



**Pharmacy Quality Assurance Commission
March 27, 2025 - Minutes**

Convene: Hawkins DeFrance, Chair, called the meeting to order March 27, 2025, 9:03 a.m.

Commission Members:

Hawkins DeFrance, Chair
Ann Wolken, Vice Chair
Jerrie Allard
Stephanie Bardin
Teri Ferreira
Patrick Gallaher
Judy Guenther
Kenneth Kenyon
Matthew Ray
Craig Ritchie
Uyen Thorstensen (absent
from 10:15am-10:38am)
Huey Yu

Commission Members Absent:

William Hayes

Staff:

Marlee O'Neill, Executive
Director
Si Bui, Inspector Supervisor
Christopher Gerard, AAG
Rachel Sahi
Taifa "Nomi" Peaks
Joshua Munroe
Haleigh Mauldin
Julia Katz
Irina Harris
Madison Washington
Amy Robertson
Scott Craig
Justin Sisney
Michael Kelly

1. Call to Order, Hawkins DeFrance, Chair

1.1. Meeting Agenda Approval – March 27, 2025

MOTION: Ann Wolken moved to amend the agenda to add that during lunch, Panel A of the commission will meet in closed session pursuant to RCW 42.30.140(1). Craig Ritchie, seconded. Motion carried, 12:0.

MOTION: Ken Kenyon moved to approve the amended agenda for the March 27, 2025, Business Meeting. Matthew Ray, seconded. Motion carried, 12:0.

1.2. Meeting Minutes Approval – February 6, 2025

MOTION: Ken Kenyon moved to amend the meeting minutes from February 6, 2025, with the corrections to the times he was absent from the meeting which was from 10:56 a.m. – 11:24 a.m. and 1:30 p.m. – 2:00 p.m. Matthew Ray, seconded. Motion carried, 12:0.

MOTION: Craig Ritchie moved to approve the amended business meeting minutes for February 6, 2025. Ken Kenyon, seconded. Motion carried, 12:0.

2. Consent Agenda

2.1. Correspondence

- 2.1.1. National Precursor Log Exchange Monthly Dashboard – January and February
- 2.1.2. Pharmaceutical Firms Application Report

2.2. Ancillary Utilization Plans Approval

- 2.2.1. Arbor Health
- 2.2.2. Columbia Valley Community Health
- 2.2.3. Infusion Solutions
- 2.2.4. Paramount Pharmacy
- 2.2.5. Peninsula Community Health Services
- 2.2.6. Nordic Pharmacy
- 2.2.7. RX Pharmacy Long Term Care (LTC)
- 2.2.8. Franciscan Hospice LTC

2.3. Pharmacy Technician Training Program Approval

- 2.3.1. Cascade Specialty Pharmacy
- 2.3.2. Columbia Valley Community Health
- 2.3.3. Family Health Centers Pharmacy
- 2.3.4. Goldendale Pharmacy
- 2.3.5. Kuslers Compounding Pharmacy
- 2.3.6. Moses Lake Community Health Center Pharmacy
- 2.3.7. Nordic Pharmacy
- 2.3.8. Rays Pharmacy
- 2.3.9. RX Pharmacy LTC
- 2.3.10. Sy Pharmacy and Wellness
- 2.3.11. Tallmans Pharmacy
- 2.3.12. Whitestone Pharmacy multiple locations
- 2.3.13. Hoagland Pharmacy multiple locations

MOTION: Ann Wolken moved to approve the consent agenda except for items 2.2.2. Columbia Valley Community Health, 2.2.3. Infusion Solutions, and 2.2.4. Paramount Pharmacy. Teri Ferreira, seconded. Motion carried, 12:0.

- 2.4. Regular Agenda Items Pulled from 2.1, 2.2, or 2.3. The commission discussed items removed from the consent agenda and placed them on the regular agenda for separate discussions.

2.2.2. Columbia Valley Community Health

MOTION: Teri Ferreira moved to approve item 2.2.2. Columbia Valley Community Health, contingent on striking “The Commission will be notified within 30 days of any changes to the program.” Ken Kenyon, seconded. Motion carried, 12:0.

2.2.3. Infusion Solutions

MOTION: Teri Ferreira moved to approve item 2.2.3. Infusion Solutions, contingent on changing the word “dispenses” to “hands out” in number 6 of the pharmacy technician AUP. Ken Kenyon, seconded. Motion carried, 12:0.

2.2.4. Paramount Pharmacy

MOTION: Terri Ferreira moved to deny item 2.2.4. Paramount Pharmacy and to ask the entity to clarify letter K in the pharmacy assistant AUP and to have the entity change “dispenses” to “hands out” in letter G of both the pharmacy assistant and pharmacy technician AUP. Ann Wolken, seconded. Motion carried, 12:0.

3. Presentations

3.1. Presentation on Healthcare Enforcement and Licensing Management System (HELMS)

Carly McCarthy, HELMS Communications Consultant, provided an update on HELMS.

Commissioners asked staff to send a GovDelivery advising licensees of a possible credentialing freeze around the end of April 2025.

