WAC 246-843-010 General definitions. The definitions in this section apply throughout this chapter unless the context clearly requires otherwise:

(1) "Active administrative charge" means direct participation in the operating concerns of a nursing home. Operating concerns include, but are not limited to, interaction with staff and residents, liaison with the community, liaison with regulatory agencies, pertinent business and financial responsibilities, planning and other activities as identified in the most current job analysis published by the National Association of Boards of Examiners for the Long Term Care Administrators.

(2) "Administrator-in-training (AIT)" means an individual in a nursing home administrator-in-training program approved by the board.

(3) "Collocated facilities" means more than one licensed facility that are located in the same building or on the same premises, interconnected by a common entrance or other means of access, and operated as a single entity, whether or not there are intersecting streets. Other criteria to qualify as a collocated facility would be determined by the regulatory agencies, pertinent business and financial responsibilities, planning and other activities as identified in the most current job analysis published by the National Association of Boards of Examiners for the Long Term Care Administrators.

(4) "Department" means the department of health.
(5) "On-site, full-time administrator" means an individual in active administrative charge of one nursing home facility or collocated facilities, as licensed under chapter 18.51 RCW, a minimum of four days and an average of forty hours per week. An "on-site, full-time administrator" in nursing homes with small resident populations, in rural areas, or in nursing homes with small resident populations when the nursing home has converted some of its licensed nursing facility bed capacity for use as assisted living or enhanced assisted living services under chapter 74.39A RCW is an individual in active administrative charge of one nursing home facility, or collocated facilities, as licensed under chapter 18.51 RCW:

(a) A minimum of four days and an average of twenty hours per week at facilities with one to thirty nursing home beds; or

(b) A minimum of four days and an average of thirty hours per week at facilities with thirty-one to forty-nine nursing home beds.

(6) "Person" means an individual and does not include the terms firm, corporation, institutions, public bodies, joint stock associations, and other such entities.

(7) "Recognized institution of higher learning" is a degree granting institution that is:

(a) Accredited by an organization recognized by the council for higher education accreditation (CHEA) and is included in the CHEA list recognized accrediting organizations; or

(b) Accredited by an organization recognized by the United States Department of Education (USDOE) and is included in the USDOE Database of Accredited Postsecondary Institutions and Programs; or

(c) A foreign institution with a program that the board has found to be the equivalent of programs approved by CHEA or by the USDOE. The transcript must also be evaluated and found to be valid and the academic program the equivalent of programs approved by CHEA or the USDOE, by:

(i) An organization that is a current member of the National Association of Credential Evaluation Services (NACES); or

(ii) An organization that is a current member of the Association of International Credential Evaluators, Inc. (AICE).

(8) "Secretary" means the secretary of the department of health or the secretary's designee.

WAC 246-843-070 Examination. (1) The applicant for nursing home administrator licensure must take:

(a) The National Association of Long Term Care Administrator Boards (NAB) nursing home administrator examination;

(b) If the applicant was licensed prior to 1986, the examination offered by professional examination services (PES).

(2) An applicant for a nursing home administrator license must earn a scaled score of one hundred thirteen on the current NAB national examination.

(3) The applicant must be notified about their examination score in writing.

(a) The board and the department must not disclose the applicant's score to anyone other than the applicant, unless requested to do so in writing by the candidate.

(b) The board shall keep a permanent record of the result of the examination for each applicant.

WAC 246-843-071 Application. Applicants for licensure as a nursing home administrator must meet the following requirements:

(1) Be at least twenty-one years old.

(2) Complete an application for licensure provided by the department that includes all information and payment of fees as required in chapter 246-12 WAC, Part 2 and WAC 246-843-990.

(3) Submit documentation of successful completion of a baccalaureate degree from a recognized institution of higher learning.

(4) Submit verification of successful completion of seven hours of AIDS education and training as required in chapter 246-12 WAC, Part 8.

