The House was called to order at 9:00 a.m. by the Speaker (Representative Lovick presiding). The Clerk called the roll and a quorum was present.

The Speaker (Representative Lovick presiding) led the Chamber in the Pledge of Allegiance. The prayer was offered by Representative Vicki Kraft, 17th Legislative.

Reading of the Journal of the previous day was dispensed with and it was ordered to stand approved.

There being no objection, the House advanced to the third order of business.

MESSAGE FROM THE SENATE

February 23, 2021

Mme. SPEAKER:

The Senate has passed:

SENATE BILL NO. 5018,
SENATE BILL NO. 5021,
ENGROSSED SENATE BILL NO. 5026,
SUBSTITUTE SENATE BILL NO. 5030,
SUBSTITUTE SENATE BILL NO. 5066,
SENATE BILL NO. 5101,
ENGROSSED SUBSTITUTE SENATE BILL NO. 5115,
SUBSTITUTE SENATE BILL NO. 5127,
SENATE BILL NO. 5131,
SENATE BILL NO. 5146,
SUBSTITUTE SENATE BILL NO. 5179,
SENATE BILL NO. 5225,
SUBSTITUTE SENATE BILL NO. 5271,
SUBSTITUTE SENATE BILL NO. 5292,
SENATE BILL NO. 5296,
SENATE BILL NO. 5300,
SENATE BILL NO. 5303,
SENATE BILL NO. 5322,
SENATE BILL NO. 5354,
ENGROSSED SENATE BILL NO. 5356,
SUBSTITUTE SENATE BILL NO. 5384,
and the same are herewith transmitted.

Brad Hendrickson, Secretary

There being no objection, the House advanced to the sixth order of business.

SECOND READING

HOUSE BILL NO. 1068, by Representatives Dolan, Valdez, Kloba, Gregerson and Wylie

Exempting election security information from public records disclosure.

The bill was read the second time.

There being no objection, Substitute House Bill No. 1068 was substituted for House Bill No. 1068 and the substitute bill was placed on the second reading calendar.

SUBSTITUTE HOUSE BILL NO. 1068 was read the second time.

Representative Walsh moved the adoption of amendment (087):

On page 2, beginning on line 35, after "(7)" strike all material through "RCW 29A.12.200" on page 3, line 9 and insert "The computer software source code directly related to the state's election management system's cybersecurity protections or countermeasures"

Representatives Walsh, Boehnke and Volz spoke in favor of the adoption of the amendment.

Representative Valdez spoke against the adoption of the amendment.

Amendment (087) was not adopted.

Representative Graham moved the adoption of amendment (095):

On page 3, after line 9, insert the following:

"(c) The exemptions specified in (a) of this subsection shall expire after 24 months from the date on which a record was created."

Representative Graham spoke in favor of the adoption of the amendment.

Representative Valdez spoke against the adoption of the amendment.

Amendment (095) was not adopted.

Representative Sutherland moved the adoption of amendment (102):
On page 3, after line 9, insert the following:

"(c) The exemptions specified in (a) of this subsection do not prohibit an audit authorized or required under Title 29A RCW from being conducted."

Representatives Sutherland and Valdez spoke in favor of the adoption of the amendment.

Amendment (102) was adopted.

The bill was ordered engrossed.

There being no objection, the rules were suspended, the second reading considered the third and the bill was placed on final passage.

Representatives Dolan, Volz, Boehnke, Kraft and Valdez spoke in favor of the passage of the bill.

Representatives Walsh, Young, Chase, Walsh (again) and Graham spoke against the passage of the bill.

The Speaker (Representative Lovick presiding) stated the question before the House to be the final passage of Engrossed Substitute House Bill No. 1068.

ROLL CALL

The Clerk called the roll on the final passage of Engrossed Substitute House Bill No. 1068, and the bill passed the House by the following vote: Yeas, 61; Nays, 37; Absent, 0; Excused, 0.


Voting nay: Representatives Caldier, Chase, Kraft and McCaslin.

ENGROSSED SUBSTITUTE HOUSE BILL NO. 1068, having received the necessary constitutional majority, was declared passed.

HOUSE BILL NO. 1129, by Representatives Valdez, Stonier, Ortiz-Self, Goodman, Cody, Santos and Macri

Concerning the licensure of international medical graduates.

The bill was read the second time.

There being no objection, Substitute House Bill No. 1129 was substituted for House Bill No. 1129 and the substitute bill was placed on the second reading calendar.

SUBSTITUTE HOUSE BILL NO. 1129 was read the second time.

There being no objection, the rules were suspended, the second reading considered the third and the bill was placed on final passage.

Representatives Valdez, Schmick, Slatter, Stonier and Dye spoke in favor of the passage of the bill.

Representative Kraft spoke against the passage of the bill.

The Speaker (Representative Lovick presiding) stated the question before the House to be the final passage of Substitute House Bill No. 1129.

ROLL CALL

The Clerk called the roll on the final passage of Substitute House Bill No. 1129, and the bill passed the House by the following vote: Yeas, 94; Nays, 4; Absent, 0; Excused, 0.


Voting nay: Representatives Caldier, Chase, Kraft and McCaslin.

SUBSTITUTE HOUSE BILL NO. 1129, having received the necessary constitutional majority, was declared passed.

HOUSE BILL NO. 1143, by Representatives Rude, Klicker, Eslick and Dent

Authorizing the placement of water rights banked pursuant to RCW 90.92.070 into the trust water rights program.

The bill was read the second time.
There being no objection, the rules were suspended, the second reading considered the third and the bill was placed on final passage.

Representatives Rude, Chapman and Dent spoke in favor of the passage of the bill.

The Speaker (Representative Lovick presiding) stated the question before the House to be the final passage of House Bill No. 1143.

ROLL CALL

The Clerk called the roll on the final passage of House Bill No. 1143, and the bill passed the House by the following vote:  Yeas, 98; Nays, 0; Absent, 0; Excused, 0.


HOUSE BILL NO. 1143, having received the necessary constitutional majority, was declared passed.

HOUSE BILL NO. 1176, by Representatives Paul, Boehnke, Kloba, Callan, Davis, Dolan, Riccelli, Bergquist, Lekanoff and Shewmake

Concerning access to higher education.

The bill was read the second time.

There being no objection, Substitute House Bill No. 1176 was substituted for House Bill No. 1176 and the substitute bill was placed on the second reading calendar.

SUBSTITUTE HOUSE BILL NO. 1176 was read the second time.

Representative Boehnke moved the adoption of striking amendment (104):

Strike everything after the enacting clause and insert the following:

"Sec. 1. RCW 28A.635.060 and 1997 c 266 s 13 are each amended to read as follows:

(1) Any pupil who defaces or otherwise injures any school property, or property belonging to a school contractor, employee, or another student, is subject to suspension and punishment. If any property of the school district, a contractor of the district, an employee, or another student has been lost or willfully cut, defaced, or injured, the school district may withhold the grades, diploma, and transcripts of the pupil responsible for the damage or loss until the pupil or the pupil's parent or guardian has paid for the damages, except that the school district must release the pupil's grades and transcripts three years after the pupil exits the school district. If the student is suspended, the student may not be readmitted until the student or parents or legal guardian has made payment in full or until directed by the superintendent of schools. If the property damaged is a school bus owned and operated by or contracted to any school district, a student suspended for the damage may not be permitted to enter or ride any school bus until the student or parent or legal guardian has made payment in full or until directed by the superintendent. When the pupil and parent or guardian are unable to pay for the damages, the school district shall provide a program of community service opportunities for the pupil in lieu of the payment of monetary damages. Upon completion of community service the grades, diploma, and transcripts of the pupil shall be released. The parent or guardian of such pupil shall be liable for damages as otherwise provided by law.

(2) When informing either the pupil or the pupil's parent or guardian that the pupil's grades and transcripts are being withheld as allowed under subsection (1) of this section, a school district must provide the following information:

(a) The school district may waive the payment of the monetary damage in part or in full;

(b) The pupil may make the payment of monetary damages;

(c) The pupil may participate in a program of community service opportunities for the pupil instead of the payment of monetary damages; and

(d) The school district must release the pupil's grades and transcripts three years after the pupil exits the school district. When the pupil has already
exited the school district, the school district must inform the pupil of the date on which the school district is obligated to release the pupil's grades and transcripts.

(3) Before any penalties are assessed under this section, a school district board of directors shall adopt procedures which insure that pupils' rights to due process are protected.

(4) The information under this section must be published for each associated student body of the district and each account within the associated student body program fund.

Sec. 2. RCW 28A.325.050 and 2020 c 13 s 10 are each amended to read as follows:

(1) Each school district that has an associated student body program fund must publish the following information about the fund on its web site:

(a) The fund balance at the beginning of the school year;

(b) Summary data about expenditures and revenues occurring over the course of the school year; and

(c) The fund balance at the end of the school year.

(2) Beginning in the 2020-21 school year, each school district that has an associated student body must publish the following information on its web site:

(a) Data related to high school student possession of an associated student body card and high school student participation in school-based extracurricular activities collected under RCW 28A.320.540;

(b) The school district's extracurricular activity opportunity gap reduction plan if required under RCW 28A.320.580; and

(c) A list of optional noncredit extracurricular event attendance and participation fees and the school district policy for waiving and reducing these fees as described under RCW 28A.325.010.

(3) Each school district that has an associated student body must publish the following information on its web site:

How many former students who were enrolled in the school district within the previous three years are subject to the withholding of their grades, diplomas, or transcripts as permitted under RCW 28A.635.060; and how many of these former students were eligible for the federal free or reduced-price meals program in their last year of enrollment in the school district.

(4) The information under this section must be published for each associated student body of the district and each account within the associated student body program fund.

(5) If the school district web site contains separate web sites for schools in the district, the information under this section must be published on the web site of the applicable school of the associated student body.

(6) School districts must add updated annual information to their web sites by each August 31st, except that school districts are only required to maintain the information on the web site from the previous five years.