4. New Business

4.1. Resolutions for National Association of Boards of Pharmacy (NABP) Annual Meeting

MOTION: Ken Kenyon moved to support District 1’s resolution on drugs lost in transit. Matthew Ray, seconded. Motion carried, 12:0.

MOTION: Ken Kenyon moved to support District 6’s resolution (co-supported by Districts 7 and 8) on care coordination. Matthew Ray, seconded. Motion carried, 12:0.

MOTION: Ken Kenyon moved to support District 6’s resolution (co-supported by Districts 7 and 8) on community health workers, but if additional information is presented at the NABP annual meeting, the commission gives the voting delegate permission not to support this resolution. Stephanie Bardin, seconded. Motion carried, 12:0.

MOTION: Ken Kenyon moved to support District 6’s resolution (co-supported by Districts 7 and 8) on joint accountability for pharmacy compliance. Teri Ferreira, seconded. Motion carried, 12:0.

MOTION: Matthew Ray moved to support District 6’s resolution (co-supported by Districts 7 and 8) on payer, processor, payment rates and methodologies impacting patient safety. Patrick Gallaher, seconded. Motion carried, 12:0.

MOTION: Patrick Gallaher moved to support District 6’s resolution (co-supported by Districts 7 and 8) for national practice pharmacy standards. Ken Kenyon, seconded. Motion carried, 12:0.

MOTION: Ken Kenyon moved to support District 7’s resolution (co-supported by Districts 6 and 8) that NABP partner with other pharmacy organizations and engage with the National Conference of State Legislatures, the Council of State Governments, and the National Governors Association and other policy organizations on current pharmacy issues. Stephanie Bardin, seconded. Motion carried, 12:0.

MOTION: Ken Kenyon moved to support District 8’s resolution (co-supported by District 7) on the implementation of a standard of care regulatory model. Patrick Gallaher, seconded. Motion carried, 12:0.

MOTION: Ken Kenyon moved to support District 8’s resolution (co-supported by Districts 7 and 8) on medications for opioid use disorder (MOUD). Patrick Gallaher, seconded. Motion carried, 12:0.

4.2. NABP 2025-2026 Committees and Task Forces

MOTION: Ken Kenyon moved to approve William Hayes’ request to apply to participate on a NABP committee or task force of his choosing. Jerrie Allard, seconded. Motion carried, 11:0.

4.3. Frequently Asked Question on Sterile Hypodermic Syringes and Needles

MOTION: Ken Kenyon moved to adopt the FAQ with the edit of changing “can” to “may” and have staff research intramuscular needles as well as any other edits that may provide clarity and bring this back to the commission at a future business meeting. Ann Wolken, seconded. Motion carried, 12:0.

MOTION: Jerrie Allard moved to have staff bring the topic of RCW 70.115.050 to a future business meeting for discussion on whether the commission should seek a legislative change to this law. Patrick Gallaher, seconded. Motion carried, 12:0

5. Old Business

5.1. Rescinding of Policy Statement on Regulation of the Handling of Hazardous Drugs

MOTION: Matthew Ray moved to rescind the Policy Statement on the Regulation of the Handling of Hazardous Drugs, Number 60.1. Stephanie Bardin, seconded. Motion carried, 12:0.

6. Strategic Plan

6.1. Strategic Plan Implementation Update

Marlee O'Neill provided an update on the implementation of the strategic plan.

7. Rules and Legislation Updates

7.1. Rules Tracker Update

MOTION: Ken Kenyon moved to rescind Policy Statement P008, Regulatory Standards Applicable to Manufacturers and Wholesalers of Dialysis Devices and Legend Drugs for Home Dialysis, on April 18, 2025, when the rulemaking on Manufacturers and Wholesalers of Dialysate and Dialysis Devices takes effect. Teri Ferreira, seconded. Motion carried, 12:0.

7.2. 2025 Weekly Legislative Update

Joshua Munroe reviewed bills pertinent to the commission.

7.3. Draft Comment on Department of Health Sunrise Review: Pharmacist Scope of Practice

MOTION: Hawkins DeFrance moved to delegate Ken Kenyon to provide comment at the public comment meeting on the Pharmacist Scope of Practice Sunrise Review. Judy Guenther, seconded. Motion carried, 12:0.

MOTION: Ann Wolken moved to approve the draft comment without edits. Teri Ferreira, seconded. Motion carried, 12:0.

7.4. Rules Workshop: Utilization of Ancillary Personnel

MOTION: Patrick Gallaher moved to pause work on proposed new rule WAC 246-945-316 Pharmacy Technician Final Product Verification. Matthew Ray, seconded. Motion failed, 5:7.

MOTION: Teri Ferreira moved to task back proposed rule WAC 246-945-316 Pharmacy Technician Final Product Verification to staff to review data and comments received and bring another iteration of the rule to a future business meeting. Stephanie Bardin, seconded. Motion carried, 10:1:1.