(5) Satisfy training requirements by:

(a) Successfully completing an AIT program as described in WAC 246-843-090 and 246-843-091; or

(b) Meeting the requirements for an AIT exemption described in WAC 246-843-093; or

(c) Meeting the endorsement requirements described in WAC 246-843-230; or

(d) Meeting the requirements for returning to active status described in WAC 246-843-180.

(6) Successfully pass the examination as described in WAC 246-843-070.

(7) If an applicant is required to take an administrator-in-training program, the applicant may concurrently earn their degree but must submit proof of enrollment in a degree program at a recognized institution of higher learning. The transcript showing successful completion of the degree, sent directly from the institution, must be received before the applicant is approved to take the current NAB national examination.
WAC 246-843-090 Administrator-in-training program. To qualify for a nursing home administrator license, an applicant must successfully complete a board approved nursing home administrator-in-training (AIT) program as described below:

1. The AIT program must:
   a. Be under the guidance and supervision of a qualified preceptor;
   b. Be designed to provide for individual learning experiences and instruction based upon the person's academic background, training, and experience;
   c. Provide for a broad range of experience with a close working relationship between preceptor and AIT. A sponsoring facility of less than fifty beds will be considered for an AIT program only if there is a board approved plan to broaden the AIT experience with an equal percentage of experience in a larger facility;
   d. Be described in a prospectus signed by the preceptor. The prospectus shall include a description of the rotation through departments. The prospectus must be approved by the board before the AIT program start date.

2. The AIT program prospectus shall include the following components:
   a. A minimum of ninety percent of the required AIT program hours are spent in a rotation through each department of a resident occupied nursing home licensed under chapter 18.51 RCW or a Washington state veterans home established under chapter 72.36 RCW;
   b. The remaining ten percent of the AIT program will include:
      i. A written project assignment including at least one problem-solving assignment to improve the nursing home or nursing home procedures. A description of the project must be submitted in writing to the board and approved before the AIT program start date. The description of the project should indicate the definition of the project and method of approach such as data gathering. A project report that includes possible alternatives, conclusions, and final recommendations to improve the facility or procedure is to be submitted to the board for approval at least ten days before the scheduled end date of the AIT program;
      ii. Planned reading and writing assignments as designated by the preceptor; and
      iii. Other planned learning experiences including learning about other health and social services agencies in the community.
   3. The AIT program must be approved by the board before the AIT may begin the program.

4. Quarterly written reports to the board shall include a detailed outline of AIT activities during the reporting period. Reports must be submitted by both the AIT and preceptor.

5. Changes in the AIT program, including a change of preceptor, facility or topic, must be immediately reported in writing to the board. A request for change must be in writing and explain why the change is needed. The request must be co-signed by the AIT and the approved preceptor. In cases where the preceptor is no longer available, the request may be signed by the governing body. Only two changes for the duration of the AIT program will be allowed.

6. A site visit by a board member will take place before the program plan is considered complete.

7. The board may withdraw approval or alter conditions under which approval was given if the board finds that the approved program has not been or is not being followed.

WAC 246-843-091 Length of AIT program. An applicant must complete a one thousand five hundred hour AIT program. The program length may be reduced based on the following:

1. A one thousand hour AIT program may be granted for individuals with a minimum of:
   a. Two years' experience as a department manager in a state licensed nursing home or hospital with demonstrated supervisory and budgetary responsibility;
   b. Five years' experience working in a nursing home;
   c. A four year degree program in health administration or nursing.

2. A five hundred hour AIT program may be granted for individuals with a minimum of two years' experience in the last five years with demonstrated supervisory and budgetary responsibility in one of the following positions or their equivalent:
   a. Hospital administrator;
   b. Assistant administrator in a state licensed nursing home or hospital;
   c. Director of a hospital based skilled nursing facility;
   d. Director of a subacute or transitional care unit;
   e. Director of the department of nursing in a state licensed nursing home;
   f. Health care consultant to the long-term care industry;
   g. Director of community-based long-term care service;
   h. Director or regional director of rehabilitation services in a skilled nursing facility.

