensed or delivered by the hospital or health care entity.	Substitute adopted. Do pass, referred to Rules.	2330	

Bill	Sponsor(s)	Title	Brief Description	Status	Position	WABON Action
<u>HB 1430</u>	Rep. Simmons  Reps. Leavitt, Macri, Thai, Tharinger, Parshley, Reeves, Alvarado, Pollet, Rule, Hill, Stonier, Berg, Street, Goodman, Ormsby, Mena, Farivar, Entenman, Fosse, Callan, Davis, Ramel, Taylor, Fey, Lekanoff, Berry, Reed, Shavers, Cortes, Salahuddin	Concerning advanced practice registered nurse and physician assistant reimbursement	Starting January 1, 2026, it requires health carriers to reimburse advanced registered nurse practitioners and physician assistants at the same rate as they would reimburse physicians for the same services.  SUB: Prohibits health carriers from paying contracted physicians more through non-claims-based payments if those payments are not also available to ARNPs or PAs. It ensures ARNPs and PAs are reimbursed at least the same amount as physicians for the same service in the same area. The bill also modifies data collection requirements for the Office of the Insurance Commissioner, allowing data collection from both health carriers and the all-payer claims database. Removes the reference to the definition of "service area" in the Washington Administrative Code and instead provides a definition for "service area."	Substitute adopted. Do pass, referred to Rules.	Support Concept	Letter of Support Concept (1/27)
HB 1521	Rep. Rule  Reps. Callan, Taylor, Hunt, Davis, Reed, Simmons, Springer, Hill, Thai, Timmons	Supporting caregivers who provide complex care services to children with heightened medical	Requires the Health Care Authority to pay home health agencies (HHAs) for complex care services provided as part of the private duty nursing benefit to children under 18.  The HHA employing the caregiver must cover the cost of the training and cannot require the caregiver to reimburse these costs. Caregivers who complete the required training can change employers without needing to repeat the training, as long as they continue to meet the qualifications.	Referred to Health Care & Wellness	Neutral	Request Amendment (1/27)
Companion SB 5504	Sen. Chapman  Sens. Harris, Cortes, Saldaña, Trudeau, Valdez	needs	Requires HCA to seek a state plan amendment or waiver, as applicable, from CMS to implement this section.  By September 1, 2029, HCA must submit a report evaluating the program's effectiveness, including data on its impact, without requiring additional data submissions from HHAs.	Public Hearing: Health & Long-Term Care – 2/11, 10:30a		Request Amendment (1/27)
<u>HB 1567</u> *F	Rep. Stonier  Reps. Fosse, Parshley, Ryu, Salahuddin, Macri, Mena, Berry, Obras, Taylor, Reed, Stearns, Nance, Gregerson, Ortiz- Self, Hill, Scott, Farivar, Peterson	Concerning licensure of health care administrators	Establishes a new license type for Health Care Administrators. DOH is given the authority to establish rules, issue licenses, conduct audits, and set requirements for continuing education. It will also oversee the licensing process, including creating examinations and application procedures. To obtain a license, applicants must pass an examination, pay a fee, and meet other requirements set by the DOH. The bill also outlines the process for license renewal, including continuing education requirements.  The bill defines what constitutes "unprofessional conduct" for health care administrators. This includes making fiscal or operational decisions that harm patients or create risks to patient safety, failing to supervise staff adequately, and making decisions that impede clinical providers from following standards of care.	Public Hearing: Health Care & Wellness – 2/5, 1:30p	Neutral	Request Amendment (2/4)

Bill	Sponsor(s)	Title	Brief Description	Status	Position	WABON Action
<u>HB 1638</u>	Rep. Caldier	Enacting the good faith pain act	Provides protection from criminal and civil liability for ARNPs, physicians, physician assistants, dentists, and pharmacists who dispense prescription opioid drugs, after confirming that a prescription is valid, if the prescription opioid drugs were prescribed for legitimate medical purposes in the course of professional practice to a patient with chronic pain who has presented such a prescription and has been provided with consultation.	Referred to Health Care & Wellness	Concerns	
<u>HB 1720</u>	Rep. Schmick Rep. Low	Expanding the types of medication assistance that may be provided to residents of community-based care settings	Amends the definition of "Medication Assistance" under RCW 69.41.010 to cover more diabetes-related tasks (such as setting up devices like insulin pumps or handing injectable medications) while removing the specific exception for prefilled insulin syringes.  SUB: Technical amendment to clarify application of "legend drugs."	Substitute adopted. Do pass, referred to Rules.	Support Concept	Testify (2/11)
<u>HB 1780</u>	Rep. Marshall Reps. Schmidt, Eslick	Promoting accurate communications between patients and health care providers	Constitutes unprofessional conduct for an advanced registered nurse practitioner (ARNP) or physician assistant (PA) to refer to themselves as a "doctor" while providing care to a patient in a clinical setting.	Referred to Health Care & Wellness	Concerns	Request Amendment (Pending hearing)
<u>HB 1784</u>	<b>Rep. Marshall</b> Rep. Parshley, Schmidt	Concerning certified medical assistants	Allows a medical assistant-certified (MA) to enter and approve health care orders in an entry-order system, under certain conditions. MAs can enter and approve an order, but only if they have explicit instructions from a supervising healthcare practitioner (the practitioner must review the order on the same business day and countersign it within 72 hours). MAs cannot make clinical judgments and must follow the practitioner's instructions. MAs must undergo annual training on using orderentry systems, including when to ask for clarification from the supervising practitioner and ensuring compliance with regulations.  Amends the UDA to clarify that the entry and approval of orders is not a task that requires the exercise of judgment based on clinical experience.	Executive Session: Health Care & Wellness – 2/18, 1:30p	Concerns	Letter of Concern (2/10) Amendment Request (2/13)