7.5. Rules Workshop: Alternate Distribution Models

MOTION: Matthew Ray moved to approve the draft rule language as presented and direct staff to file a CR-102 on Alternate Distribution Models. Judy Guenther, seconded. Motion carried, 12:0.

7.6. Rules Workshop: Pharmacy Inspection Requirements for Modifications or Remodels

MOTION: Matthew Ray moved to approve the draft rule language as presented and direct staff to file a CR-102 on Pharmacy Inspection Requirements for Modifications or Remodels. Patrick Gallaher, seconded. Motion carried, 12:0.

8. Open Forum

No public comments were received.

9. Commission Member Reports

9.1. Open Discussion Related to Items or Issues Relevant to Commission Business/Pharmacy Practice

Hawkins DeFrance provided a reminder that the Nonresident Pharmacy Directive Task Force will meet from 1-2pm PST on Tuesday, April 29, 2025.

Hawkins DeFrance shared that Bonnie Bush has stepped down from her role as a commissioner and thanked Bonnie for her years of service and work on the commission.

Patrick Gallaher asked staff if there was a way for the commission to pay for a subscription to United States Pharmacopeia-National Formulary (USP-NF) Online for the commissioners.

Patrick Gallaher expressed concern about tariffs and the impact that might have on drugs.

Patrick Gallaher shared that the FDA no longer requires prescribers, pharmacies, and patients to participate in the REMS program for Clozapine and wants to ensure pharmacists are aware of the changes.

10. Staff Reports

10.1. Executive Director – Marlee O’Neill

- Marlee shared that she attended Hawkins’ and Patrick’s senate confirmation hearings, which was the same day Jessica Todorovich, Interim Secretary for DOH, introduced herself to the Senate Health and Long-Term Care Committee.

- On February 19-20, 2025, Marlee participated in NABP's Interstate Privilege Workgroup meeting looking at ways to ensure licensure portability.
- At the OHP All Staff meeting last week, Lindsay Trant-Sinclair and Danielle Lee were recognized for their five years of state service.
- Continuing to work on commissioner recruitment.
- Additional resolution for the NABP annual meeting from the NABP Executive Committee about examining the use of the TOEFL-iBT as a requirement for FPGEC certification

MOTION: Hawkins DeFrance moved to support the NABP Executive Committee's resolution to evaluate the use of the TOEFL-iBT as a requirement for FPGEC certification. Ken Kenyon, seconded. Motion carried, 12:0.

10.2. Pharmacist Supervisor – Si Bui

- Marlee and Si presented to the Southwest Washington Pharmacy Association and, along with Lindsay and Nomi, presented at WSPA's New Drugs New Law.
- Reminded everyone that self-inspections must be completed during the month of March.

10.3. Assistant Attorney General – Christopher Gerard

- Christopher attended one of the FDA's Town Halls related to DSCSA implementation. Information was presented that indicated numerous trading partners were having success in the continued implementation of DSCSA requirements.

11. Summary of Meeting Action Items

- **1.2 Meeting Minutes Approval** – Staff will update and finalize the minutes to include the times Ken Kenyon was missing and post them on the commission's website.
- **2. Consent Agenda** – Staff will relay the decisions to the Office of Customer Service.
- **3.1 Presentation on Healthcare Enforcement and Licensing Management System (HELMS)** – Staff will send a GovDelivery letting licensees know about a likely credentialing freeze at the end of April.
- **4.1 Resolutions for National Association of Boards of Pharmacy (NABP) Annual Meeting** – Staff will provide Hawkins and Ann with the commission's decision on the resolutions ahead of the NABP Annual Meeting.
- **4.2 NABP 2025-2026 Committees and Task Forces** – Staff will let William Hayes know that he can apply to whichever committee or task force he chooses.
- **4.3 Frequently Asked Question on Sterile Hypodermic Syringes and Needles** – Staff will post the FAQ changing “can” to “may.” Staff will research intramuscular needles and any other edits that may provide clarity and bring the

policy statement to a future business meeting. Staff will bring RCW 70.115.050 to a future business meeting for a determination on whether the commission should seek a legislative change to this law.

- **5.1 Rescinding of Policy Statement on Regulation of the Handling of Hazardous Drugs** – Staff will rescind the policy statement and remove it from the web.
- **7.1 Rules Tracker Update** – Staff will rescind, and remove from the web, Policy Statement P008 on April 18, 2025, when the rulemaking on Manufacturers and Wholesalers of Dialysate and Dialysis Devices takes effect.
- **7.3 Draft Comment on Department of Health Sunrise Review: Pharmacist Scope of Practice** – Staff will submit the draft comment by April 1, 2025, and register Ken Kenyon to provide comment at the public comment meeting. Staff will also prepare talking points for Ken.
- **7.4 Rules Workshop: Utilization of Ancillary Personnel** – Staff will continue to refine this rule considering comments received and will continue to research this topic.
- **7.5 Rules Workshop: Alternate Distribution Models** – Staff will file the CR-102.
- **7.6 Rules Workshop: Pharmacy Inspection Requirements for Modifications or Remodels** – Staff will file the CR-102.
- **9.1 Open Discussion Related to Items or Issues Relevant to Commission Business/Pharmacy Practice** – Staff will send another GovDelivery message regarding the Nonresident Pharmacy Directive Task Force meeting. Staff will mail Bonnie Bush her certificate of service on the commission. Staff will research the cost of getting all commissioners a subscription to USP.