3. A five hundred hour program may be granted for individuals with a master's degree in health administration or nursing.

4. At the discretion of the board, veterans who have military experience equal to the civilian classifications and time limits in subsections (2) and (3) of this section are eligible for a reduced AIT as described in subsections (2) and (3) of this section.

[Statutory Authority: RCW 18.52.061, 18.130.050, 18.130.040, 18.130.062, 43.70.041, and chapter 18.52 RCW. WSR 16-17-127, § 246-843-091, filed 8/23/16, effective 9/23/16. Statutory Authority: Chapters 18.52 and 34.05 RCW. WSR 00-01-070, § 246-843-090, filed 12/13/99, effective 1/13/00.]

[Statutory Authority: RCW 18.52.061, 18.130.050, 18.130.040, 18.130.062, 43.70.041, and chapter 18.52 RCW. WSR 16-17-127, § 246-843-091, filed 8/23/16, effective 9/23/16.]

[Ch. 246-843 WAC p. 4] (8/23/16)
WAC 246-843-093 Exemption. No AIT program is required for:

(1) An individual with a minimum of five years' experience in the last seven years with extensive supervisory and budgetary responsibility in one of the following positions or their equivalent:

(a) Hospital administrator;
(b) Assistant administrator in a hospital or state licensed nursing home;
(c) Director of a hospital based skilled nursing facility;
(d) Director of a subacute or transitional care unit; or
(e) Regional director of rehabilitation services in a skilled nursing facility.

(2) Veterans who have military experience equal to the civilian classifications and time limits listed in subsection (1)(a) through (e) of this section.

(3) An individual who has worked as a licensed nursing home administrator for a minimum of two years, in the past five years.

(4) An individual who graduated with a baccalaureate or graduate degree in long-term care administration from a program accredited by the National Association of Long Term Care Administrator Boards (NAB).

(5) An individual who graduated from a degree program in a recognized educational institution that included a one thousand hour practical experience (practicum) in a nursing home. This practical experience must be structured to allow a student a majority of time in a systematic rotation through each department of a resident-occupied nursing home. The practical experience shall include planned readings, writing, and project assignments. The practical experience shall include regular contact with the administrator of the facility in which the practical experience was completed.

WAC 246-843-095 Preceptors for administrator-in-training programs. The preceptor shall submit a statement to the board describing his or her qualifications and an agreement to perform the duties of a preceptor.

(1) Qualifications of preceptor:

(a) The preceptor must have three years' experience employed as a licensed nursing home administrator in the past three years.

(b) The preceptor must be employed full time as the nursing home administrator in the facility where the administrator-in-training is trained.

(c) The preceptor shall have an unrestricted license.

(2) Duties of the preceptor:

(a) The preceptor shall take the time necessary and have at least a weekly face-to-face conference with the AIT about the activities of the AIT relative to the training program and the nursing home.

(b) The preceptor shall evaluate the AIT and submit quarterly reports to the board on the progress of the AIT program.

(3) A preceptor is limited to the supervision of only one AIT unless the preceptor has prior approval from the board.

WAC 246-843-130 Continuing education requirements. (1) A licensed nursing home administrator must demonstrate completion of thirty-six hours of continuing education every two years and comply with chapter 246-12 WAC, Part 7.

(2) Continuing education approved by the National Continuing Education Review Service (NCERS) is acceptable for continuing education credit.

(3) Continuing education that is not approved by NCERS must meet the following requirements:

(a) The basic methods of continuing education learning are:

(i) Seminars;
(ii) Teleconferencing;
(iii) Webinars; and
(iv) Self-study programs.

(b) Continuing education courses shall consist of a minimum of one hour of instruction. Hours are based upon clock hours and are calculated in half hour increments. College courses are rated at fifteen hours per each semester unit and ten hours per each quarter credit.