Bill	Sponsor(s)	Title	Brief Description	Status	Position	WABON Action
HB 1876	Rep. Peterson  Rep. Rude, Doglio, Parshley, Simmons, Ormsby, Ramel, Hill, Macri, Pollet	Concerning the requirements for accessing the Washington death with dignity act	Defines "irremediable pain or suffering" to mean pain or other physical symptoms related to a patient's terminal disease that cannot be reasonably managed or significantly alleviated by available treatment.  Amends RCW 70.245.090 to provide a new exemption to the 7-day waiting period for the second oral request. This exemption applies if, at the time of the initial oral request, the attending qualified medical provider determines that the patient:  • Will not survive for seven days.  • Will not retain the ability to self-administer the medication for seven days.  • Is experiencing "irremediable pain or suffering."  Amends RCW 70.245.230 to add restrictions for when a physician assistant is involved as a qualified medical provider. If a patient selects a physician assistant as the attending qualified medical provider or consulting qualified medical provider, the other qualified medical provider may not have a supervisory relationship with them.	Executive Sessions: Early Learning & Human Services – 2/18, 1:30p Early Learning & Human Services – 2/19, 1:30p Early Learning & Human Services – 2/21, 8:00a	Support Concept	
<u>HB 1888</u> *F	Rep. Berg  Reps. Walen, Wylie, Doglio, Ryu, Parshley, Goodman, Santos, Morgan, Duerr, Ramel, Hill, Macri	Concerning naturopathic physician scope of practice	Expands the scope of practice for naturopathic physicians (NDs) to allow them to prescribe and administer legend drugs and controlled substances contained in Schedules III through V, and stimulant medications in Schedule II, of the Uniform Controlled Substances Act, chapter 69.50 RCW, as necessary in the practice of naturopathy.  Amends RCW 18.36A 22 to allow an ND to sign and attest to any certificates, cards, forms, or other required documentation that a physician may sign, so long as it is within the naturopathic physician's scope of practice. This includes, but is not limited to, disability determinations, physician orders for life-sustaining treatment, hospice orders, student athletic forms, guardianships, powers of attorney, and similar legal documents.	Referred to Health Care & Wellness	Neutral	

### **Senate Bills**

Bill	Sponsor(s)	Title	Brief Description	Status	Position	WABON Action
<u>SB 5201</u> *F	Sen. Salomon  Sens. Nobles, Bateman, King, Trudeau, Lovelett, Frame, Chapman, Hasegawa, Wellman, Holy, Saldaña, Schoesler, Wilson J.		Establishes wellness model-based psilocybin services and establishes DOH authority to license, regulate, and enforce all provisions. Psilocybin can only be administered to a person 21 years of age or older in an approved setting, under the supervision of a licensed psilocybin facilitator or clinical facilitator. The bill designates a program development period	Referred to Labor & Commerce w/o recommendation  Public Hearing: Labor & Commerce – 2/18, 10:30a		
Companion HB 1433	Rep. Macri  Reps. Couture, Ramel, Griffey, Lekanoff, Ormsby, Nance, Walen, Cortes, Fosse, Doglio, Reeves, Goodman, Rude, McEntire, Pollet, Bernbaum, Waters, Street, Gregerson	Concerning access to psychedelic substances	from Sept. 1, 2025 – Sept. 1, 2027, during which DOH is to establish an 11-member Psychedelic Substances Board to advise DOH, conduct rulemaking, and establish educational trainings.  Creates professional credential types for Facilitators, Associate Facilitators, Clinical Facilitators, Associate Clinical Facilitators, and Service Center Operators, and a facility credential type for Service Centers.	Public Hearing: Health Care & Wellness – 2/5, 1:30p	Concerns	
<u>SB 5236</u> *F	Sen. Slatter  Sens. Harris, Nobles, Shewmake	Concerning emissions of greenhouse gases used for anesthetic purposes	The Department of Ecology is tasked with commissioning a study to identify the sources, usage, and emissions of potent anesthetic gases. The study will also recommend ways to reduce or eliminate these emissions and potential points of regulation.  By January 2027, the Department of Ecology, in consultation with the Department of Health, must submit legislative recommendations on reducing emissions from these gases, potentially including bans on specific gases.  By April 2027, the Department of Ecology must publish a guidance document aimed at reducing emissions from anesthetic gases. This document will be developed in consultation with WABON and other organizations. It must allow flexibility for medical professionals to prioritize patient safety.  Starting January 2028, facilities and practitioners using anesthetic gases must follow the published guidance document; however, no penalties will be issued for non-compliance.	Substitute adopted. Do pass, referred to Ways & Means.  SUB Adopted:  Extends legislative reporting timeframes from 10/1/26 to 1/1/27.  Adds nursing to provisions where medical, dental, and veterinary practitioners are included.  Replaces the Association of Anesthetists with the American Association of Nurse Anesthesiology.	Neutral	