4:17 p.m. Business Meeting Adjourned

2.1.1. National Precursor Log Exchange Dashboard - March and April

MONTHLY PROGRAM ADMINISTRATOR'S DASHBOARD - March

2 Logins - 0 Searches - 0 Report Queries - 20 Active Watches - 0 Active Watch Hits		
NEW USERS THIS MONTH New Users = 0 Total Accounts = 146 Active Users = 2	TOP USAGE AGENCIES TOP USERS BY USAGE	TOP AGENCIES BY ACTIVE WATCHES 1. ICE - King County (44)

TRANSACTION SUMMARY STATISTICS (2025)				
	JAN	FEB	MAR	TOTAL
PURCHASES	89,628	80,911	87,508	258,047
BLOCKS	3,655	3,072	3,863	10,590
GRAMS SOLD	160,732	146,822	170,909	478,463
BOXES SOLD	90,806	81,950	88,573	261,329
GRAMS BLOCKED	8,590	7,591	9,882	26,063
BOXES BLOCKED	3,867	3,270	4,064	11,201
AVG GRAMS PER BOX BLOCKED	2.22	2.32	2.43	2.32

PHARMACY PARTICIPATION STATISTICS (Mar 2025)	
Enabled Pharmacies	960
Pharmacies Submitting a Transaction	863
Pharmacies Logging in Without a Transaction	6
Inactive Pharmacies	91
Pharmacy Participation for Mar	90.52%

MONTHLY PROGRAM ADMINISTRATOR'S DASHBOARD – April

10 Logins - 2 Searches - 16 Report Queries - 23 Active Watches - 1 Active Watch Hits

<p>NEW USERS THIS MONTH</p> <p>New Users = 1</p> <p>Total Accounts = 147</p> <p>Active Users = 2</p>	<p>TOP USAGE AGENCIES</p> <p>1. DEA-Seattle Office</p> <p>TOP USERS BY USAGE</p> <p>1. Jalen Bynum, DEA-Seattle Office</p>	<p>TOP AGENCIES BY ACTIVE WATCHES</p> <p>1. ICE - King County (44)</p> <p>2. DEA-Seattle Office (2)</p>
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TRANSACTION SUMMARY STATISTICS (2025)

	JAN	FEB	MAR	APR	TOTAL
PURCHASES	89,628	80,911	87,508	85,233	343,280
BLOCKS	3,655	3,072	3,863	3,942	14,532
GRAMS SOLD	160,732	146,822	170,909	173,669	652,132
BOXES SOLD	90,806	81,950	88,573	86,493	347,822
GRAMS BLOCKED	8,590	7,591	9,882	10,262	36,325
BOXES BLOCKED	3,867	3,270	4,064	4,156	15,357
AVG GRAMS PER BOX BLOCKED	2.22	2.32	2.43	2.47	2.36

PHARMACY PARTICIPATION STATISTICS (Apr 2025)

Enabled Pharmacies	961
Pharmacies Submitting a Transaction	863
Pharmacies Logging in Without a Transaction	0
Inactive Pharmacies	98

Pharmacy Participation for Apr	89.8%
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DISCLAIMER: This is an automated report meant to give you a quick snapshot of the NPLeX system in your state. The statistics listed in this report are only meant to be a general overview and not necessarily the exact final numbers. Prior to releasing any statistics mentioned in this report, we highly recommend that you verify the numbers with your NPLeX customer relationship manager. For questions or issues, please contact krista.mccormick@equifax.com.

2.1.2. Proposed 2026 Business Meeting Dates



Pharmacy Quality Assurance Commission
PO Box 47852 Olympia, WA 98504
www.doh.wa.gov • TDD Relay: 711

2026 PQAC Business Meetings

Date	Time	Location
February 5, 2026	9:00 am – 4:00 pm	Zoom and TBD
April 2, 2026	9:00 am – 4:00 pm	Zoom and TBD
May 28, 2026	9:00 am – 4:00 pm	Zoom and TBD
July 23, 2026	9:00 am – 4:00 pm	Zoom and TBD
September 17, 2026	9:00 am – 4:00 pm	Zoom and TBD
November 5, 2026	9:00 am – 4:00 pm	Zoom and TBD
December 17, 2026	9:00 am – 1:00 pm	Zoom and TBD

Pharmacy Commission

FY2024 Starting Fund Balance

\$5.99M

Current Fund Balance

\$7.14M

Helms Allocation

(\$272K)