(c) Continuing education must relate to nursing home administration, be designed to promote continued knowledge and skills with nursing home administration standards, and improve and enhance professional competencies. Continuing education must fit within the following subjects:

(i) Resident centered care;
(ii) Human resources;
(iii) Finance;
(iv) Environment;
(v) Leadership and management;
(vi) Suicide prevention;
(vii) Cultural competency training;
(viii) Laws relating to Washington state nursing homes.

(d) The continuing education provider must offer a certificate of completion that lists the number of clock hours. To receive full credit, attendees must attend the full program. The maximum number of hours allowed for continuing education is seven hours per day.

(4) Continuing education credit of two hours per month may be granted to a preceptor of an administrator-in-training program.

(5) Continuing education credit of a maximum of two hours per month may be granted for serving as a board member for the board of nursing home administrators.

(6) Within one hundred eighty days after becoming licensed, a nursing home administrator shall attend a board approved course on laws relating to nursing homes in Washington. The board will grant retroactive credit to those licensees who obtain the required training as administrators-in-training under WAC 246-843-090. The state law training course consists of a minimum of a six-hour program, with...
formal training objectives, that covers the requirements of chapter 18.52 RCW and essential areas of laws that apply to nursing homes regulated by the department of social and health services under chapter 388-97 WAC to include:

(a) Resident services, medical and social;
(b) Resident rights, including resident decision making, informed consent, advance directives and notices to residents;
(c) Enforcement;
(d) Criminal history inquiries;
(e) Differences between federal and state law.

[Statutory Authority: RCW 18.52.061, 18.130.050, 18.130.040, 18.130.062, 43.70.041, and chapter 18.52 RCW. WSR 16-17-127, § 246-843-130, filed 8/23/16, effective 9/23/16. Statutory Authority: Chapters 18.52 and 34.05 RCW. WSR 90-01-074, § 246-843-130, filed 12/13/99, effective 1/13/00. Statutory Authority: RCW 18.52.100. WSR 91-24-050 (Order 217B), § 246-843-130, filed 11/27/91, effective 12/28/91; WSR 91-06-060 (Order 141B), recodified as § 246-843-130, filed 3/1/91, effective 4/1/91. Statutory Authority: RCW 18.52.100(11). WSR 88-23-038 (Order PM 791), § 246-843-130, filed 10/6/88. Statutory Authority: RCW 18.52.100(14) and 18.52.110(2). WSR 82-20-092 (Order PL 407), § 308-54-130, filed 11/9/88. Statutory Authority: RCW 18.52.100(14) and 18.52.110(2). WSR 82-20-092 (Order PL 407), § 308-54-130, filed 10/6/82. Statutory Authority: RCW 18.52.100(14) and 18.52.110(2). WSR 80-01-075 (Order PL 328), § 308-54-130, filed 12/20/79; Order PL 265, § 308-54-130, filed 3/21/77; Order PL 260, § 308-54-130, filed 12/10/76; Order PL 107, § 308-54-130, filed 3/3/71.]

WAC 246-843-162 AIDS prevention and information education requirements. Applicants must complete seven clock hours of AIDS education as required in chapter 246-12 WAC, Part 8.


WAC 246-843-180 Expired license. (1) To return to active status, the practitioner must meet the requirements of WAC 246-12-040.

(2) If the license has been expired for five years or more, the practitioner must also meet the following requirements:

(a) If the practitioner has been in active practice as a licensed nursing home administrator in another jurisdiction during that time, the practitioner must provide proof of active practice;

(b) If the practitioner has not been in active practice as a licensed nursing home administrator in another jurisdiction during that time, the practitioner must successfully complete the current licensing examination.