Bill	Sponsor(s)	Title	Brief Description	Status	Position	WABON Action
SB 5240	Sen. Wellman  Sens. Slatter, Boehnke, Hasegawa, Nobles, Stanford, Trudeau, Wilson C.	Concerning anaphylaxis medications in schools	Authorizes a school nurse or designated trained school personnel to utilize any available epinephrine on school property to respond to an anaphylactic reaction.  Adds a provision that, in the event a school nurse or other school employee administers any available epinephrine on school property, the school district or private school must reimburse the cost of the epinephrine to the owner if it is not school-owned epinephrine.  Requires entities that provide a training course for preventing and responding to a student experiencing anaphylaxis to issue certificates to individuals who complete the training program.  SUB: Limits liability in the event that a school nurse or other school employee administers epinephrine in substantial compliance with the written policies of the school district or private school and the policies are aligned with the standing protocol.	Substitute adopted. Do pass, referred to Rules.	Concerns	Letter of Concerns (1/27)  Letter of Concerns (2/10)
<u>SB 5242</u> *F	Sen. Orwall  Sens. Harris, Hasegawa, Krishnadasan, Nobles, Valdez, Shewmake, Wilson C.	Establishing an interactive screening program to improve access to behavioral health resources for health care providers	Creates an interactive screening program available to all licensed health professionals in Washington. The program would provide confidential services with a counselor who may provide a referral for treatment.  Adds an annual surcharge to the licensing fee for every licensed health professional subject to chapter 18.130 RCW. The amount of the surcharge must be uniform across professions and set by the secretary in rule.	Public Hearing: Health & Long-Term Care – 1/28, 10:30a	Support Concept	Letter of Support Concept (1/27)
<u>SB 5244</u>	Sen. Riccelli (DOH ARL) Sens. Bateman, Nobles, Saldaña, Wilson C.	Providing an exemption for women, infants, and	Expands the scope of permitted activities for Women, Infants, and Children (WIC) clinic staff. Amends RCW 18.360.090 to allow	Placed on second reading consent calendar		
Companion HB 1693	Rep. Zahn (DOH ARL) Reps. Thai, Bernbaum, Reed, Hunt, Salahuddin	children program staff to perform hematological screening tests	WIC clinic staff to conduct hematological tests using heel-stick, toe-stick, or finger-stick sampling methods.	Referred to Health Care & Wellness	Neutral	

Bill	Sponsor(s)	Title	Brief Description	Status	Position	WABON Action
<u>SB 5270</u>	Sen. Wellman  Sens. Cleveland, Nobles, Valdez, Wilson, C.	Providing mentors to novice nurses in the	Amends RCW 28A.415.265 to require school districts that receive funding for the Beginning Educator Support Team	Public Hearing: Early Learning & K-12 Education – 1/29, 10:30a	Support	
Companion HB 1352	Rep. Bernbaum  Reps. Eslick, Cortes, Nance	beginning educator support team program	Program to prioritize and provide a trained, qualified mentor for any novice school nurse employed by the district.	Referred to Education	Concept	
<u>SB 5271</u> *F	Sen. Wellman  Sens. Slatter, Nobles, Valdez, Shewmake	Requiring school districts of the first class to employ a school nurse	Authorizes school districts of the second class to employ a registered nurse or advanced registered nurse practitioner to protect the health of students.  Requires school districts of the first class to employ a school nurse. Defines "school nurse" as a registered nurse or an advanced registered nurse practitioner who holds a valid educational staff associate certificate for school nurses.	Public Hearing: Early Learning & K-12 Education – 1/29, 10:30a	Neutral	
<u>SB 5299</u>	Sen. Riccelli  Sens. Muzzall, Dozier, Nobles, Krishnadasan	Concerning general supervision of diagnostic radiologic technologists,	Defines "virtual direct supervision," for the purposes of this act, to mean supervision of a procedure that is furnished under the overall direction and control of a physician, but where the physician is not required to be physically present during the performance of the procedure. The physician performing general supervision must be within 30 miles to respond to on-site	Substitute adopted. Do pass, referred to Rules.		Request Amendment (1/27)
<u>HB 1546</u>	Rep. Parshley  Reps. Schmick, Ryu,  Macri	therapeutic radiologic technologists, and magnetic resonance imaging technologists by licensed physicians	Allows Diagnostic Radiologic Technologists and MRI Technologists to perform intravenous contrast procedures under virtual supervision.  SUB: Replaces the term general supervision with virtual direct supervision. Changes the supervising physician presence requirement from 15 minutes to 30 miles within the facility.	Executive Session postponed.	Neutral	Request Amendment (2/7)