Revenue

\$15.63M

Expenses+Total Indirect+HELMS

\$14.39M

2024

2025

01

03

05

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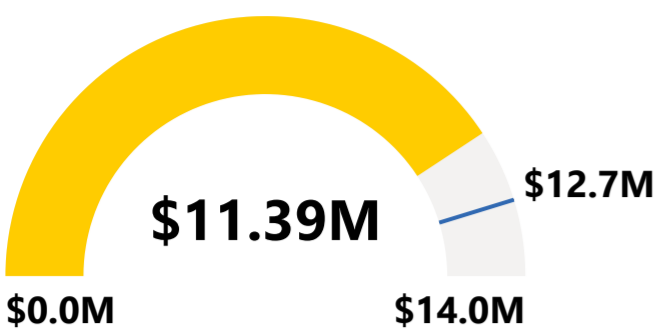
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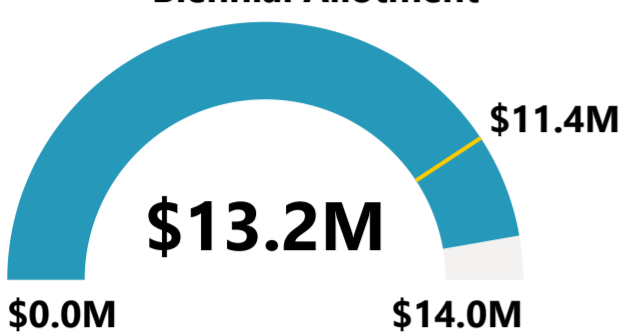
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Biennial Allotment To Date

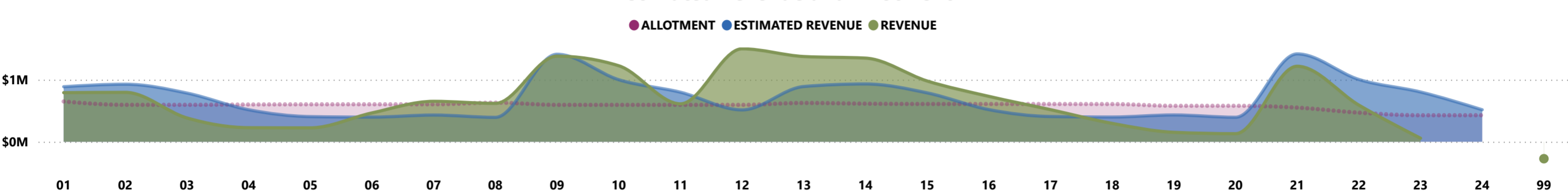


Biennial Allotment



Health Professions	EXPENSES TO DATE	ALLOTMENT TO DATE	VARIANCE TO DATE	ALLOTMENT	ACTUAL TOTAL INDIRECT
Pharmacy Commission	\$11,394,950	\$12,660,868	\$1,265,918	\$13,987,147	\$2,804,777
Travel	\$138,229	\$76,839	(\$61,390)	\$87,816	
Salaries & Benefits	\$5,867,545	\$6,286,560	\$419,015	\$7,182,282	
IT Equipment	\$23,953	\$20,936	(\$3,017)	\$20,936	
Intra-Agency Charges - Other	\$741,950	\$839,161	\$97,211	\$954,640	
Intra-Agency Charges - Discipline	\$1,448,689	\$1,516,799	\$68,110	\$1,588,510	
Intra-Agency Charges - Credentialing	\$2,380,118	\$3,153,384	\$773,266	\$3,276,196	
Indirect					\$2,804,777
Grants	\$121,196	\$149,646	\$28,450	\$171,024	
Goods and Services	\$61,491	\$55,037	(\$6,454)	\$62,879	
Contracts	\$7,950		(\$7,950)		
Board/Comission Pay	\$99,819	\$85,575	(\$14,244)	\$97,800	
Attorney General Services	\$504,010	\$476,931	(\$27,079)	\$545,064	
Total	\$11,394,950	\$12,660,868	\$1,265,918	\$13,987,147	\$2,804,777