[Statutory Authority: RCW 18.52.061, 18.130.050, 18.130.040, 18.130.062, 43.70.041, and chapter 18.52 RCW. WSR 16-17-127, § 246-843-180, filed 8/23/16, effective 9/23/16. Statutory Authority: Chapters 18.52 and 34.05 RCW and chapter 18.52.030. WSR 12-14-051, § 246-843-205, filed 6/28/12, effective 7/29/12. Statutory Authority: Chapters 18.52 and 34.05 RCW. WSR 00-01-067, § 246-843-205, filed 12/13/99, effective 1/13/00. Statutory Authority: RCW 18.52.061. WSR 95-07-128, § 246-843-205, filed 3/22/95, effective 4/22/95; WSR 93-13-004 (Order 371B), § 246-843-205, filed 6/3/93, effective 7/4/93. Statutory Authority: RCW 18.52.100. WSR 91-24-050 (Order 217B), § 246-843-205, filed 11/27/91, effective 12/28/91; WSR 91-06-060 (Order 141B), recodified as § 246-843-205, filed 3/1/91, effective 4/1/91; Order PL 164, § 308-54-205, filed 3/27/74.]

WAC 246-843-230 Endorsement. (1) The board may endorse a nursing home administrator currently licensed in another state if that state requires qualifications substantially equivalent to qualifications required by RCW 18.52.071 and WAC 246-843-090. To obtain a license by endorsement the applicant must:

(a) Pay applicable application fee;
(b) Submit an application on forms approved by the secretary;
(c) Submit a verification form from all states in which currently or previously licensed that verifies the applicant:
(i) Was or is currently licensed;
(ii) Has not had a nursing home administrator license revoked or suspended; and
(iii) Has passed a national examination allowed under WAC 246-843-070;
(d) Submit a certified transcript of baccalaureate or higher degree, mailed to the department directly from a recognized institution of higher learning;
(e) Submit documentation of completion of seven clock hours of AIDS education and training as required in chapter 246-12 WAC, Part 8.

(2) Applicants who are:
(a) Currently certified by the American College of Health Care Administrators (ACHCA) are exempt from taking the current NAB national examination.
(b) Currently licensed as a nursing home administrator in another state and who have previously passed the national examination are exempt from taking the current NAB national examination.

[Statutory Authority: RCW 18.52.061, 18.130.050, 18.130.040, 18.130.062, 43.70.041, and chapter 18.52 RCW. WSR 16-17-127, § 246-843-205, filed 8/23/16, effective 9/23/16. Statutory Authority: Chapters 18.52, 34.05 RCW and RCW 18.52.075. WSR 00-01-072, § 246-843-230, filed 12/13/99, effective 1/13/00. Statutory Authority: RCW 43.70.280. WSR 98-05-060, § 246-843-230, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 18.52.100. WSR 91-24-050 (Order 217B), § 246-843-230, filed 11/27/91, effective 12/28/91; WSR 91-06-060 (Order 141B), recodified as § 246-843-230, filed 3/1/91, effective 4/1/91; Order PL 107, § 308-54-230, filed 3/3/71.]

WAC 246-843-231 Temporary practice permits. (1) Temporary practice permits for applicants seeking licensure for interim placement at specific facilities.

[Ch. 246-843 WAC p. 6] (8/23/16)
Nursing Home Administrators 246-843-270

(a) A temporary practice permit may be issued to an applicant who meets the following conditions:

(i) Holds an unrestricted active license in another state;

(ii) Is not subject to denial of a license or issuance of a conditional or restricted license; and

(iii) There are no violations identified in the Washington criminal background check and the applicant meets all other licensure conditions including receipt by the department of health of a completed Federal Bureau of Investigation (FBI) fingerprint card.

(b) The temporary practice permit allows the applicant to work in the state of Washington as a nursing home administrator during the time specified on the permit. The temporary practice permit grants the applicant a license to practice within the full scope of practice as a nursing home administrator with the following conditions:

(i) A temporary practice permit is valid only for the specific nursing home for which it is issued unless otherwise approved by the board;

(ii) A temporary permit holder shall consult with a Washington state licensed nursing home administrator with whom they have a written agreement for consultation.