Bill	Sponsor(s)	Title	Brief Description	Status	Position	WABON Action
<u>SB 5335</u> *F	Sen. Slatter  Sens. Harris, Bateman, Chapman, Hasegawa, Holy, Krishnadasan, Nobles, Salomon, Trudeau, Valdez	Establishing the rural nursing education program	Establishes the Rural Nursing Education Program (RNEP) within DOH to address nursing shortages in rural and underserved areas. DOH is tasked with developing selection criteria and a program application, as well as collaborating with several key rural health partners in the development of a remote RNEP to address barriers and provide support services to assist participants in learning, living, and working within their rural communities.  By November 1, 2026, and every two years thereafter, DOH is required to submit a preliminary report to the legislature detailing the demographics and number of participants, preceptors, and clinical faculty training participants of the program.  SUB: Declares that this act is necessary for the immediate preservation of the public peace, health, or safety, or support of the state government and its existing public institutions, and takes effect July 1, 2025.	Substitute adopted. Do pass, referred to Ways & Means.	Support Concept	Testify (1/30)
<u>SB 5557</u> *F	Sen Krishnadasan  Sens. Dhingra, Kauffman, Slatter, Wilson, C., Saldaña, Orwall, Lovelett, Stanford, Cortes, Frame, Hasegawa, Liias, Nobles, Pedersen, Trudeau, Valdez	Codifying emergency rules to protect the right of a pregnant person to access treatment for emergency medical conditions in hospital emergency departments	Codifies current DOH emergency rules on the same subject: WSR 25-03-056. If a pregnant person presents at the hospital with an emergency medical condition, the hospital must provide treatment that aligns with the standard of care for that condition. If the hospital is unable to provide the necessary treatment, including termination of the pregnancy, then they must transfer the patient to another hospital capable of doing so with the patient's informed consent.  The bill clarifies that neither the continuation of the pregnancy nor the health of the embryo/fetus can be used as a reason to withhold care from the pregnant person. The health and safety of the pregnant person must be prioritized over the health of the embryo/fetus, unless the pregnant person consents to any alternative treatment plan.  Hospitals must also follow the provisions of 42 U.S.C. Sec.1395dd (which is part of the Emergency Medical Treatment and Labor Act) as it existed on January 1, 2025.	Public Hearing: Health & Long-Term Care – 2/7, 8:00a	Support Concept	

Bill	Sponsor(s)	Title	Brief Description	Status	Position	WABON Action
<u>SB 5713</u> *F	Sen. Fortunato	Concerning chemical abortion	Allows for civil damages against those who perform or prescribe chemical abortions in violation of informed consent requirements. Providers must give patients written information about potential complications and financial liability for injury, death, or side effects, including the right to inform healthcare providers of complications without legal consequences. Patients must certify in writing that they have received and reviewed this information before the abortion. Providers must retain this certification.  Defines key terms like "abortion-inducing drug," "chemical abortion," and "complication."  Mandates DOH to create a reporting system for abortion pill providers and facilities, tracking the delivery of required information and reporting cases where the information was not provided due to medical emergencies.	Referred to Law & Justice	Oppose	