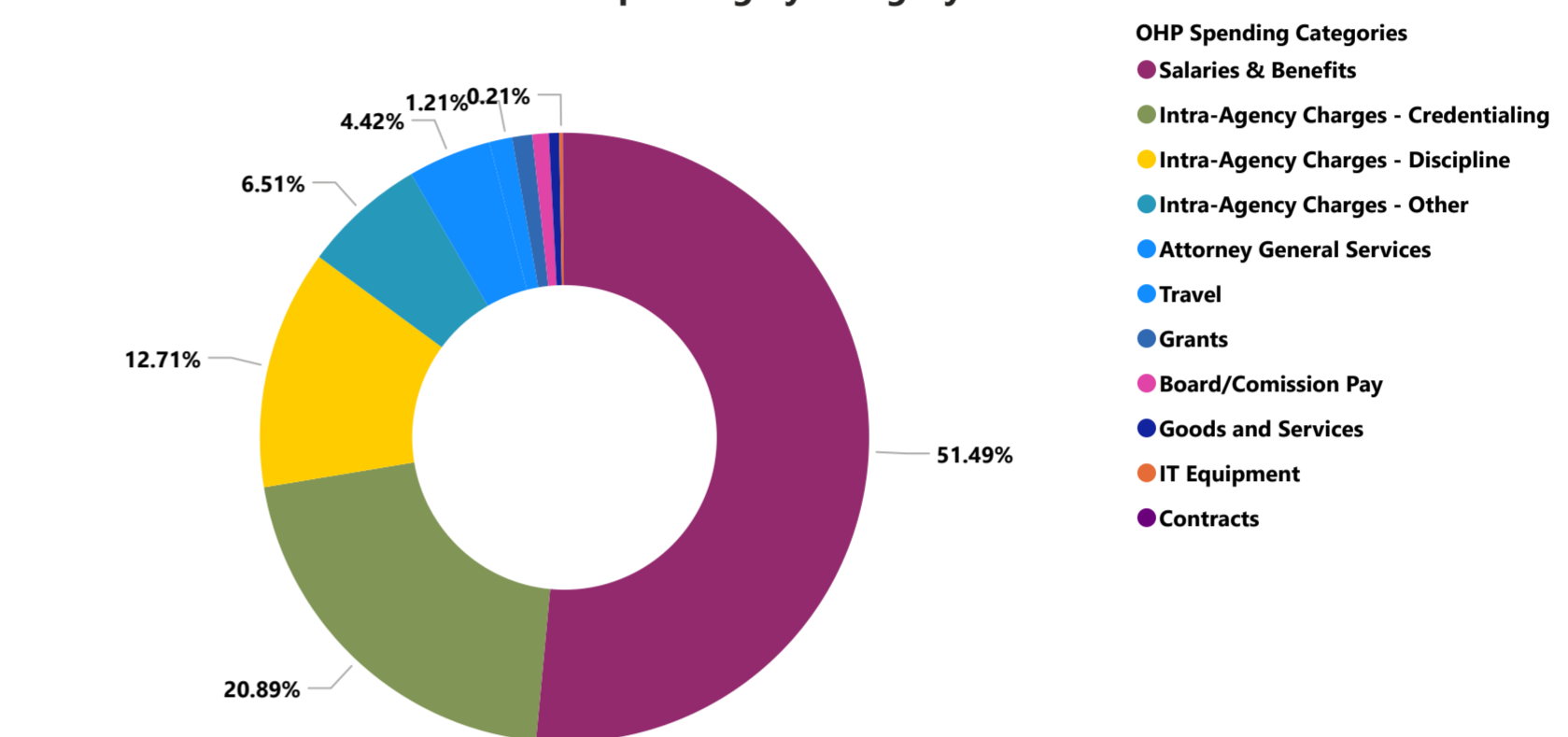
Estimated Revenue and Allotment



Job (POS)	Vacant Permanent Positions
ADMINISTRATIVE ASSISTANT 3	0
EXEC DIRECTOR, PHARMACY COMMISSION - DOH	0
HEALTH SERVICES CONSULTANT 1	0
HEALTH SERVICES CONSULTANT 2	0
HEALTH SERVICES CONSULTANT 4	0
MANAGEMENT ANALYST 4	1
PHARMACIST - INVESTIGATOR	2
PHARMACIST SUPERVISOR	0
WMS BAND 2	0
Total	3

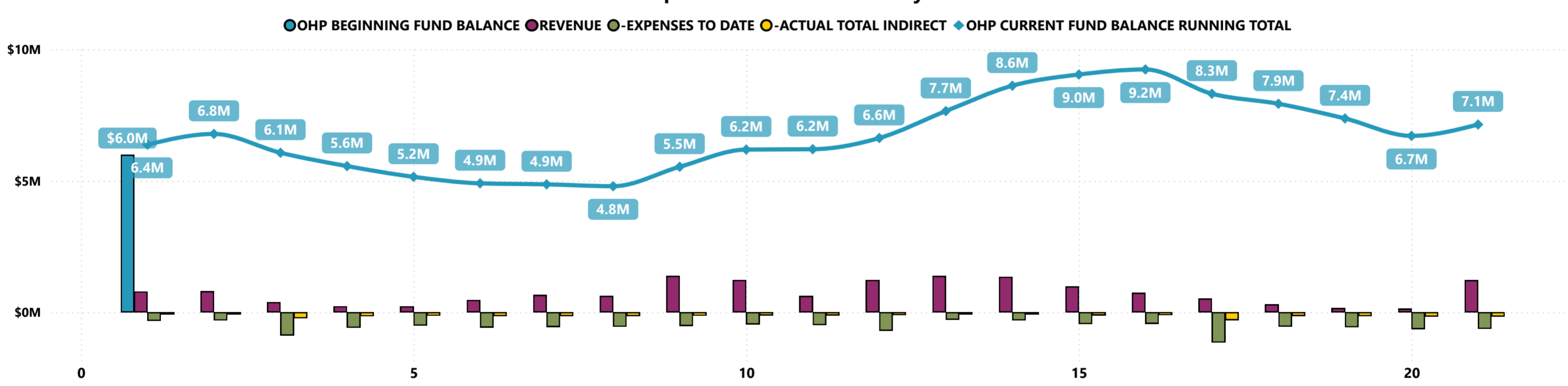
Master Indexes+Title	EXPENSES BY STAFF MONTHS -PAYROLL	ALLOTMENT TO DATE BY STAFF MONTHS
62401600 - PHARMACY COMMISSION	405.82	412.30
62401601 - PHARMACY INVESTIGATIONS	79.80	86.52
62401603 - PHARMACY COMMISSION CREDENTIALING	27.45	
Total	513.07	498.82