(7) For purposes of this section, the definitions in RCW 28A.320.530 apply."

Correct the title.

Representatives Boehnke, Paul and Santos spoke in favor of the adoption of the amendment.

Striking amendment (104) was adopted.

The bill was ordered engrossed.

There being no objection, the rules were suspended, the second reading considered the third and the bill was placed on final passage.

Representatives Paul, Entenman, Ybarra, Boehnke, Eslick and Santos spoke in favor of the passage of the bill.

Representative Graham and Graham (again) spoke against the passage of the bill.

MOTION

On motion of Representative Riccelli, Representative Fey was excused.

The Speaker (Representative Lovick presiding) stated the question before the House to be the final passage of Engrossed Substitute House Bill No. 1176.

ROLL CALL
The Clerk called the roll on the final passage of Engrossed Substitute House Bill No. 1176, and the bill passed the House by the following vote: Yeas, 77; Nays, 20; Absent, 0; Excused, 1.


Absent: Representative Davis.

Excused: Representative Fey.

HOUSE BILL NO. 1096, having received the necessary constitutional majority, was declared passed.

STATEMENT FOR THE JOURNAL

I intended to vote YEA on House Bill No. 1096.

Representative Davis, 32nd District

SECOND READING

HOUSE BILL NO. 1196, by Representatives Riccelli, Callan, Bateman, Ramos, Cody, Ortiz-Self, Duerr, Harris, Leavitt, Bergquist, Shewmake, Fitzgibbon, Macri, Tharinger, Slatter, Davis, Berg, Pollet, Orwall, Harris-Talley and Frame

Concerning audio-only telemedicine.

The bill was read the second time.

There being no objection, Substitute House Bill No. 1196 was substituted for House Bill No. 1196 and the substitute bill was placed on the second reading calendar.

SUBSTITUTE HOUSE BILL NO. 1196 was read the second time.

Representative Riccelli moved the adoption of striking amendment (089):

"Sec. 1. RCW 41.05.700 and 2020 c 92 s 2 are each amended to read as follows:

(1)(a) A health plan offered to employees, school employees, and their covered dependents under this chapter issued or renewed on or after January 1, 2017, shall reimburse a provider for a health care service provided to a covered person through telemedicine or store and forward technology if:

(i) The plan provides coverage of the health care service when provided in person by the provider;

(ii) The health care service is medically necessary;

(iii) The health care service is a service recognized as an essential health benefit under section 1302(b) of the federal patient protection and affordable care act in effect on January 1, 2015; ((and))

ROLL CALL

The Clerk called the roll on the final passage of House Bill No. 1096, and the bill passed the House by the following vote: Yeas, 96; Nays, 0; Absent, 1; Excused, 1.

Voting yea: Representatives Abbarno, Caldier, Chambers, Chandler, Chase, Goehner, Graham, Hoff, Jacobsen, Kliippert, Kraft, MacEwen, McCaslin, McIntire, Mosbrucker, Orcutt, Robertson, Steele, Vick and Walsh.

Excused: Representative Fey.

ENGROSSED SUBSTITUTE HOUSE BILL NO. 1176, having received the necessary constitutional majority, was declared passed.

HOUSE BILL NO. 1096, by Representatives Schmick, Cody, Leavitt, Ortiz-Self, Riccelli and Macri

Concerning nonmedicare plans offered through the Washington state health insurance pool.

The bill was read the second time.

There being no objection, the rules were suspended, the second reading considered the third and the bill was placed on final passage.

Representatives Schmick and Cody spoke in favor of the passage of the bill.

The Speaker (Representative Lovick presiding) stated the question before the House to be the final passage of House Bill No. 1096.

ROLL CALL

The Clerk called the roll on the final passage of House Bill No. 1096, and the bill passed the House by the following vote: Yeas, 96; Nays, 0; Absent, 1; Excused, 1.


Absent: Representative Davis.

Excused: Representative Fey.
(iv) The health care service is determined to be safely and effectively provided through telemedicine or store and forward technology according to generally accepted health care practices and standards, and the technology used to provide the health care service meets the standards required by state and federal laws governing the privacy and security of protected health information; and

(v) Beginning January 1, 2023, for audio-only telemedicine, the covered person has an established relationship with the provider.

(b)(i) Except as provided in (b)(ii) of this subsection, a health plan offered to employees, school employees, and their covered dependents under this chapter issued or renewed on or after January 1, 2021, shall reimburse a provider for a health care service provided to a covered person through telemedicine (the same amount of compensation the carrier would pay the provider if the health care service was provided in person by the provider).

(ii) Hospitals, hospital systems, telemedicine companies, and provider groups consisting of eleven or more providers may elect to negotiate (an amount of compensation for telemedicine services that differs from the amount of compensation for in-person services).

(iii) For purposes of this subsection (b)(b), the number of providers in a provider group refers to all providers within the group, regardless of a provider's location.

(2) For purposes of this section, reimbursement of store and forward technology is available only for those covered services specified in the negotiated agreement between the health plan and health care provider.

(3) An originating site for a telemedicine health care service subject to subsection (1) of this section includes a:

(a) Hospital;
(b) Rural health clinic;
(c) Federally qualified health center;
(d) Physician's or other health care provider's office;
(e) Community mental health center);
(f) Skilled nursing facility;
(g) Home or any location determined by the individual receiving the service; or
(h) Renal dialysis center, except an independent renal dialysis center.

(4) Except for subsection (3)(g) of this section, any originating site under subsection (3) of this section may charge a facility fee for infrastructure and preparation of the patient. Reimbursement for a facility fee must be subject to a negotiated agreement between the originating site and the health plan. A distant site or any other site not identified in subsection (3) of this section may not charge a facility fee.

(5) The plan may not distinguish between originating sites that are rural and urban in providing the coverage required in subsection (1) of this section.

(6) The plan may subject coverage of a telemedicine or store and forward technology health service under subsection (1) of this section to all terms and conditions of the plan including, but not limited to, utilization review, prior authorization, deductible, copayment, or coinsurance requirements that are applicable to coverage of a comparable health care service provided in person.

(7) This section does not require the plan to reimburse:

(a) An originating site for professional fees;
(b) A provider for a health care service that is not a covered benefit under the plan; or
(c) An originating site or health care provider when the site or provider is not a contracted provider under the plan.

(8) If a provider intends to bill a patient or the patient's health plan for an audio-only telemedicine service, the provider must obtain patient consent for the billing in advance of the service being delivered. The authority may submit information on any potential violations of this subsection to the appropriate disciplining authority, as defined in RCW 18.130.020.

(9) For purposes of this section:
(a)(i) "Audio-only telemedicine" means the delivery of health care services through the use of audio-only telephone technology, permitting real-time communication between the patient at the originating site and the provider, for the purpose of diagnosis, consultation, or treatment.

(ii) For purposes of this section only, "audio-only telemedicine" does not include:

(A) The use of facsimile or email; or

(B) The delivery of health care services that are customarily delivered by audio-only telephone technology and customarily not billed as separate services by the provider, such as the sharing of laboratory results.

(b) "Distant site" means the site at which a physician or other licensed provider, delivering a professional service, is physically located at the time the service is provided through telemedicine;

(c) "Established relationship" means the covered person has had at least one in-person appointment within the past year with the provider providing audio-only telemedicine or with a provider employed at the same clinic as the provider providing audio-only telemedicine or the covered person was referred to the provider providing audio-only telemedicine by another provider who has had at least one in-person appointment with the covered person within the past year and has provided relevant medical information to the provider providing audio-only telemedicine.

(d) "Health care service" has the same meaning as in RCW 48.43.005;

(e) "Hospital" means a facility licensed under chapter 70.41, 71.12, or 72.23 RCW;

(f) "Originating site" means the physical location of a patient receiving health care services through telemedicine;

(g) "Provider" has the same meaning as in RCW 48.43.005;

(h) "Store and forward technology" means use of an asynchronous transmission of a covered person's medical information from an originating site to the health care provider at a distant site which results in medical diagnosis and management of the covered person, and does not include the use of audio-only telephone, facsimile, or email; and

(i) "Telemedicine" means the delivery of health care services through the use of interactive audio and video technology, permitting real-time communication between the patient at the originating site and the provider, for the purpose of diagnosis, consultation, or treatment. For purposes of this section only, "telemedicine" does not include audio-only telemedicine, but does not include facsimile((i)) or email.

Sec. 2. RCW 48.43.735 and 2020 c 92 s 1 are each amended to read as follows:

(1)(a) For health plans issued or renewed on or after January 1, 2017, a health carrier shall reimburse a provider for a health care service provided to a covered person through telemedicine or store and forward technology if:

(i) The plan provides coverage of the health care service when provided in person by the provider;

(ii) The health care service is medically necessary;

(iii) The health care service is a service recognized as an essential health benefit under section 1302(b) of the federal patient protection and affordable care act in effect on January 1, 2015; (((c))

(iv) The health care service is determined to be safely and effectively provided through telemedicine or store and forward technology according to generally accepted health care practices and standards, and the technology used to provide the health care service meets the standards required by state and federal laws governing the privacy and security of protected health information; and

(v) Beginning January 1, 2023, for audio-only telemedicine, the covered person has an established relationship with the provider.

(b)(i) Except as provided in (b)(ii) of this subsection, for health plans issued or renewed on or after January 1, 2021, a health carrier shall reimburse a provider for a health care service provided to a covered person through telemedicine (((b))) the same ((rate as)) amount of compensation the carrier would pay the provider if the health care
service was provided in person by the provider.

(ii) Hospitals, hospital systems, telemedicine companies, and provider groups consisting of eleven or more providers may elect to negotiate (a reimbursement rate) an amount of compensation for telemedicine services that differs from the (reimbursement rate) amount of compensation for in-person services.

(iii) For purposes of this subsection (1)(b), the number of providers in a provider group refers to all providers within the group, regardless of a provider's location.

(2) For purposes of this section, reimbursement of store and forward technology is available only for those covered services specified in the negotiated agreement between the health carrier and the health care provider.