**END OF REPORT** 

### **Monitor List**

Bill	Sponsor(s)	Title	Brief Description	Status
HB 1023	Rep. Ryu			
*F	Rep. Leavitt, Schmidt, Jacobsen, Reed, Eslick, Doglio, Simmons, Berg, Reeves, Donaghy	Adopting the cosmetology licensure compact	Adopts the cosmetology licensure compact and introduces a multistate license to practice cosmetology in member states.	Do pass, referred to Rules.
<u>HB 1072</u> *F	Rep. Walen  Reps. Leavitt, Reeves, Berg, Ryu, Ramel, Reed, Callan, Goodman, Pollet, Nance, Ormsby, Lekanoff, Hill	Relating to preserving access to protected health care services by requiring department of health review of certain health care business transactions which could affect access to protected health care services while balancing access to community health services	Grants DOH the authority to approve, approve with conditions or modifications, or deny health care business transactions; gives authority to the attorney general to enjoin qualifying health care business transactions not approved or approved with conditions or modifications by DOH; and directs the collection of data and provision of information, analysis, and reporting regarding access to protected health care services.	Referred to Health Care & Wellness
HB 1114 *F	Rep. Leavitt  Reps. Ybarra, Schmidt, Ryu, Reed, Macri, Doglio, Simmons, Ormsby, Hill	Concerning the respiratory care interstate compact	Establishes a respiratory care interstate compact to facilitate the interstate practice of respiratory therapy with the goal of improving public access to respiratory therapy services by providing respiratory therapists licensed in a member state the ability to practice in other member states.	Do pass, referred to Rules.
HB 1121	Rep. McClintock  Rep. Schmidt,  Jacobsen, Orcutt	Concerning restrictions on the working conditions and hours of sixteen- and seventeen-year-olds	Directs the Department of Labor and Industries to revise the current rules outlining the hours sixteen- and seventeen-year-olds may work during school weeks to allow them to work the same number of hours during school weeks as permitted during non-school weeks. <b>SUB</b> : Delays the effective date of the bill until July 1, 2026.	Substitute adopted. Do pass, referred to Rules.
	Rep. Macri (DSHS ARL) Reps. Ryu, Reed, Callan,		Updates language in RCW 18.88B from "individual provider" to "long-term care worker" in order to standardize basic training and certification requirements for long-term care workers who provide in-home care for family members.	Passed the House (2/6): 88 yeas, 8 nays
HB 1142	Farivar, Simmons, Street, Ormsby, Lekanoff, Reeves, Hill, Tharinger	Standardizing basic training and	SHB 1142 SUB: Adds a begin by date of July 1, 2026, for the requirement that a spouse or registered domestic	Referred to Health & Long-Term Care
Companion	Sen. Bateman (DSHS ARL)	certification requirements for long-term care workers who provide in-home care for their family members, including spouses or domestic partners	partner who is a long-term care worker providing in-home care only for a spouse or domestic partner must receive 15 hours of basic training, and at least six hours of additional focused training based on the care receiving spouse's or partner's needs, within the first 120 days after becoming an in-home long-term care worker.	
<u>SB 5100</u>	Sens. Conway, Cortes, Hasegawa, Nobles, Saldaña, Valdez		Requires, until July 1, 2026, a long-term care worker providing approved services only for a spouse or registered domestic partner and funded through the United States department of veterans affairs home and community-based programs to receive 35 hours of training within the first 120 days after becoming a long-term care worker.	Referred to Health & Long-Term Care

Bill	Sponsor(s)	Title	Brief Description	Status
<u>HB 1155</u>	Rep. Berry  Reps. Walen, Ramel, Reed, Ryu, Alvarado, Mena, Macri, Farivar, Fosse, Simmons, Peterson, Goodman, Pollet, Kloba, Ormsby, Salahuddin, Hill	Prohibiting noncompetition agreements	Makes all noncompetition covenants void and unenforceable in Washington. Creates a violation if an employer enforces, attempts to enforce, or threatens to enforce against an employee or worker subject to any agreement under this chapter, to represent that the employee or worker is subject to an agreement prohibited under this chapter, or to enter into or attempt to enter into an agreement with an employee or worker that is prohibited by this chapter. Requires nonsolicitation agreements to be narrowly construed.  SHB 1155 SUB: Delays the effective date of the bill to June 30, 2026. Provides that employer	Substitute adopted. Do pass, pending referral.
Companion SB 5437	Sen. Stanford  Sens. Dhingra, Saldaña, Valdez, Riccelli, Conway, Frame, Hasegawa, Nobles, Ramos, Shewmake	agreements	notices must be sent to employees and independent contractors by October 1, 2026 (rather than October 1, 2025, as provided in the underlying bill).  2. Replaces references to "prohibited agreements" with "noncompetition covenants" to provide for consistent use of terms in the underlying bill.  3. Removes language stating that a cause of action under the applicable statute cannot be brought prior to the effective date of the bill but otherwise retains language providing that legal proceedings commenced before the effective date of the bill will be governed by the statute as amended prior to the effective of the bill.	Public Hearing: Labor & Commerce – 2/18, 10:30a
HB 1173	Rep. Bronoske  Reps. Berry, Reed, Ramel, Obras, Fosse, Simmons, Ortiz-Self, Goodman, Gregerson, Pollet, Nance, Ormsby, Lekanoff, Hill	Concerning wages for journeypersons in high-hazard facilities	Amends the criteria under the definition of a "Skilled Journeyperson" in high hazard facilities.  The amended language requires that "the worker is being paid at least a rate consistent with the prevailing rate of wage for a worker in the applicable occupation and geographic area."	Do pass, referred to Rules
Companion SB 5447	Sen. Saldaña  Sens. Hasegawa, Nobles, Stanford, Valdez			Referred to Labor & Commerce
HB 1190 *F	Rep. Marshall  Reps. Leavitt, Jacobsen, Couture, Barkis, Timmons	Allowing additional health professions to access the University of Washington health sciences library	Adds psychological associates and mental health counselor associates to the list enumerated professions under RCW 43.70.110(3)(b). This allows these professions to access to selected vital clinical resources, medical journals, decision support tools, and evidence-based reviews of procedures, drugs, and devices.	Passed the House (1/30): 96 yeas; 0 nays  Referred to Senate Health & Long-Term Care
HB 1220	Rep. Farivar  Reps. Macri, Reed, Obras, Doglio, Simmons, Pollet, Davis, Ormsby, Salahuddin, Hill	Relating to appropriate response to assaults by individuals in behavioral health crisis	Provides an exception for what constitutes third degree assault against health care providers. The exception applies to individuals detained or pending an evaluation for detention under chapters 71.05 and 71.34 RCW; detained for behavioral health treatment under chapter 10.77 RCW; or is receiving or in the process of seeking voluntary in-patient behavioral health treatment.	Do pass, referred to Rules.