Spending by Category

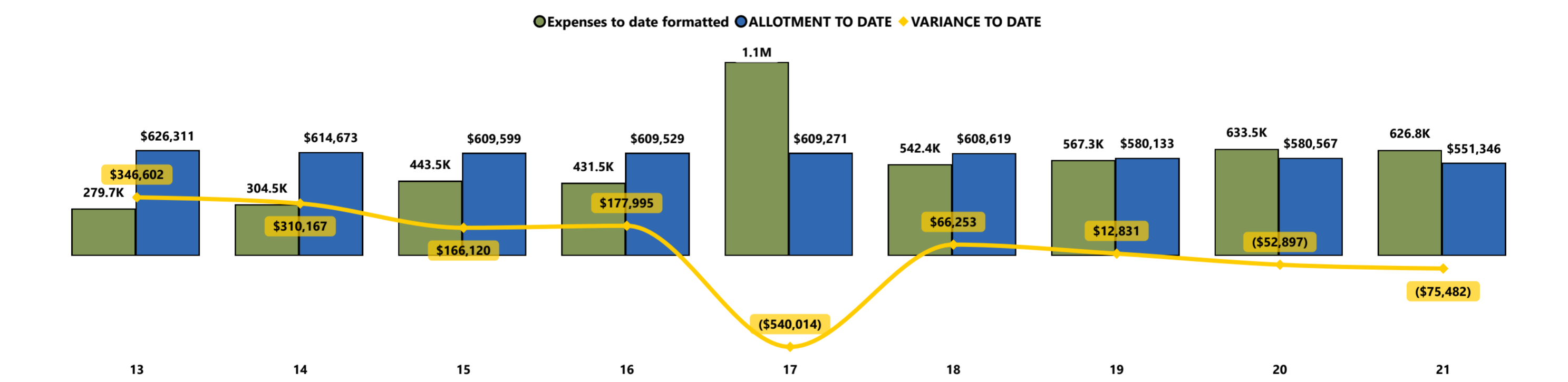


Health Professions	REVENUE	ESTIMATED REVENUE	REVENUE VARIANCE
Pharmacy Commission	\$15,354,401	\$14,655,347.00	\$699,054
Total	\$15,354,401	\$14,655,347.00	\$699,054

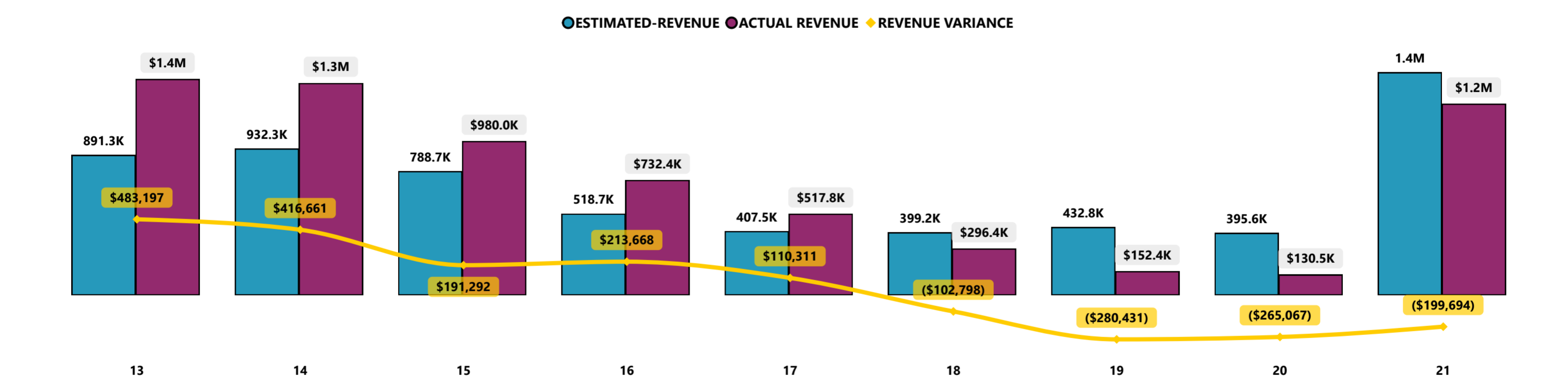
Revenue Vs Expenditure - Fund Balance by Fiscal Month