(3) An originating site for a telemedicine health care service subject to subsection (1) of this section includes a:

(a) Hospital;
(b) Rural health clinic;
(c) Federally qualified health center;
(d) Physician's or other health care provider's office;
(e) ((Community mental health center)) Licensed or certified behavioral health agency;
(f) Skilled nursing facility;
(g) Home or any location determined by the individual receiving the service; or
(h) Renal dialysis center, except an independent renal dialysis center.

(4) Except for subsection (3)(g) of this section, any originating site under subsection (3) of this section may charge a facility fee for infrastructure and preparation of the patient. Reimbursement for a facility fee must be subject to a negotiated agreement between the originating site and the health carrier. A distant site or any other site not identified in subsection (3) of this section may not charge a facility fee.

(5) A health carrier may not distinguish between originating sites that are rural and urban in providing the coverage required in subsection (1) of this section.

(6) A health carrier may subject coverage of a telemedicine or store and forward technology health service under subsection (1) of this section to all terms and conditions of the plan in which the covered person is enrolled including, but not limited to, utilization review, prior authorization, deductible, copayment, or coinsurance requirements that are applicable to coverage of a comparable health care service provided in person.

(7) This section does not require a health carrier to reimburse:

(a) An originating site for professional fees;
(b) A provider for a health care service that is not a covered benefit under the plan; or
(c) An originating site or health care provider when the site or provider is not a contracted provider under the plan.

(8) If a provider intends to bill a patient or the patient's health plan for an audio-only telemedicine service, the provider must obtain patient consent for the billing in advance of the service being delivered. The insurance commissioner may submit information on any potential violations of this subsection to the appropriate disciplining authority, as defined in RCW 18.130.020.

(9) For purposes of this section:

(a)(i) "Audio-only telemedicine" means the delivery of health care services through the use of audio-only telephone technology, permitting real-time communication between the patient at the originating site and the provider, for the purpose of diagnosis, consultation, or treatment.

(ii) For purposes of this section only, "audio-only telemedicine" does not include:

(A) The use of facsimile or email; or
(B) The delivery of health care services that are customarily delivered by audio-only telephone technology and customarily not billed as separate services by the provider, such as the sharing of laboratory results.

(b) "Distant site" means the site at which a physician or other licensed provider, delivering a professional service, is physically located at the
time the service is provided through telemedicine;

((d))) (c) "Established relationship" means the covered person has had at least one in-person appointment within the past year with the provider providing audio-only telemedicine or with a provider employed at the same clinic as the provider providing audio-only telemedicine or the covered person was referred to the provider providing audio-only telemedicine by another provider who has had at least one in-person appointment with the covered person within the past year and has provided relevant medical information to the provider providing audio-only telemedicine.

(d) "Health care service" has the same meaning as in RCW 48.43.005;

((e))) (e) "Hospital" means a facility licensed under chapter 70.41, 71.12, or 72.23 RCW;

((f))) (f) "Originating site" means the physical location of a patient receiving health care services through telemedicine;

((g))) (g) "Provider" has the same meaning as in RCW 48.43.005;

((h))) (h) "Store and forward technology" means use of an asynchronous transmission of a covered person’s medical information from an originating site to the health care provider at a distant site which results in medical diagnosis and management of the covered person, and does not include the use of audio-only telephone, facsimile, or email; and

((i))) (i) "Telemedicine" means the delivery of health care services through the use of interactive audio and video technology, permitting real-time communication between the patient at the originating site and the provider, for the purpose of diagnosis, consultation, or treatment. For purposes of this section only, "telemedicine" (does not include the use of) includes audio-only (telephone) telemedicine, but does not include facsimile((e))) or email.

(9) The commissioner may adopt any rules necessary to implement this section.

Sec. 3. RCW 70.41.020 and 2016 c 226 s 1 are each amended to read as follows:

Unless the context clearly indicates otherwise, the following terms, whenever used in this chapter, shall be deemed to have the following meanings:

(1) "Aftercare" means the assistance provided by a lay caregiver to a patient under this chapter after the patient's discharge from a hospital. The assistance may include, but is not limited to, assistance with activities of daily living, wound care, medication assistance, and the operation of medical equipment. "Aftercare" includes assistance only for conditions that were present at the time of the patient's discharge from the hospital. "Aftercare" does not include:

(a) Assistance related to conditions for which the patient did not receive medical care, treatment, or observation in the hospital; or

(b) Tasks the performance of which requires licensure as a health care provider.

(2) (a) "Audio-only telemedicine" means the delivery of health care services through the use of audio-only telephone technology, permitting real-time communication between the patient at the originating site and the provider, for the purpose of diagnosis, consultation, or treatment.

(b) "Audio-only telemedicine" does not include:

(i) The use of facsimile or email; or

(ii) The delivery of health care services that are customarily delivered by audio-only telephone technology and customarily not billed as separate services by the provider, such as the sharing of laboratory results.

(3) "Department" means the Washington state department of health.

((4))) (4) "Discharge" means a patient's release from a hospital following the patient's admission to the hospital.

((5))) (5) "Distant site" means the site at which a physician or other licensed provider, delivering a professional service, is physically located at the time the service is provided through telemedicine.

((6))) (6) "Emergency care to victims of sexual assault" means medical examinations, procedures, and services provided by a hospital emergency room to
a victim of sexual assault following an alleged sexual assault.

(7) "Emergency contraception" means any health care treatment approved by the food and drug administration that prevents pregnancy, including but not limited to administering two increased doses of certain oral contraceptive pills within seventy-two hours of sexual contact.

(8) "Hospital" means any institution, place, building, or agency which provides accommodations, facilities and services over a continuous period of twenty-four hours or more, for observation, diagnosis, or care, of two or more individuals not related to the operator who are suffering from illness, injury, deformity, or abnormality, or from any other condition for which obstetrical, medical, or surgical services would be appropriate for care or diagnosis. "Hospital" as used in this chapter does not include hotels, or similar places furnishing only food and lodging, or simply domiciliary care; nor does it include clinics, or physician's offices where patients are not regularly kept as bed patients for twenty-four hours or more; nor does it include nursing homes, as defined and which come within the scope of chapter 18.51 RCW; nor does it include birthing centers, which come within the scope of chapter 18.46 RCW; nor does it include psychiatric hospitals, which come within the scope of chapter 71.12 RCW; nor any other hospital, or institution specifically intended for use in the diagnosis and care of those suffering from mental illness, intellectual disability, convulsive disorders, or other abnormal mental condition. Furthermore, nothing in this chapter or the rules adopted pursuant thereto shall be construed as authorizing the supervision, regulation, or control of the remedial care or treatment of residents or patients in any hospital conducted for those who rely primarily upon treatment by prayer or spiritual means in accordance with the creed or tenets of any well recognized church or religious denominations.

(9) "Lay caregiver" means any individual designated as such by a patient under this chapter who provides aftercare assistance to a patient in the patient's residence. "Lay caregiver" does not include a long-term care worker as defined in RCW 74.39A.009.

(10) "Originating site" means the physical location of a patient receiving health care services through telemedicine.

(11) "Person" means any individual, firm, partnership, corporation, company, association, or joint stock association, and the legal successor thereof.

(12) "Secretary" means the secretary of health.

(13) "Sexual assault" has the same meaning as in RCW 70.125.030.

(14) "Telemedicine" means the delivery of health care services through the use of interactive audio and video technology, permitting real-time communication between the patient at the originating site and the provider, for the purpose of diagnosis, consultation, or treatment. "Telemedicine" includes audio-only telemedicine, but does not include facsimile or email.

(15) "Victim of sexual assault" means a person who alleges or is alleged to have been sexually assaulted and who presents as a patient.

Sec. 4. RCW 71.24.335 and 2019 c 325 s 1019 are each amended to read as follows:

(1) Upon initiation or renewal of a contract with the authority, behavioral health administrative services organizations and managed care organizations shall reimburse a provider for a behavioral health service provided to a covered person who is under eighteen years old through telemedicine or store and forward technology if:

(a) The behavioral health administrative services organization or managed care organization in which the covered person is enrolled provides coverage of the behavioral health service when provided in person by the provider;

(b) The behavioral health service is medically necessary; and

(c) Beginning January 1, 2023, for audio-only telemedicine, the covered person has an established relationship with the provider.

(2) (a) If the service is provided through store and forward technology there must be an associated visit between the covered person and the referring
provider. Nothing in this section prohibits the use of telemedicine for the associated office visit.

(b) For purposes of this section, reimbursement of store and forward technology is available only for those services specified in the negotiated agreement between the behavioral health administrative services organization, or managed care organization, and the provider.

(3) An originating site for a telemedicine behavioral health service subject to subsection (1) of this section means an originating site as defined in rule by the department or the health care authority.

(4) Any originating site, other than a home, under subsection (3) of this section may charge a facility fee for infrastructure and preparation of the patient. Reimbursement must be subject to a negotiated agreement between the originating site and the behavioral health administrative services organization, or managed care organization, as applicable. A distant site or any other site not identified in subsection (3) of this section may not charge a facility fee.

(5) Behavioral health administrative services organizations and managed care organizations may not distinguish between originating sites that are rural and urban in providing the coverage required in subsection (1) of this section.

(6) Behavioral health administrative services organizations and managed care organizations may subject coverage of a telemedicine or store and forward technology behavioral health service under subsection (1) of this section to all terms and conditions of the behavioral health administrative services organization or managed care organization in which the covered person is enrolled, including, but not limited to, utilization review, prior authorization, deductible, copayment, or coinsurance requirements that are applicable to coverage of a comparable behavioral health care service provided in person.

(7) This section does not require a behavioral health administrative services organization or a managed care organization to reimburse:

(a) An originating site for professional fees;

(b) A provider for a behavioral health service that is not a covered benefit; or

(c) An originating site or provider when the site or provider is not a contracted provider.