Bill	Sponsor(s)	Title	Brief Description	Status
HB 1280	Rep. Shavers (OSPI ARL)  Reps. Leavitt, Salahuddin, Bergquist, Reed, Paul, Pollet, Simmons, Hill	Concerning career and technical	Expands funding opportunities for career and technical education (CTE) courses based on full-time equivalent student enrollment in middle schools. School districts may only receive	Referred to House Appropriations
Companion SB 5358	Sen. Braun  Sens. Chapman, Christian, Cortes, Liias, MacEwen, Nobles, Salomon, Wellman, Wilson, C.	education in sixth grade	funding for middle school CTE courses (grades 6-8) if these courses are part of a coordinated program that offers a clear, nonduplicative progression of CTE opportunities from middle school to high school.	Do pass, referred to Ways & Means.
<u>HB 1879</u>	<b>Rep. Thomas</b> Rep. Berry	Concerning meal and rest breaks for hospital workers	Amends the statute related to meal and rest breaks for health care facility employees. Allows employers and employees to agree to waive certain meal and rest period requirements under specific conditions.	Executive Session: Labor & Workplace Standards – 2/18, 10:30a
<u>SB 5005</u> *F	Sen. Saldaña  Sens. Frame, Hasegawa, Liias, Lovelett, Nobles, Orwall, Salomon, Valdez, Wellman, Wilson, C.		Creates a seven-member Jail Oversight Board that would administer a statewide uniform jail reporting system. The board would create and monitor compliance with statewide jail standards, as well as investigate and report on systemic problems affecting inmates.  SHB 5005 SUB: Replaces the Jail Oversight Board with the Washington Jail Council, located	Substitute adopted. Do pass, referred to Ways & Means.
Companion HB 1424	Rep. Obras  Reps. Farivar, Simmons, Ryu, Parshley, Peterson, Reed, Ramel, Gregerson, Goodman, Doglio, Cortes, Fey, Fosse, Leavitt, Street, Hill, Macri, Scott	Concerning transparency, public safety, and independent oversight of the city, county, and regional jail system in WA state	within the Governor's Office, and adjusts related responsibilities. It eliminates the uniform jail report system in favor of an annual jail survey and clarifies that the council will monitor jails for compliance with their own policies and applicable laws. The bill also removes advisory councils, the requirement for triannual jail monitoring, and the obligation to publish reports within two months of visits. It includes a provision ensuring that council investigations do not interfere with ongoing criminal investigations and modifies access provisions to require timely delivery of jail records, with potential extensions, and mandates relevant agencies to provide necessary information to the council.	Referred to Community Safety