(c) A temporary practice permit will not be renewed, reissued, or extended. A temporary practice permit expires when one of the following occurs:

(i) The permit holder departs from the nursing home, unless otherwise approved by the board;

(ii) One hundred eighty days after the temporary practice permit is issued.

(d) To receive a temporary practice permit, the applicant must:

(i) Submit fees and a completed application for the permit;

(ii) Submit verification from each state in which the applicant is currently licensed and is in good standing as a nursing home administrator;

(iii) Submit a written agreement for consultation with a Washington state licensed nursing home administrator.

(2) Temporary practice permits for applicants seeking permanent licensure.

(a) A temporary practice permit may be issued to an applicant who meets the following conditions:

(i) Holds an unrestricted, active license in another state that has substantially equivalent licensing standards to those in Washington;

(ii) Is not subject to denial of a license or issuance of a conditional or restricted license; and

(iii) There are no violations identified in the Washington criminal background check and the applicant meets all other licensure conditions including receipt by the department of health of a completed Federal Bureau of Investigation (FBI) fingerprint card.

(b) The temporary practice permit allows the applicant to work in the state of Washington as a nursing home administrator during the time specified on the permit. The temporary practice permit grants the applicant a license to practice within the full scope of practice as a nursing home administrator with the following conditions:

(c) A temporary practice permit will not be renewed, reissued, or extended. A temporary practice permit expires when one of the following occurs:

(i) The department of health issues a license after it receives the national background check report and determines that the applicant meets the requirements for licensure;

(ii) A notice of decision on application is mailed to the applicant, unless the notice of decision on application specifically extends the duration of the temporary practice permit; or

(iii) One hundred eighty days after the temporary practice permit is issued.

(d) To receive a temporary practice permit, the applicant must:

(i) Submit fees and a completed application for licensure as a nursing home administrator;

(ii) Meet all requirements and qualifications for the license, except the results from a fingerprint-based national background check;

(iii) Provide verification of having an active unrestricted license as a nursing home administrator from another state that has substantially equivalent licensing standards in Washington; and

(iv) Submit the fingerprint card and a written request for a temporary practice permit when the department notifies the applicant the national background check is required.

[Statutory Authority: RCW 18.52.061, 18.130.050, 18.130.040, 18.130.062, 43.70.041, and chapter 18.52 RCW. WSR 16-17-127, § 246-843-231, filed 8/23/16, effective 9/23/16. Statutory Authority: RCW 18.52.061, 18.130.064, and 18.130.075. WSR 15-02-034, § 246-843-231, filed 12/30/14, effective 1/30/15. Statutory Authority: Chapters 18.52, 34.05 RCW and RCW 18.130.075. WSR 00-01-072, § 246-843-231, filed 12/13/99, effective 1/13/00.]
WAC 246-843-280 Sexual misconduct. (1) A nursing home administrator must not engage, or attempt to engage, in sexual misconduct with a current patient, client, or key party, inside or outside the health care setting. Sexual misconduct constitutes grounds for disciplinary action. Sexual misconduct includes, but is not limited to:
(a) Sexual intercourse;
(b) Touching the breasts, genitals, anus or any sexualized body part;
(c) Rubbing against a patient or client or key party for sexual gratification;
(d) Kissing of a romantic or sexual nature;
(e) Hugging, touching, fondling or caressing of a romantic or sexual nature;
(f) Examination of or touching genitals;
(g) Not allowing a patient or client privacy to dress or undress;
(h) Not providing the patient or client a gown or draping;
(i) Dressing or undressing in the presence of the patient, client or key party;
(j) Removing patient or client's clothing or gown or draping;
(k) Encouraging masturbation or other sex act in the presence of the nursing home administrator;
(l) Masturbation or other sex act by the nursing home administrator in the presence of the patient, client or key party;
(m) Terminating a professional relationship for the purpose of dating or pursuing a romantic or sexual relationship;
(n) Soliciting a date with a patient, client or key party;
(o) Discussing the sexual history, preferences or fantasies of the nursing home administrator;
(p) Any behavior, gestures, or expressions that may reasonably be interpreted as seductive or sexual;
(q) Making statements regarding the patient, client or key party's body, appearance, sexual history, or sexual orientation other than for legitimate health care purposes;
(r) Sexually demeaning behavior including any verbal or physical contact which may reasonably be interpreted as demeaning, humiliating, embarrassing, threatening or harming a patient, client or key party;
(s) Photographing or filming the body or any body part or pose of a patient, client, or key party, other than for legitimate health care purposes; and
(t) Showing a patient, client or key party sexually explicit photographs, other than for legitimate health care purposes.