(8) If a provider intends to bill a patient, a behavioral health administrative services organization, or a managed care organization for an audio-only telemedicine service, the provider must obtain patient consent for the billing in advance of the service being delivered. The authority may submit information on any potential violations of this subsection to the appropriate disciplining authority, as defined in RCW 18.130.020.

(9) For purposes of this section:

(a)(i) "Audio-only telemedicine" means the delivery of health care services through the use of audio-only telephone technology, permitting real-time communication between the patient at the originating site and the provider, for the purpose of diagnosis, consultation, or treatment.

(ii) For purposes of this section only, "audio-only telemedicine" does not include:

(A) The use of facsimile or email; or

(B) The delivery of health care services that are customarily delivered by audio-only telephone technology and customarily not billed as separate services by the provider, such as the sharing of laboratory results.

(b) "Distant site" means the site at which a physician or other licensed provider, delivering a professional service, is physically located at the time the service is provided through telemedicine;

(c) "Established relationship" means the covered person has had at least one in-person appointment within the past year with the provider providing audio-only telemedicine or with a provider employed at the same clinic as the provider providing audio-only telemedicine or the covered person was referred to the provider providing audio-only telemedicine by another provider who has had at least one in-person appointment with the covered person within the past year and has provided
relevant medical information to the provider providing audio-only telemedicine.

(d) "Hospital" means a facility licensed under chapter 70.41, 71.12, or 72.23 RCW;

((c)) (e) "Originating site" means the physical location of a patient receiving behavioral health services through telemedicine;

((d)) (f) "Provider" has the same meaning as in RCW 48.43.005;

((e)) (g) "Store and forward technology" means use of an asynchronous transmission of a covered person's medical or behavioral health information from an originating site to the provider at a distant site which results in medical or behavioral health diagnosis and management of the covered person, and does not include the use of audio-only telephone, facsimile, or email; and

((f)) (h) "Telemedicine" means the delivery of health care or behavioral health services through the use of interactive audio and video technology, permitting real-time communication between the patient at the originating site and the provider, for the purpose of diagnosis, consultation, or treatment. For purposes of this section only, "telemedicine" (does not include the use of audio-only telephone, facsimile, or email.

(9) The authority must adopt rules as necessary to implement the provisions of this section.

Sec. 5. RCW 74.09.325 and 2020 c 92 s 3 are each amended to read as follows:

(1)(a) Upon initiation or renewal of a contract with the Washington state health care authority to administer a medicaid managed care plan, a managed health care system shall reimburse a provider for a health care service provided to a covered person through telemedicine or store and forward technology if:

(i) The medicaid managed care plan in which the covered person is enrolled provides coverage of the health care service when provided in person by the provider;

(ii) The health care service is medically necessary;

(iii) The health care service is a service recognized as an essential health benefit under section 1302(b) of the federal patient protection and affordable care act in effect on January 1, 2015; ((and))

(iv) The health care service is determined to be safely and effectively provided through telemedicine or store and forward technology according to generally accepted health care practices and standards, and the technology used to provide the health care service meets the standards required by state and federal laws governing the privacy and security of protected health information; and

(v) Beginning January 1, 2023, for audio-only telemedicine, the covered person has an established relationship with the provider.

(b)(i) Except as provided in (b)(ii) of this subsection, upon initiation or renewal of a contract with the Washington state health care authority to administer a medicaid managed care plan, a managed health care system shall reimburse a provider for a health care service provided to a covered person through telemedicine (at the same rate as) the amount of compensation the managed health care system would pay the provider if the health care service was provided in person by the provider.

(ii) Hospitals, hospital systems, telemedicine companies, and provider groups consisting of eleven or more providers may elect to negotiate (a reimbursement rate) an amount of compensation for telemedicine services that differs from the (reimbursement rate) amount of compensation for in-person services.

(iii) For purposes of this subsection (1)(b), the number of providers in a provider group refers to all providers within the group, regardless of a provider's location.

(iv) A rural health clinic shall be reimbursed for audio-only telemedicine at the rural health clinic encounter rate.

(2) For purposes of this section, reimbursement of store and forward technology is available only for those services specified in the negotiated agreement between the managed health care system and health care provider.

(3) An originating site for a telemedicine health care service subject
to subsection (1) of this section includes a:

(a) Hospital;
(b) Rural health clinic;
(c) Federally qualified health center;
(d) Physician's or other health care provider's office;
(e) ((Community mental health center)) Licensed or certified behavioral health agency;
(f) Skilled nursing facility;
(g) Home or any location determined by the individual receiving the service; or
(h) Renal dialysis center, except an independent renal dialysis center.

(4) Except for subsection (3)(g) of this section, any originating site under subsection (3) of this section may charge a facility fee for infrastructure and preparation of the patient. Reimbursement for a facility fee must be subject to a negotiated agreement between the originating site and the managed health care system. A distant site or any other site not identified in subsection (3) of this section may not charge a facility fee.

(5) A managed health care system may not distinguish between originating sites that are rural and urban in providing the coverage required in subsection (1) of this section.

(6) A managed health care system may subject coverage of a telemedicine or store and forward technology health service under subsection (1) of this section to all terms and conditions of the plan in which the covered person is enrolled including, but not limited to, utilization review, prior authorization, deductible, copayment, or coinsurance requirements that are applicable to coverage of a comparable health care service provided in person.

(7) This section does not require a managed health care system to reimburse:

(a) An originating site for professional fees;
(b) A provider for a health care service that is not a covered benefit under the plan; or
(c) An originating site or health care provider when the site or provider is not a contracted provider under the plan.

(8) If a provider intends to bill a patient or a managed health care system for an audio-only telemedicine service, the provider must obtain patient consent for the billing in advance of the service being delivered. The authority may submit information on any potential violations of this subsection to the appropriate disciplining authority, as defined in RCW 18.130.020.

(9) For purposes of this section:

(a)(i) "Audio-only telemedicine" means the delivery of health care services through the use of audio-only telephone technology, permitting real-time communication between the patient at the originating site and the provider, for the purpose of diagnosis, consultation, or treatment.

(ii) For purposes of this section only, "audio-only telemedicine" does not include:

(A) The use of facsimile or email; or
(B) The delivery of health care services that are customarily delivered by audio-only telephone technology and customarily not billed as separate services by the provider, such as the sharing of laboratory results.

(b) "Distant site" means the site at which a physician or other licensed provider, delivering a professional service, is physically located at the time the service is provided through telemedicine;

((48)) (c) "Established relationship" means the covered person has had at least one in-person appointment within the past year with the provider providing audio-only telemedicine or with a provider employed at the same clinic as the provider providing audio-only telemedicine of the covered person was referred to the provider providing audio-only telemedicine by another provider who has had at least one in-person appointment with the covered person within the past year and has provided relevant medical information to the provider providing audio-only telemedicine.

(d) "Health care service" has the same meaning as in RCW 48.43.005;

((49)) (e) "Hospital" means a facility licensed under chapter 70.41, 71.12, or 72.23 RCW;
Managed health care system" means any health care organization, including health care providers, insurers, health care service contractors, health maintenance organizations, health insuring organizations, or any combination thereof, that provides directly or by contract health care services covered under this chapter and rendered by licensed providers, on a prepaid capitated basis and that meets the requirements of section 1903(m)(1)(A) of Title XIX of the federal social security act or federal demonstration waivers granted under section 1115(a) of Title XI of the federal social security act;

"Originating site" means the physical location of a patient receiving health care services through telemedicine;

"Provider" has the same meaning as in RCW 48.43.005;

"Store and forward technology" means use of an asynchronous transmission of a covered person's medical information from an originating site to the health care provider at a distant site which results in medical diagnosis and management of the covered person, and does not include the use of audio-only telephone, facsimile, or email; and

"Telemedicine" means the delivery of health care services through the use of interactive audio and video technology, permitting real-time communication between the patient at the originating site and the provider, for the purpose of diagnosis, consultation, or treatment.

(1) The authority shall adopt rules regarding medicaid fee-for-service reimbursement for services delivered through audio-only telemedicine. Except as provided in subsection (2) of this section, the rules must establish a manner of reimbursement for audio-only telemedicine that is consistent with RCW 74.09.325.

(2) The rules shall require rural health clinics to be reimbursed for audio-only telemedicine at the rural health clinic encounter rate.

(3)(a) For purposes of this section, "audio-only telemedicine" means the delivery of health care services through the use of audio-only telephone technology, permitting real-time communication between a patient at the originating site and the provider, for the purpose of diagnosis, consultation, or treatment.

(b) For purposes of this section only, "audio-only telemedicine" does not include:

(i) The use of facsimile or email; or

(ii) The delivery of health care services that are customarily delivered by audio-only telephone technology and customarily not billed as separate services by the provider, such as the sharing of laboratory results.