Bill	Sponsor(s)	Title	Brief Description	Status
<u>SB 5116</u>	Sen. Christian  Sens. Riccelli, Frame, Krishnadasan, Lovick, Nobles, Shewmake, Wilson	Concerning the immediate use of marriage licenses for medical necessity	Requires county auditors to issue marriage licenses at the time of application in the event that a written statement from a physician licensed to practice medicine in WA that one or both of the applicants is at risk of imminent death or incapacity is first provided to the county auditor.	Public Hearing: Law & Justice – 2/17, 10:30a  Executive Session: Law & Justice – 2/20, 10:30a
<u>SB 5163</u> *F	Sen. Orwall  Sens. Shewmake, Dhingra, Conway, Cleveland, Wellman, Riccelli, Hasegawa, Saldaña, Valdez, Nobles, Wilson, C.	Modernizing the child fatality statute	Amends RCW 70.05.170(3)(b) to allow local health departments and DOH to retain identifiable information and geographic information on each case for the purposes of determining trends, performing analysis over time, and for quality improvement efforts. Also includes technical language amendments to change instances of "mortality" to "fatality."  Adds requirements for providers to provide medical records related to the child, autopsy reports, medical examiner reports, coroner reports, social services records, and other data	Public Hearing: Ways & Means – 2/17, 4:00p
Companion HB 1459	Rep. Bernbaum  Reps. Fey, Leavitt, Stonier, Wylie, Davis, Reed, Parshley		requested for specific child fatality reviews upon request of the local health department.  SSB 5163 SUB: Expands that disclosures are not required if such disclosure would violate state law.	Do pass, referred to Appropriations.
<u>SB 5200</u>	Sen. Wagoner Sens. Christian, Fortunato	Relating to veterans' medical foster homes	Exempts medical foster homes as defined in 38 C.F.R. 17.73 from the operation of chapter 70 RCW.  SUB: Specifies that the operator and its caregivers are in compliance with applicable state laws including any required training, certification, and background checks for a medical foster home that is exempt from state's adult family home licensure requirements.	Substitute adopted. Do pass, referred to Rules.
<u>SB 5204</u> *F	Sen. Salomon Sens. Trudeau, Nobles	Concerning ibogaine-assisted therapy	Aims to explore the effectiveness of ibogaine as a treatment for opioid use disorder. Directs the University of Washington to conduct a three-year, prospective, randomized cohort study. This study will assess the effectiveness of ibogaine-assisted therapy, conducted in a licensed clinic in Mexico, in comparison to traditional U.S. treatments for opioid use disorder, such as medication-assisted treatment and psychotherapy.	Public Hearing: Health & Long-Term Care – 2/6, 8:00a
<u>SB 5233</u> *F	Sen. Hasegawa  Sens. Bateman, Chapman, Dhingra, Liias, Lovelett, Nobles, Saldaña, Shewmake, Stanford, Trudeau		Establishes the Washington Health Trust (WHT) in DOH with the purpose of creating a single comprehensive benefits package covering essential health benefits to be financed by the trust.	Referred to Health & Long-Term Care
Companion HB 1445	Rep. Parshley  Reps. Scott, Berry, Doglio, Farivar, Alvarado, Reed, Ramel, Wylie, Goodman, Cortes, Macri, Fosse, Ormsby, Pollet, Hill, Simmons	Developing the Washington health trust	Establishes a 17-member board of trustees to govern the WHT.	Referred to Health Care & Wellness

Bill	Sponsor(s)	Title	Brief Description	Status
SB 5254	Sen. Orwall  Sens. Trudeau, Frame, Nobles, Valdez, Wilson C.			Public Hearing: Health & Long-Term Care – 2/4, 10:30a
Companion HB 1496	Rep. Berry  Reps. Bronoske, Abbarno, Lekanoff, Doglio, Peterson, Reed, Griffey, Simmons, Goodman, Parshley, Ormsby, Fosse, Pollet, Hill, Salahuddin, Scott	Strengthening patients' rights regarding their health care information	Regulates the fees that healthcare providers and facilities can charge for providing access to a patient's health care information. Establishes a fee cap of \$50 for charges associated with providing health care information and allows a patient to designate a personal representative, person, or entity to receive health care information.	Referred to Health Care & Wellness
<u>SB 5273</u> *F	Sen. Orwall  Sens. Cleveland, Dhingra, Hasegawa, Krishnadasan, Nobles, Saldaña, Salomon, Wilson, Shewmake, Slatter	Relating to the availability of community violence prevention and intervention services	Allocates funding for programs offering violence prevention and intervention services to individuals at risk of or who have experienced violent injury or chronic exposure to violence. These services will be provided by trained community violence professionals.	Public Hearing: Health & Long-Term Care – 2/20, 8:00a
<u>SB 5275</u> *F	Sen. Nobles  Sen. Slatter, Hasegawa, Liias, Saldaña, Valdez, Wilson, C.	Modifying the funding for the passport to careers program	Modifies funding and award levels for the Passport to Careers Program. The scholarship is \$5,000 annually beginning in the 2025–26 academic year and may increase annually by the tuition growth factor defined in RCW 28B.92.030; however, the scholarship may not exceed the student's financial need.  Permits students eligible for the Passport to Careers Program to automatically qualify as income-eligible for the purpose of receiving the Washington College Grant.	Do pass, referred to Ways & Means.
SB 5318	Sen. Kauffman (DSHS ARL) Sens. Nobles, Orwall, Wilson, C.	Concerning fingerprint-based	Reenacts and amends RCW 43.43.837 to require applicants working unsupervised as a DSHS or DCYF long-term care worker to be fingerprinted. Authorizes DSHS to require an applicant to submit fingerprints for the purposes of investigating conviction records through WSP at any time they apply for the listed positions covered in this act. Provides a definition of "long-term care worker" for the purposes of this act.	Do pass, referred to Ways & Means.
Companion HB 1490	Rep. Obras (DSHS ARL) Reps. Gregerson, Peterson, Cortes	background checks	SUB: Adds specificity and definitions to the provisions outlining the current roles and circumstances that require a fingerprint-based background check and establishes background check requirements for those working in transitional care facilities.	Substitute adopted. Do pass, referred to Appropriations.