(2) Sexual misconduct also includes sexual contact with any person involving force, intimidation, or lack of consent; or a conviction of a sex offense as defined in RCW 9.94A.030.

(3) A nursing home administrator must not:
(a) Offer to provide health care services in exchange for sexual favors;
(b) Use health care information to contact the patient, client or key party for the purpose of engaging in sexual misconduct;
(c) Use health care information or access to health care information to meet or attempt to meet the nursing home administrator's sexual needs.

(4) A nursing home administrator must not engage, or attempt to engage, in the activities listed in subsection (1) of this section with a former patient, client or key party within two years after the provider-patient/client relationship ends.

(5) After the two-year period of time described in subsection (4) of this section, a nursing home administrator shall not engage, or attempt to engage, in the activities listed in subsection (1) of this section if:
(a) There is a significant likelihood that the patient, client or key party will seek or require additional services from the nursing home administrator; or
(b) There is an imbalance of power, influence, opportunity and/or special knowledge of the professional relationship.

(6) When evaluating whether a nursing home administrator is prohibited from engaging, or attempting to engage, in sexual misconduct, the board of nursing home administrators will consider factors including, but not limited to:
(a) Documentation of a formal termination and the circumstances of termination of the nursing home administrator-patient relationship;
(b) Transfer of care to another nursing home administrator;
(c) Duration of the nursing home administrator-patient relationship;
(d) Amount of time that has passed since the last health care services to the patient or client;
(e) Communication between the nursing home administrator and the patient or client between the last health care services rendered and commencement of the personal relationship;
(f) Extent to which the patient's or client's personal or private information was shared with the nursing home administrator;
(g) Nature of the patient or client's health condition during and since the professional relationship;
(h) The patient or client's emotional dependence and vulnerability; and
(i) Normal revisit cycle for the profession and service.

(7) Patient, client or key party initiation or consent does not excuse or negate the health care provider's responsibility.

(8) These rules do not prohibit:
(a) Contact that is necessary for a legitimate health care purpose and that meets the standard of care appropriate to nursing home administrators; or
(b) Providing health care services for a legitimate health care purpose to a person who is in a preexisting, established personal relationship with the nursing home administrator where there is no evidence of, or potential for, exploiting the patient or client.

[Statutory Authority: RCW 18.52.061, 18.130.050, 18.130.040, 18.130.062, 43.70.041, and chapter 18.52 RCW. WSR 16-17-127, § 246-843-280, filed 8/23/16, effective 9/23/16. Statutory Authority: RCW 18.130.050 (1) and (12) and 18.52.061(1). WSR 07-08-005, § 246-843-280, filed 3/22/07, effective 4/22/07.]

WAC 246-843-330 Inactive license. (1) A practitioner may obtain an inactive license. Refer to the requirements of chapter 246-12 WAC, Part 4.

(2) To return to active status from inactive status if the license has been on inactive status for less than five years, the
practitioner must meet the requirements of chapter 246-12 WAC, Part 4.