Sec. 7. RCW 18.130.180 and 2020 c 187 s 2 are each amended to read as follows:

The following conduct, acts, or conditions constitute unprofessional conduct for any license holder under the jurisdiction of this chapter:

(1) The commission of any act involving moral turpitude, dishonesty, or corruption relating to the practice of the person's profession, whether the act constitutes a crime or not. If the act constitutes a crime, conviction in a criminal proceeding is not a condition precedent to disciplinary action. Upon such a conviction, however, the judgment and sentence is conclusive evidence at the ensuing disciplinary hearing of the guilt of the license holder of the crime described in the indictment or information, and of the person's violation of the statute on which it is based. For the purposes of this section, conviction includes all instances in which a plea of guilty or nolo contendere is the basis for the conviction and all proceedings in which the sentence has
been deferred or suspended. Nothing in this section abrogates rights guaranteed under chapter 9.96A RCW;

(2) Misrepresentation or concealment of a material fact in obtaining a license or in reinstatement thereof;

(3) All advertising which is false, fraudulent, or misleading;

(4) Incompetence, negligence, or malpractice which results in injury to a patient or which creates an unreasonable risk that a patient may be harmed. The use of a nontraditional treatment by itself shall not constitute unprofessional conduct, provided that it does not result in injury to a patient or create an unreasonable risk that a patient may be harmed;

(5) Suspension, revocation, or restriction of the individual's license to practice any health care profession by competent authority in any state, federal, or foreign jurisdiction, a certified copy of the order, stipulation, or agreement being conclusive evidence of the revocation, suspension, or restriction;

(6) Except when authorized by RCW 18.130.345, the possession, use, prescription for use, or distribution of controlled substances or legend drugs in any way other than for legitimate or therapeutic purposes, diversion of controlled substances or legend drugs, the violation of any drug law, or prescribing controlled substances for oneself;

(7) Violation of any state or federal statute or administrative rule regulating the profession in question, including any statute or rule defining or establishing standards of patient care or professional conduct or practice;

(8) Failure to cooperate with the disciplining authority by:

(a) Not furnishing any papers, documents, records, or other items;

(b) Not furnishing in writing a full and complete explanation covering the matter contained in the complaint filed with the disciplining authority;

(c) Not responding to subpoenas issued by the disciplining authority, whether or not the recipient of the subpoena is the accused in the proceeding; or

(d) Not providing reasonable and timely access for authorized representatives of the disciplining authority seeking to perform practice reviews at facilities utilized by the license holder;

(9) Failure to comply with an order issued by the disciplining authority or a stipulation for informal disposition entered into with the disciplining authority;

(10) Aiding or abetting an unlicensed person to practice when a license is required;

(11) Violations of rules established by any health agency;

(12) Practice beyond the scope of practice as defined by law or rule;

(13) Misrepresentation or fraud in any aspect of the conduct of the business or profession;

(14) Failure to adequately supervise auxiliary staff to the extent that the consumer's health or safety is at risk;

(15) Engaging in a profession involving contact with the public while suffering from a contagious or infectious disease involving serious risk to public health;

(16) Promotion for personal gain of any unnecessary or inefficacious drug, device, treatment, procedure, or service;

(17) Conviction of any gross misdemeanor or felony relating to the practice of the person's profession. For the purposes of this subsection, conviction includes all instances in which a plea of guilty or nolo contendere is the basis for conviction and all proceedings in which the sentence has been deferred or suspended. Nothing in this section abrogates rights guaranteed under chapter 9.96A RCW;

(18) The procuring, or aiding or abetting in procuring, a criminal abortion;

(19) The offering, undertaking, or agreeing to cure or treat disease by a secret method, procedure, treatment, or medicine, or the treating, operating, or prescribing for any health condition by a method, means, or procedure which the licensee refuses to divulge upon demand of the disciplining authority;

(20) The willful betrayal of a practitioner-patient privilege as recognized by law;
(21) Violation of chapter 19.68 RCW, 71.24.335(8), or 74.09.325(8), or a pattern of violations of RCW 48.49.020 or 48.49.030;

(22) Interference with an investigation or disciplinary proceeding by willful misrepresentation of facts before the disciplining authority or its authorized representative, or by the use of threats or harassment against any patient or witness to prevent them from providing evidence in a disciplinary proceeding or any other legal action, or by the use of financial inducements to any patient or witness to prevent or attempt to prevent him or her from providing evidence in a disciplinary proceeding;

(23) Current misuse of:
   (a) Alcohol;
   (b) Controlled substances; or
   (c) Legend drugs;

(24) Abuse of a client or patient or sexual contact with a client or patient;

(25) Acceptance of more than a nominal gratuity, hospitality, or subsidy offered by a representative or vendor of medical or health-related products or services intended for patients, in contemplation of a sale or for use in research publishable in professional journals, where a conflict of interest is presented, as defined by rules of the disciplining authority, in consultation with the department, based on recognized professional ethical standards;

(26) Violation of RCW 18.130.420;

(27) Performing conversion therapy on a patient under age eighteen;

(28) Violation of RCW 18.130.430.

NEW SECTION. Sec. 8. (1) The insurance commissioner, in collaboration with the Washington state telehealth collaborative and the health care authority, shall study and make recommendations regarding:

(a) Preliminary utilization trends for audio-only telemedicine;

(b) Qualitative data from health carriers, including medicaid managed care organizations, on the burden of compliance and enforcement requirements for audio-only telemedicine;

(c) Preliminary information regarding whether requiring reimbursement for audio-only telemedicine has affected the incidence of fraud;

(d) Proposed methods to measure the impact of audio-only telemedicine on access to health care services for historically underserved communities and geographic areas;

(e) In consultation with the department of labor and industries, the extent to which telemedicine reimbursement requirements should be extended to industrial insurance and other programs administered by the department of labor and industries;

(f) An evaluation of the relative costs to providers and facilities of providing audio-only telemedicine services as compared to audio-video telemedicine services and in-person services; and

(g) Any other issues the insurance commissioner deems appropriate.

(2) The insurance commissioner must report his or her findings and recommendations to the appropriate committees of the legislature by November 15, 2023.

(3) This section expires January 1, 2024.

Sec. 9. RCW 28B.20.830 and 2020 c 92 s 4 are each amended to read as follows:

(1) The collaborative for the advancement of telemedicine is created to enhance the understanding and use of health services provided through telemedicine and other similar models in Washington state. The collaborative shall be hosted by the University of Washington telehealth services and shall be comprised of one member from each of the two largest caucuses of the senate and the house of representatives, and representatives from the academic community, hospitals, clinics, and health care providers in primary care and specialty practices, carriers, and other interested parties.

(2) By July 1, 2016, the collaborative shall be convened. The collaborative shall develop recommendations on improving reimbursement and access to services, including originating site restrictions, provider to provider consultative models, and technologies and models of care not currently reimbursed; identify the existence of
telemedicine best practices, guidelines, billing requirements, and fraud prevention developed by recognized medical and telemedicine organizations; and explore other priorities identified by members of the collaborative. After review of existing resources, the collaborative shall explore and make recommendations on whether to create a technical assistance center to support providers in implementing or expanding services delivered through telemedicine technologies.

(3) The collaborative must submit an initial progress report by December 1, 2016, with follow-up policy reports including recommendations by December 1, 2017, December 1, 2018, and December 1, 2021. The reports shall be shared with the relevant professional associations, governing boards or commissions, and the health care committees of the legislature.

(4) The collaborative shall study store and forward technology, with a focus on:

(a) Utilization;

(b) Whether store and forward technology should be paid for at parity with in-person services;

(c) The potential for store and forward technology to improve rural health outcomes in Washington state; and

(d) Ocular services.

(5) The meetings of the board shall be open public meetings, with meeting summaries available on a web page.

(6) The future of the collaborative shall be reviewed by the legislature with consideration of ongoing technical assistance needs and opportunities. The collaborative terminates December 31, (2023).

NEW SECTION. Sec. 10. If any part of this act is found to be in conflict with federal requirements that are a prescribed condition to the allocation of federal funds to the state, the conflicting part of this act is inoperative solely to the extent of the conflict and with respect to the agencies directly affected, and this finding does not affect the operation of the remainder of this act in its application to the agencies concerned. Rules adopted under this act must meet federal requirements that are a necessary condition to the receipt of federal funds by the state.

Correct the title.

Representative Caldier withdrew amendment (092) to the striking amendment (089).

Representative Caldier moved the adoption of amendment (093) to the striking amendment (089):

On page 2, line 30 of the striking amendment, after "distant site" insert "a hospital that is an originating site for audio-only telemedicine;"

On page 5, line 40 of the striking amendment, after "distant site" insert "a hospital that is an originating site for audio-only telemedicine;"

On page 10, line 39 of the striking amendment, after "distant site" insert "a hospital that is an originating site for audio-only telemedicine;"

On page 14, line 22 of the striking amendment, after "distant site" insert "a hospital that is an originating site for audio-only telemedicine;"

Representatives Caldier and Cody spoke in favor of the adoption of the amendment to the striking amendment.

Amendment (093), to the striking amendment (089) was adopted.

Representative Riccelli moved the adoption of amendment (108) to the striking amendment (089):

On page 3, line 9 of the striking amendment, after "(8)" insert "(a)"

On page 3, after line 14 of the striking amendment, insert the following:

"(b) If the health care authority has cause to believe that a provider has engaged in a pattern of unresolved violations of this subsection (8), the health care authority may submit information to the appropriate disciplining authority for action. Prior to submitting information to the appropriate disciplining authority, the health care authority may provide the provider with an opportunity to cure the alleged violations or explain why the actions in question did not violate this subsection (8).

(c) If the provider has engaged in a pattern of unresolved violations of this subsection (8), the appropriate disciplining authority may levy a fine or cost recovery upon the provider in an
amount not to exceed the applicable statutory amount per violation and take other action as permitted under the authority of the disciplining authority. Upon completion of its review of any potential violation submitted by the health care authority or initiated directly by an enrollee, the disciplining authority shall notify the health care authority of the results of the review, including whether the violation was substantiated and any enforcement action taken as a result of a finding of a substantiated violation.

Upon completion of its review of any potential violation submitted by the health care authority or initiated directly by an enrollee, the disciplining authority shall notify the commissioner of the results of the review, including whether the violation was substantiated and any enforcement action taken as a result of a finding of a substantiated violation.

On page 6, line 27 of the striking amendment, after "audio-only" strike "telephone"

On page 6, line 35 of the striking amendment, after "audio-only" strike "telephone"

On page 6, line 38 of the striking amendment, after "(b)" insert "Disciplining authority" has the same meaning as in RCW 18.130.020;

(c)"

Renumber the remaining subsections consecutively and correct any internal references accordingly.

On page 8, line 13 of the striking amendment, after "audio-only" strike "telephone"

On page 8, line 20 of the striking amendment, after "audio-only" strike "telephone"

On page 11, line 25 of the striking amendment, after "(b)" insert "(a)"

On page 11, after line 31 of the striking amendment, insert the following:

"(b) If the health care authority has cause to believe that a provider has engaged in a pattern of unresolved violations of this subsection (8), the health care authority may submit information to the appropriate disciplining authority for action. Prior to submitting information to the appropriate disciplining authority, the health care authority may provide the provider with an opportunity to cure the alleged violations or explain why the actions in question did not violate this subsection (8).