Bill	Sponsor(s)	Title	Brief Description	Status
SB 5321	Sen. Nobles  Sen. Bateman, Chapman, Cleveland, Dhingra, Frame, Harris, Hasegawa, Krishnadasan, Lovelett, Lovick, Orwall, Riccelli, Salomon, Slatter, Stanford, Trudeau, Valdez, Wilson, C.	Concerning access at public postsecondary educational institutions to medication abortion	By the start of the 2026-2027 academic year, all student health centers at public institutions of higher education must offer access to medication abortion. This can be done either through telehealth services, on-campus providers, or public programs connecting students to reproductive health services.  Each institution must maintain a website with clear, accessible information about reproductive health services, including options for pregnancy termination, prenatal care, and behavioral health. This site must also include instructions for scheduling appointments and information on requesting academic accommodations related to pregnancy or medical recovery.  SUB: Establishes that referrals made by public institutions of higher education without a student health center must include at least one telehealth organization. Requires the comprehensive health services website that the public institutions of higher education must maintain have an unbroken link and accurate description that directs students to the abortion page of the sexual and reproductive health section of the DOH's website. Makes a technical change clarifying that all public institutions of higher education, rather than institutions of higher education, must maintain a comprehensive health services website.	Substitute adopted. Do pass, referred to Ways & Means.
<u>SB 5344</u>	Sen. Riccelli  Sens. Harris, Liias, Lovick, Cleveland, Lovelett, Saldaña		Establishes the Essential Worker Health Care program in DSHS to provide nursing home workers with high quality, affordable health coverage through participating nursing home employers.  SB 5344 SUB: Makes several items subject to appropriations, including the Essential Worker	Substitute adopted. Do pass, referred to Ways & Means.
*F  Companion HB 1523	Rep. Macri  Reps. Low, Lekanoff, Fosse, Thai, Farivar, Berry, Doglio, Davis, Peterson, Reed, Simmons, Ormsby, Parshley, Pollet, Hill, Salahuddin, Scott	Establishing the essential worker health care program	Health Care program, DSHS' duties for supplemental payments, and OIC's responsibilities for certifying health care benefit arrangements. DSHS must submit the necessary application to CMS within six months of funding rather than by July 2025. It shifts focus from how entities participate to how they offer employee benefits through a qualified health fund. The term "employees in the long-term care industry" is clarified to include long-term care workers and nursing home employees. Definitions for multiemployer welfare arrangements and association health plans are added. The emergency clause and program effective date are removed, along with OIC's enforcement role. DSHS no longer needs to report progress by December 2025, and provisions related to CMS approval by July 2026, along with contingency requirements for supplemental payments, are also removed.	Referred to Health Care & Wellness
<u>SB 5493</u>	Sen. Riccelli  Sen. Robinson, Conway, Nobles, Ramos, Stanford, Valdez, Wilson, C.	Concerning hospital price transparency	This bill requires hospitals to provide transparency for the cost of services and medical supplies via an accessible, searchable listing posted to the hospital's website, supplied to patients, and submitted to the Department of Health (department). Additionally, it limits hospital collection efforts to patients for services/supply costs that have not been disclosed, provides patients with a dispute/complaint venue for those charges and collection efforts. It also encourages licensed healthcare professionals to provide an estimate of fees and charges related to the health services provided.	Public Hearing: Health & Long-Term Care – 2/13, 8:00a

Bill	Sponsor(s)	Title	Brief Description	Status
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00.5504	Sen. Cleveland			Dublic Hearing.
SB 5561	Sens. Hasegawa, Nobles, Valdez		their structure, ownership, and financials. These reports will be made available to the public	Public Hearing: Health & Long-Term Care – 2/4, 10:30a
	Rep. Bronoske	Creating a health care entity registry	and can be used to analyze trends in the health care market. Health care entities that do not comply with these reporting requirements could face significant fines, and DOH will have the	
Companion HB 1686	Reps. Fosse, Reed, Scott, Nance, Hill, Macri		authority to audit and enforce compliance	Executive Session: Health Care & Wellness – 2/19, 1:30p