(3) To return to active status from inactive status if the license has been on inactive status for five years or more:

(a) If the practitioner has been in active practice as a licensed nursing home administrator in another jurisdiction during that time, the practitioner must:
   (i) Meet the requirements of chapter 246-12 WAC, Part 4; and
   (ii) Provide proof of active practice; or

(b) If the practitioner has not been in active practice as a licensed nursing home administrator in another jurisdiction during that time, the practitioner must:
   (i) Meet the requirements of WAC 246-12-110; and
   (ii) Successfully complete the current licensing examination.


WAC 246-843-340 Adjudicative proceedings. The board adopts the model procedural rules for adjudicative proceedings as adopted by the department of health and contained in chapter 246-11 WAC, including subsequent amendments.

[Statutory Authority: RCW 18.52.061. WSR 93-23-034, § 246-843-340, filed 11/10/93, effective 12/11/93.]

WAC 246-843-990 Nursing home administrator fees and renewal cycle. (1) Licenses must be renewed every year on the practitioner's birthday as provided in chapter 246-12 WAC, Part 2.

(2) The following nonrefundable fees will be charged:

<table>
<thead>
<tr>
<th>Title of Fee</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Application - Original license</td>
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</tr>
<tr>
<td>Administrator-in-training</td>
<td>285.00</td>
</tr>
<tr>
<td>Application - Endorsement</td>
<td>510.00</td>
</tr>
<tr>
<td>Temporary permit</td>
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<tr>
<td>Renewal</td>
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<tr>
<td>Inactive license renewal</td>
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<tr>
<td>Late renewal penalty</td>
<td>315.00</td>
</tr>
<tr>
<td>Expired license reissuance</td>
<td>285.00</td>
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<tr>
<td>Late renewal penalty - Inactive</td>
<td>255.00</td>
</tr>
<tr>
<td>Expired inactive license reissuance</td>
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</tr>
<tr>
<td>Duplicate license</td>
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</tr>
<tr>
<td>Certification of license</td>
<td>30.00</td>
</tr>
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</table>

[Statutory Authority: RCW 43.70.110, 43.70.250, and 2011 1st sps. c 50. WSR 11-20-092, § 246-843-990, filed 10/4/11, effective 12/1/11. Statutory Authority: RCW 43.70.110, 43.70.250, 2008 c 329. WSR 08-15-014, § 246-843-990, filed 7/7/08, effective 7/7/08. Statutory Authority: RCW 43.70-250, [43.70.]280 and 43.70.110. WSR 05-12-012, § 246-843-990, filed 5/20/05, effective 7/1/05. Statutory Authority: RCW 43.70.250, [43.70.]280 and chapter 18.52 RCW. WSR 99-24-098, § 246-843-990, filed 11/30/99, effective 12/31/99. Statutory Authority: RCW 43.70.280. WSR 98-05-060, § 246-843-990, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 43.70.250 and chapter 18.52 RCW. WSR 94-09-006, § 246-843-990, filed 4/11/94, effective 5/12/94. Statutory Authority: RCW 43.70.250. WSR 93-14-011, § 246-843-990, filed 6/24/93, effective 7/25/93; WSR 91-09-051 (Order 154), § 246-843-990, filed 4/16/91, effective 5/17/91. Statutory Authority: RCW 43.70.040. WSR 91-06-058 (Order 138), recodified as § 246-843-990, filed 3/1/91, effective 4/1/91. Statutory Authority: RCW 43.70.250. WSR 90-04-094 (Order 029), § 308-54-315, filed 2/7/90, effective 3/10/90. Statutory Authority: RCW 43.24.086. WSR 87-18-031 (Order PM 667), § 308-54-315, filed 8/27/87. Statutory Authority: 1983 c 168 § 12. WSR 83-17-031 (Order PL 442), § 308-54-315, filed 8/10/83. Formerly WAC 308-54-310.]

(8/23/16)