(c) If the provider has engaged in a pattern of unresolved violations of this subsection (8), the appropriate disciplining authority may levy a fine or cost recovery upon the provider in an amount not to exceed the applicable statutory amount per violation and take other action as permitted under the authority of the disciplining authority. Upon completion of its review of any potential violation submitted by the commissioner or initiated directly by an

Renumber the remaining subsections consecutively and correct any internal references accordingly.

On page 6, line 19 of the striking amendment, after "(8)" insert "(a)"

On page 6, after line 24 of the striking amendment, insert the following:

"(b) If the commissioner has cause to believe that a provider has engaged in a pattern of unresolved violations of this subsection (8), the commissioner may submit information to the appropriate disciplining authority for action. Prior to submitting information to the appropriate disciplining authority, the commissioner may provide the provider with an opportunity to cure the alleged violations or explain why the actions in question did not violate this subsection (8).

(c) If the provider has engaged in a pattern of unresolved violations of this subsection (8), the appropriate disciplining authority may levy a fine or cost recovery upon the provider in an amount not to exceed the applicable statutory amount per violation and take other action as permitted under the authority of the disciplining authority. Upon completion of its review of any potential violation submitted by the health care authority or initiated
directly by an enrollee, the disciplining authority shall notify the health care authority of the results of the review, including whether the violation was substantiated and any enforcement action taken as a result of a finding of a substantiated violation.”

On page 11, line 34 of the striking amendment, after "audio-only" strike "telephone" 

On page 12, line 2 of the striking amendment, after "audio-only" strike "telephone"

On page 12, line 5 of the striking amendment, after "(b)" insert "Disciplining authority" has the same meaning as in RCW 18.130.020;

(c)"

Renumber the remaining subsections consecutively and correct any internal references accordingly.

On page 15, line 3 of the striking amendment, after "(8)" insert "(a)"

On page 15, after line 8 of the striking amendment, insert the following:

“(b) If the health care authority has cause to believe that a provider has engaged in a pattern of unresolved violations of this subsection (8), the health care authority may submit information to the appropriate disciplining authority for action. Prior to submitting information to the appropriate disciplining authority, the health care authority may provide the provider with an opportunity to cure the alleged violations or explain why the actions in question did not violate this subsection (8).

(c) If the provider has engaged in a pattern of unresolved violations of this subsection (8), the appropriate disciplining authority may levy a fine or cost recovery upon the provider in an amount not to exceed the applicable statutory amount per violation and take other action as permitted under the authority of the disciplining authority. Upon completion of its review of any potential violation submitted by the health care authority or initiated directly by an enrollee, the disciplining authority shall notify the health care authority of the results of the review, including whether the violation was substantiated and any enforcement action taken as a result of a finding of a substantiated violation.”

On page 15, line 11 of the striking amendment, after "audio-only" strike "telephone"

On page 15, line 19 of the striking amendment, after "audio-only" strike "telephone"

On page 15, line 22 of the striking amendment, after "(b)" insert "Disciplining authority" has the same meaning as in RCW 18.130.020;

(c)"

Renumber the remaining subsections consecutively and correct any internal references accordingly.

On page 17, line 6 of the striking amendment, after "only" strike "telephone"

On page 17, line 13 of the striking amendment, after "audio-only" strike "telephone"

On page 19, beginning on line 26 of the striking amendment, after "19.68 RCW" strike all material through "74.09.325(8)," "

On page 19, line 28 of the striking amendment, after "RCW" strike "48.49.020 or 48.49.030" and insert "41.05.700(8), 48.43.735(8), 48.49.020 (19.68 RCW), 48.49.030, 71.24.335(8), or 74.09.325(8),"

On page 20, beginning on line 28 of the striking amendment, strike all of subsection (e)

Renumber the remaining subsections consecutively and correct any internal references accordingly.

Representatives Riccelli and Schmick spoke in favor of the adoption of the amendment to the striking amendment.

Amendment (108) to the striking amendment (089) was adopted.

Representatives Riccelli and Schmick spoke in favor of the adoption of the striking amendment, as amended.

Striking amendment (089), as amended, was adopted.

The bill was ordered engrossed.

There being no objection, the rules were suspended, the second reading considered the third and the bill was placed on final passage.
Representatives Riccelli, Schmick and Harris spoke in favor of the passage of the bill.

The Speaker (Representative Lovick presiding) stated the question before the House to be the final passage of Engrossed Substitute House Bill No. 1196.

ROLL CALL

The Clerk called the roll on the final passage of Engrossed Substitute House Bill No. 1196, and the bill passed the House by the following vote: Yeas, 94; Nays, 3; Absent, 0; Excused, 1.


Voting nay: Representatives Dufault, Robertson and Stokesbary.

Excused: Representative Fey.

ENGROSSED SUBSTITUTE HOUSE BILL NO. 1196, having received the necessary constitutional majority, was declared passed.

Representative Barkis spoke against the passage of the bill.

The Speaker (Representative Orwall presiding) stated the question before the House to be the final passage of Substitute House Bill No. 1331.

ROLL CALL

The Clerk called the roll on the final passage of Substitute House Bill No. 1331, and the bill passed the House by the following vote: Yeas, 73; Nays, 25; Absent, 0; Excused, 0.


Voting nay: Representatives Barkis, Boehnke, Caldier, Chambers, Chandler, Chase, Corry, Dufault, Dye, Harris, Hoff, Jacobsen, Klicker, Kraft, Kretz, MacEwen, Maycumber, McEntire, Mosbrucker, Schmick, Stokesbary, Vick, Walsh, Wilcox and Young.

SUBSTITUTE HOUSE BILL NO. 1331, having received the necessary constitutional majority, was declared passed.

POINT OF PERSONAL PRIVILEGE

Representative Santos congratulated Representative Harris-Talley on the passage of her first bill through the House and asked the Chamber to acknowledge her accomplishment.

CONCERNING RESPIRATORY CARE PRACTITIONERS

The bill was read the second time.

There being no objection, Substitute House Bill No. 1383 was substituted for House Bill No. 1383 and the substitute bill was placed on the second reading calendar.

SUBSTITUTE HOUSE BILL NO. 1383 was read the second time.

There being no objection, the rules were suspended, the second reading considered the third and the bill was placed on final passage.

Representatives Harris-Talley, Goehner and Harris-Talley (again) spoke in favor of the passage of the bill.
Representatives Taylor and Schmick spoke in favor of the passage of the bill.

The Speaker (Representative Orwall presiding) stated the question before the House to be the final passage of Substitute House Bill No. 1383.

ROLL CALL

The Clerk called the roll on the final passage of Substitute House Bill No. 1383, and the bill passed the House by the following vote: Yeas, 98; Nays, 0; Absent, 0; Excused, 0.


SUBSTITUTE HOUSE BILL NO. 1383, having received the necessary constitutional majority, was declared passed.

POINT OF PERSONAL PRIVILEGE

Representative J. Johnson congratulated Representative Taylor on the passage of her first bill through the House and asked the Chamber to acknowledge her accomplishment.

HOUSE BILL NO. 1078, by Representatives Simmons, Young, Dolan, Berry, Fitzgibbon, J. Johnson, Wicks, Chopp, Wylie, Bateman, Ramos, Berg, Shewmake, Tharinger, Ramel, Ortiz-Self, Peterson, Gregerson, Walen, Goodman, Senn, Sells, Ryu, Valdez, Callan, Hackney, Morgan, Ormsby, Pollet, Riccelli, Taylor, Springer, Stonier, Lekanoff, Frame, Santos, Jacobsen, Macri, Davis, Bergquist and Harris-Talley

Restoring voter eligibility for all persons convicted of a felony offense who are not in total confinement under the jurisdiction of the department of corrections.

The bill was read the second time.

There being no objection, Substitute House Bill No. 1078 was substituted for House Bill No. 1078 and the substitute bill was placed on the second reading calendar.

SUBSTITUTE HOUSE BILL NO. 1078 was read the second time.

With the consent of the House, amendment (090) was withdrawn.

Representative Walsh moved the adoption of amendment (091):

On page 1, beginning on line 20, after "(2)" strike all material through "(5)" on page 2, line 21 and insert "(a) Once the right to vote has been ((provisionally)) restored, the sentencing court may revoke the ((provisional)) restoration of voting rights if the sentencing court determines that a person has willfully failed to comply with the terms of his or her order to pay legal financial obligations.

(b) If the ((person has failed to make three payments in a twelve-month period and the county clerk or restitution recipient requests, the prosecutor shall seek revocation of the provisional restoration of voting rights from the court.

(c) To the extent practicable, the prosecutor and county clerk shall inform a restitution recipient of the recipient's right to ask for the revocation of the provisional restoration of voting rights.

(3) If the ((court revokes the ((provisional)) restoration of voting rights, the revocation shall remain in effect until, upon motion by the person whose ((provisional)) voting rights have been revoked, the person shows that he or she has made a good faith effort to pay ((as defined in RCW 10.82.090)) and the court orders that the person's voting rights be restored. As used in this subsection, "good faith effort" means that the person has either (i) paid the principal amount in full; or (ii) made at least 15 payments within an 18-month period, excluding any payments mandatorily deducted by the department of corrections.

((4))) (c) The county clerk shall enter into a database maintained by the administrator for the courts the names of all persons whose ((provisional)) voting rights have been revoked, and update the database for any person whose voting rights have subsequently been restored pursuant to ((4))) (b) of this (section) subsection.

((5))) (3)"
Renumber the remaining subsections consecutively and correct any internal references accordingly.

