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## SUBSTITUTE HOUSE BILL 1045

State of Washington 64th Legislature 2015 Regular Session

By House Health Care & Wellness (originally sponsored by Representatives Tharinger, Harris, Van De Wege, Rodne, Moeller, Clibborn, Cody, G. Hunt, Jinkins, Gregerson, Santos, and Riccelli)

- 1 AN ACT Relating to the practice of East Asian medicine; amending
- 2 RCW 18.06.140; and adding a new section to chapter 18.06 RCW.
- 3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 4 <u>NEW SECTION.</u> **Sec. 1.** A new section is added to chapter 18.06 5 RCW to read as follows:
- The Washington state East Asian medicine advisory committee is established.
  - (1) The committee consists of five members, each of whom must be a resident of the state of Washington. Four committee members must be East Asian medicine practitioners licensed under this chapter who have not less than five years' experience in the practice of East Asian medicine and who have been actively engaged in practice within two years of appointment. The fifth committee member must be appointed from the public at large and must have an interest in the rights of consumers of health services.
- 16 (2) The secretary shall appoint the committee members. Committee
  17 members serve at the pleasure of the secretary. The secretary may
  18 appoint members of the initial committee to staggered terms of one to
  19 three years, and thereafter all terms are for three years. No member
  20 may serve more than two consecutive full terms.

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(3) The committee shall meet as necessary, but no less often than once per year. The committee shall elect a chair and a vice chair. A majority of the members currently serving constitutes a quorum.

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- (4) The committee shall advise and make recommendations to the secretary on standards for the practice of East Asian medicine.
- (5) Committee members must be compensated in accordance with RCW 43.03.240, including travel expenses in carrying out his or her authorized duties in accordance with RCW 43.03.050 and 43.03.060.
- (6) Committee members are immune from suit in an action, civil or criminal, based on the department's disciplinary proceedings or other official acts performed in good faith.
- 12 **Sec. 2.** RCW 18.06.140 and 2010 c 286 s 9 are each amended to 13 read as follows:
  - (1) ((Every person licensed under this chapter shall develop a written plan for consultation, emergency transfer, and referral to other health care practitioners operating within the scope of their authorized practices. The written plan shall be submitted with the initial application for licensure as well as annually thereafter with the license renewal fee to the department. The department may withhold licensure or renewal of licensure if the plan fails to meet the standards contained in rules adopted by the secretary.
  - (2))) When a person licensed under this chapter sees patients with potentially serious disorders such as cardiac conditions, acute abdominal symptoms, and such other conditions, the practitioner shall immediately request a consultation or recent written diagnosis from a primary health care provider licensed under chapter 18.71, 18.57, 18.57A, 18.36A, or 18.71A RCW or RCW 18.79.050. In the event that the patient with the disorder refuses to authorize such consultation or provide a recent diagnosis from such primary health care provider, East Asian medical treatments, including acupuncture, may only be continued after the patient signs a written waiver acknowledging the risks associated with the failure to pursue treatment from a primary health care provider. The waiver must also include: (a) explanation of an East Asian medicine practitioner's scope practice, including the services and techniques East Asian medicine practitioners are authorized to provide and (b) a statement that the services and techniques that an East Asian medicine practitioner is authorized to provide will not resolve the patient's underlying

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1 potentially serious disorder. The requirements of the waiver shall be 2 established by the secretary in rule.

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- (2) In an emergency, a person licensed under this chapter shall:

  (a) Initiate the emergency medical system by calling 911; (b) request an ambulance; and (c) provide patient support until emergency response arrives.
  - (3) A person violating this section is guilty of a misdemeanor.

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