On page 2, at the beginning of line 24, strike “subsection((e)) (1) ((and (2)))” and insert “subsections (1) and (2)”

On page 3, line 28, after “conviction,” strike “and”

On page 3, line 29, after “conviction” insert “, and I am not disqualified from voting due to a court order revoking my voting rights for failure to comply with the terms for payment of legal financial obligations”

On page 5, line 36, after “voting;” strike “and”

On page 5, beginning on line 37, after “(e)” strike all material through “The” on page 6, line 3 and insert “The ((provisional)) restored right to vote may be revoked if the defendant fails to comply with all the terms of his or her legal financial obligations or an agreement for the payment of legal financial obligations; and

(f) ((The)

Representatives Walsh, Graham, Caldier, Walsh (again), Graham (again) and Caldier (again) spoke in favor of the adoption of the amendment.

Representatives Valdez and Harris-Talley spoke against the adoption of the amendment.

Amendment (091) was not adopted.

Representative Graham moved the adoption of amendment (085):

On page 3, at the beginning of line 14, insert “includes community custody as directed under RCW 9.94A.701(1)(b), but”

On page 5, line 18, after “9.94A.030” insert “and includes community custody as directed under RCW 9.94A.701(1)(b)”

On page 6, at the beginning of line 21, insert “includes community custody as directed under RCW 9.94A.701(1)(b), but”

On page 6, line 23, after “confinement” strike “has the same meaning as in” and insert “includes community custody as directed under RCW 9.94A.701(1)(b) in addition to its definition under”

On page 8, line 21, after “total confinement” insert “includes community custody as directed under RCW 9.94A.701(1)(b), but”

On page 8, line 24, after “confinement” strike “has the same meaning as in” and insert “includes community custody as directed under RCW 9.94A.701(1)(b) in addition to its definition under”

Representatives Graham, Caldier, Orcutt and Graham (again) spoke in favor of the adoption of the amendment.

Representatives Hackney and Goodman spoke against the adoption of the amendment.

Amendment (085) was not adopted.

Representative Graham moved the adoption of amendment (084):

On page 3, line 15, after “9.94A.633(1).” insert “A sentence of total confinement includes community custody imposed as a condition of sentence for a sex offense as defined under RCW 9.94A.030.”

On page 5, line 18, after “confinement” insert “includes community custody imposed as a condition of sentence for a sex offense as defined under RCW 9.94A.030 and”

On page 6, line 22, after “9.94A.633(1).” insert “A sentence of total confinement includes community custody imposed as a condition of sentence for a sex offense as defined under RCW 9.94A.030.”

On page 6, line 23, after “9.94A.030.” insert “A sentence of total confinement includes community custody imposed as a condition of sentence for a sex offense as defined under RCW 9.94A.030.”

On page 8, line 24, after “9.94A.030.” insert “A sentence of total confinement includes community custody imposed as a condition of sentence for a sex offense as defined under RCW 9.94A.030.”
Representatives Graham, Caldier, Graham (again), Caldier (again) and Dufault spoke in favor of the adoption of the amendment.

Representatives Goodman and Harris-Talley spoke against the adoption of the amendment.

Amendment (084) was not adopted.

Representative Simmons moved the adoption of amendment (086):

On page 3, beginning on line 24, after "I" strike all material through "incompetent," on line 25 and insert "am not disqualified from voting due to a court order, and"

On page 4, line 7, after "(2)" strike "(a)"

On page 4, beginning on line 20, strike all of subsection (b)

Correct any internal references accordingly.

On page 8, after line 24, insert the following:

"NEW SECTION. Sec. 8. This act takes effect January 1, 2022."

Correct the title.

Representative Volz moved the adoption of amendment (097) to amendment (086):

On page 1, line 12 of the amendment, after "Sec. 8." strike all material through "January 1" on line 12 and insert "(1) By December 1, 2021, and in compliance with RCW 43.01.036, the department shall submit a report to the appropriate committees of the legislature that includes information on the expected number of people who will have their voting rights restored pursuant to RCW 29A.08.520 as of July 1, 2022, who:

(a) Have been convicted of a serious violent offense, violent offense, or sex offense; and

(b) Are under the authority of the department based on a conviction of an offense under (a) of this subsection.

(2) For purposes of this section:

(a) A person is under the authority of the department of corrections if the person is:

(i) Serving a sentence of confinement in the custody of the department; or

(ii) Subject to community custody as defined in RCW 9.94A.030.

(b) The terms "serious violent offense", "violent offense", and "sex offense" have the same meaning as in RCW 9.94A.030.

(2) This section expires December 31, 2021.

NEW SECTION. Sec. 9. Sections 1 through 7 of this act take effect July 1"
from total confinement under the jurisdiction of the Department of Corrections.

Amendment (083) relates to victim notification requirements.

The Speaker therefore finds and rules that the amendment is outside the scope and object of the bill.

The point of order is well taken.

"Representative Graham moved the adoption of amendment (082):

On page 8, after line 24, insert the following:

"NEW SECTION. Sec. 8. The secretary of state shall submit this act to the people for their adoption and ratification, or rejection, at the next general election to be held in this state, in accordance with Article II, section 1 of the state Constitution and the laws adopted to facilitate its operation."

Correct the title.

Representatives Graham, Caldier, Graham (again) and Walsh spoke in favor of the adoption of the amendment.

Representative Valdez spoke against the adoption of the amendment.

Amendment (082) was not adopted.

The bill was ordered engrossed.

There being no objection, the rules were suspended, the second reading considered the third and the bill was placed on final passage.

Representatives Simmons, Young, Hackney, Harris-Talley, Wicks, Young (again) and J. Johnson spoke in favor of the passage of the bill.

Representatives Caldier, Volz, Walsh, Dent, Sutherland, Graham, Caldier (again), Dufault, Jacobsen, Walsh (again), Mosbrucker, Griffey and Graham (again) spoke against the passage of the bill.

The Speaker (Representative Orwall presiding) stated the question before the House to be the final passage of Engrossed Substitute House Bill No. 1078.

ROLL CALL

The Clerk called the roll on the final passage of Engrossed Substitute House Bill No. 1078, and the bill passed the House by the following vote: Yeas, 57; Nays, 41; Absent, 0; Excused, 0.


Voting nay: Representatives Abbarno, Barkis, Boehnke, Caldier, Chambers, Chandler, Chase, Corry, Dent, Dufault, Dye, Eslick, Gilday, Goehner, Graham, Griffey, Harris, Hoff, Jacobsen, Klicker, Klippert, Kraft, Kretz, MacEwen, Maycumber, McCaslin, McEntire, Mosbrucker, Orcutt, Robertson, Rude, Rule, Schmick, Steele, Stokesbury, Sutherland, Vick, Volz, Walsh, Wilcox and Ybarra.

ENGROSSED SUBSTITUTE HOUSE BILL NO. 1078, having received the necessary constitutional majority, was declared passed.

POINT OF PERSONAL PRIVILEGE

Representative Hansen congratulated Representative Simmons on the passage of her first bill through the House and asked the Chamber to acknowledge her accomplishment.

The Speaker (Representative Orwall presiding) called upon Representative Lovick to preside.

HOUSE BILL NO. 1455, by Representatives Mosbrucker, Boehnke, Young, Sutherland and Jacobsen

Concerning the use of social security numbers by the department of labor and industries and the employment security department.

The bill was read the second time.

There being no objection, Substitute House Bill No. 1455 was substituted for House Bill No. 1455 and the substitute bill was placed on the second reading calendar.

SUBSTITUTE HOUSE BILL NO. 1455 was read the second time.

There being no objection, the rules were suspended, the second reading considered the third and the bill was placed on final passage.

Representatives Mosbrucker and Sells spoke in favor of the passage of the bill.

MOTION

On motion of Representative Griffey, Representatives Robertson and Wilcox were excused.

The Speaker (Representative Lovick presiding) stated the question before the House to be the final passage of Substitute House Bill No. 1455.

ROLL CALL

The Clerk called the roll on the final passage of Substitute House Bill No. 1455, and the bill passed the House by the following vote: Yeas, 60; Nays, 39; Absent, 0; Excused, 0.


Voting nay: Representatives Abbarno, Barkis, Boehnke, Caldier, Chambers, Chandler, Chase, Corry, Dent, Dufault, Dye, Eslick, Gilday, Goehner, Graham, Griffey, Harris, Hoff, Jacobsen, Klicker, Klippert, Kraft, Kretz, MacEwen, Maycumber, McCaslin, McEntire, Mosbrucker, Orcutt, Robertson, Rude, Rule, Schmick, Steele, Stokesbury, Sutherland, Vick, Volz, Walsh, Wilcox and Ybarra.

ENGROSSED SUBSTITUTE HOUSE BILL NO. 1455, having received the necessary constitutional majority, was declared passed.

ROLL CALL

The Clerk called the roll on the final passage of substitute House Bill No. 1455, and the bill passed the House by the following vote: Yeas, 60; Nays, 39; Absent, 0; Excused, 0.


Voting nay: Representatives Abbarno, Barkis, Boehnke, Caldier, Chambers, Chandler, Chase, Corry, Dent, Dufault, Dye, Eslick, Gilday, Goehner, Graham, Griffey, Harris, Hoff, Jacobsen, Klicker, Klippert, Kraft, Kretz, MacEwen, Maycumber, McCaslin, McEntire, Mosbrucker, Orcutt, Robertson, Rude, Rule, Schmick, Steele, Stokesbury, Sutherland, Vick, Volz, Walsh, Wilcox and Ybarra.
The Clerk called the roll on the final passage of Substitute House Bill No. 1455, and the bill passed the House by the following vote: Yeas, 96; Nays, 0; Absent, 0; Excused, 2.


Excused: Representatives Robertson and Wilcox.

SUBSTITUTE HOUSE BILL NO. 1455, having received the necessary constitutional majority, was declared passed.

HOUSE BILL NO. 1492, by Representatives Sells, Macri, Lovick, Berry, Slatter, Thai, Pollet, Ormsby and Stonier

Concerning extended benefits in the unemployment insurance system.

The bill was read the second time.

There being no objection, Substitute House Bill No. 1492 was substituted for House Bill No. 1492 and the substitute bill was placed on the second reading calendar.

SUBSTITUTE HOUSE BILL NO. 1492 was read the second time.

There being no objection, the rules were suspended, the second reading considered the third and the bill was placed on final passage.

Representatives Sells and Hoff spoke in favor of the passage of the bill.

The Speaker (Representative Lovick presiding) stated the question before the House to be the final passage of Substitute House Bill No. 1492.

ROLL CALL

The Clerk called the roll on the final passage of Substitute House Bill No. 1492, and the bill passed the House by the following vote: Yeas, 94; Nays, 2; Absent, 0; Excused, 2.


Voting nay: Representatives Dufault and Kraft.

Excused: Representatives Robertson and Wilcox.

SUBSTITUTE HOUSE BILL NO. 1492, having received the necessary constitutional majority, was declared passed.

HOUSE BILL NO. 1493, by Representatives Sells, Berry, Pollet and Ormsby

Concerning job search monitoring.

The bill was read the second time.

There being no objection, Substitute House Bill No. 1493 was substituted for House Bill No. 1493 and the substitute bill was placed on the second reading calendar.

SUBSTITUTE HOUSE BILL NO. 1493 was read the second time.

There being no objection, the rules were suspended, the second reading considered the third and the bill was placed on final passage.

Representatives Sells and Hoff spoke in favor of the passage of the bill.

The Speaker (Representative Lovick presiding) stated the question before the House to be the final passage of Substitute House Bill No. 1493.

ROLL CALL

The Clerk called the roll on the final passage of Substitute House Bill No. 1493, and the bill passed the House by the following vote: Yeas, 93; Nays, 3; Absent, 0; Excused, 2.

Ryu, Santos, Schmick, Sells, Senn, Shewmake, Simmons, Slatter, Springer, Steele, Stokesbary, Stonier, Sullivan, Sutherland, Taylor, Thai, Tharinger, Valdez, Vick, Volz, Walen, Wicks, Wylie, Ybarra and Mme. Speaker.

Voting nay: Representatives Dufault, Kraft and Young.

Excused: Representatives Robertson and Wilcox.

SUBSTITUTE HOUSE BILL NO. 1493, having received the necessary constitutional majority, was declared passed.

HOUSE BILL NO. 1184, by Representatives Duerr, Ramel, Dolan and Harris-Talley

Concerning risk-based water quality standards for on-site nonpotable water systems.

The bill was read the second time.

There being no objection, Substitute House Bill No. 1184 was substituted for House Bill No. 1184 and the substitute bill was placed on the second reading calendar.

SUBSTITUTE HOUSE BILL NO. 1184 was read the second time.

Representative Goehner moved the adoption of amendment (107):

On page 2, line 17, after "permit" strike "criteria"

On page 2, beginning on line 19, after "Washington." strike all material through "requirements." on line 24

On page 2, line 25, after "owner or" strike "construction"

On page 2, line 26, after "impervious" strike "services" and insert "surfaces"

Representatives Goehner and Duerr spoke in favor of the adoption of the amendment.

Amendment (107) was adopted.

The bill was ordered engrossed.

There being no objection, the rules were suspended, the second reading considered the third and the bill was placed on final passage.

Representatives Duerr, Goehner and Volz spoke in favor of the passage of the bill.

Representative Kraft spoke against the passage of the bill.

The Speaker (Representative Lovick presiding) stated the question before the House to be the final passage of Engrossed Substitute House Bill No. 1184.

ROLL CALL

The Clerk called the roll on the final passage of Engrossed Substitute House Bill No. 1184, and the bill passed the House by the following vote: Yeas, 90; Nays, 6; Absent, 0; Excused, 2.


Excused: Representatives Robertson and Wilcox.

ENGROSSED SUBSTITUTE HOUSE BILL NO. 1184, having received the necessary constitutional majority, was declared passed.

HOUSE BILL NO. 1294, by Representatives Goodman, Davis, Macri and Ormsby

Addressing misdemeanant supervision services by limited jurisdiction courts.

The bill was read the second time.

There being no objection, Substitute House Bill No. 1294 was substituted for House Bill No. 1294 and the substitute bill was placed on the second reading calendar.

SUBSTITUTE HOUSE BILL NO. 1294 was read the second time.

There being no objection, the rules were suspended, the second reading considered the third and the bill was placed on final passage.

Representatives Goodman and Walsh spoke in favor of the passage of the bill.

The Speaker (Representative Lovick presiding) stated the question before the House to be the final passage of Substitute House Bill No. 1294.

ROLL CALL

The Clerk called the roll on the final passage of Substitute House Bill No. 1294, and the bill passed the House by the following vote: Yeas, 96; Nays, 0; Absent, 0; Excused, 2.

Excused: Representatives Robertson and Wilcox.

SUBSTITUTE HOUSE BILL NO. 1294, having received the necessary constitutional majority, was declared passed.

HOUSE BILL NO. 1309, by Representatives Eslick, Ramel, Paul and Lekanoff

Concerning the dates of certification of levies.

The bill was read the second time.

There being no objection, Substitute House Bill No. 1309 was substituted for House Bill No. 1309 and the substitute bill was placed on the second reading calendar.

SUBSTITUTE HOUSE BILL NO. 1309 was read the second time.

There being no objection, the rules were suspended, the second reading considered the third and the bill was placed on final passage.

Representatives Eslick, Ramel and Orcutt spoke in favor of the passage of the bill.

The Speaker (Representative Lovick presiding) stated the question before the House to be the final passage of Substitute House Bill No. 1309.

ROLL CALL

The Clerk called the roll on the final passage of Substitute House Bill No. 1309, and the bill passed the House by the following vote: Yeas, 96; Nays, 0; Absent, 0; Excused, 2.


Excused: Representatives Robertson and Wilcox.

SUBSTITUTE HOUSE BILL NO. 1309, having received the necessary constitutional majority, was declared passed.

HOUSE BILL NO. 1271, by Representatives Orwall, Goehner, Goodman, Thai, Fey, Pollet and Harris-Talley

Ensuring continuity of operations in the offices of county elected officials during the current COVID-19 pandemic and future public health crises.

The bill was read the second time.

Representative Orwall moved the adoption of amendment (050):

On page 3, at the beginning of line 23, strike "eighteen" and insert "((eighteen)) 21"

Representatives Orwall and Goehner spoke in favor of the adoption of the amendment.

Amendment (050) was adopted.

The bill was ordered engrossed.

There being no objection, the rules were suspended, the second reading considered the third and the bill was placed on final passage.

Representatives Orwall and Goehner spoke in favor of the passage of the bill.

Representative Kraft spoke against the passage of the bill.

The Speaker (Representative Lovick presiding) stated the question before the House to be the final passage of Engrossed House Bill No. 1271.

ROLL CALL

The Clerk called the roll on the final passage of Engrossed House Bill No. 1271, and the bill passed the House by the following vote: Yeas, 90; Nays, 6; Absent, 0; Excused, 2.

Voting yea: Representatives Abbarno, Barkis, Bateman, Berg, Bergquist, Berry, Boelnke, Bronske, Caldier, Callan, Chambers, Chandler, Chapman, Chase, Chopp, Cody, Corry, Davis, Dent, Dolan, Duerr, Dufault, Dye, Entenman, Eslick, Fey, Fitzgibbon, Frame, Gilday, Goehner, Goodman, Graham, Gregerson, Griffey, Hackney, Hansen, Harris, Harris-Talley,

Excused: Representatives Robertson and Wilcox.

ENGROSSED HOUSE BILL NO. 1271, having received the necessary constitutional majority, was declared passed.

HOUSE BILL NO. 1028, by Representatives Bergquist, McCaslin, Dolan, Stonier and Pollet

Concerning evaluation and recommendation of candidates for residency teacher certification.

The bill was read the second time.

There being no objection, Second Substitute House Bill No. 1028 was substituted for House Bill No. 1028 and the second substitute bill was placed on the second reading calendar.

SECOND SUBSTITUTE HOUSE BILL NO. 1028 was read the second time.

There being no objection, the rules were suspended, the second reading considered the third and the bill was placed on final passage.

Representatives Bergquist, McEntire, Stonier and McCaslin spoke in favor of the passage of the bill.

The Speaker (Representative Lovick presiding) stated the question before the House to be the final passage of Second Substitute House Bill No. 1028.

ROLL CALL

The Clerk called the roll on the final passage of Second Substitute House Bill No. 1028, and the bill passed the House by the following vote: Yeas, 96; Nays, 0; Absent, 0; Excused, 2.


Excused: Representatives Robertson and Wilcox.

SECOND SUBSTITUTE HOUSE BILL NO. 1028, having received the necessary constitutional majority, was declared passed.

There being no objection, the House advanced to the eighth order of business.

MOTION

There being no objection, the Committee on Rules was relieved of the following bills and the bills were placed on the second reading calendar:

- HOUSE BILL NO. 1061
- HOUSE BILL NO. 1075
- HOUSE BILL NO. 1085
- HOUSE BILL NO. 1086
- HOUSE BILL NO. 1105
- HOUSE BILL NO. 1109
- HOUSE BILL NO. 1141
- HOUSE BILL NO. 1160
- HOUSE BILL NO. 1168
- HOUSE BILL NO. 1172
- HOUSE BILL NO. 1202
- HOUSE BILL NO. 1261
- HOUSE BILL NO. 1263
- HOUSE BILL NO. 1269
- HOUSE BILL NO. 1274
- HOUSE BILL NO. 1287
- HOUSE BILL NO. 1297
- HOUSE BILL NO. 1315
- HOUSE BILL NO. 1320
- HOUSE BILL NO. 1322
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- HOUSE BILL NO. 1333
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- HOUSE BILL NO. 1423
- HOUSE BILL NO. 1430
- HOUSE BILL NO. 1443
- HOUSE BILL NO. 1471
- HOUSE BILL NO. 1525

There being no objection, the House adjourned until 9:00 a.m., February 25, 2021, the 46th Legislative Day of the Regular Session.

LAURIE JINKINS, Speaker

BERNARD DEAN, Chief Clerk
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