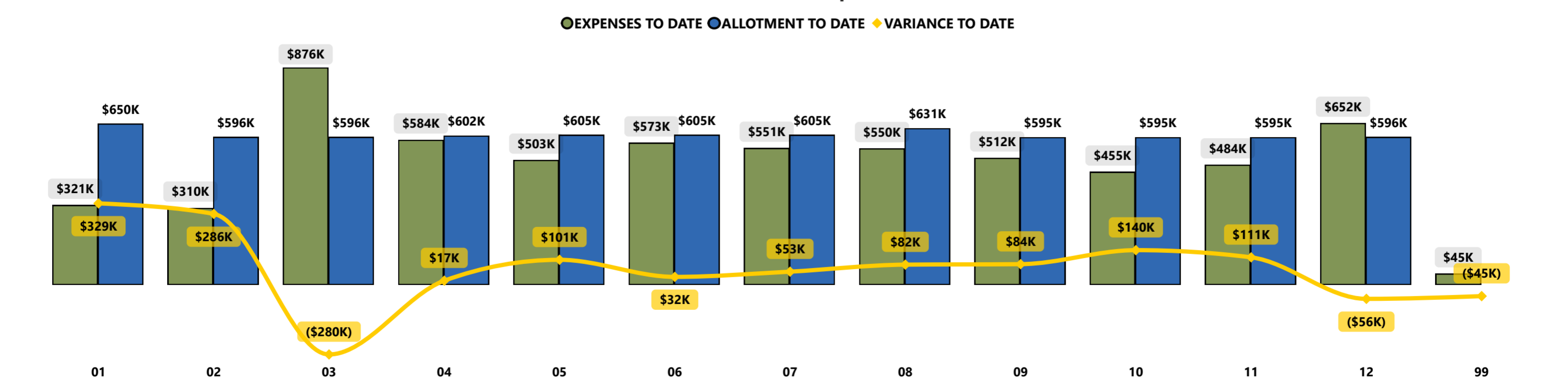
FY25 Estimated and Actual Expenditure Variance



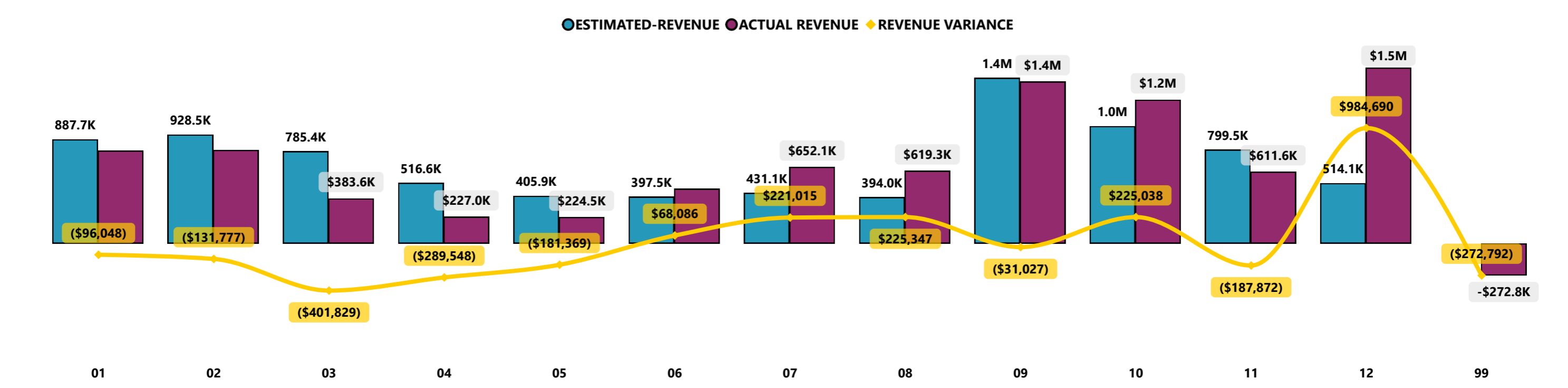
FY25 Estimated and Actual Revenue Variance



FY24 Estimated and Actual Expenditure Variance



FY24 Estimated and Actual Revenue Variance





Commission SBAR Communication

Agenda Item/Title: Policy Statement P014: Commission Approved Examinations and WAC 246-945-165 & 246-945-205

Date SBAR Communication Prepared: May 9, 2025

Reviewer: T. Nomi Peaks

☒ Action ☐ Information ☐ Follow-up ☐ Report only

Situation: Program staff request the commission update Policy Statement P014, Commission Approved Examinations and WAC 246-945-165 & 246-945-205.

Background: The Pharmacy Quality Assurance Commission (commission) adopted Policy Statement P014, [Commission Approved Examinations and WAC 246-945-165 and 246-945-205](#), in December 2024. This policy established the commission-approved examinations for pharmacy technicians and pharmacists described in WAC 246-945-165 and 246-945-205.

For pharmacy technicians, the national certification examinations approved by the commission are the Pharmacy Technician Certification Board's (PTCB) Pharmacy Technician Certification Exam (PTCE) and the National Healthcareer Association's (NHA) Exam for the Certification of Pharmacy Technicians (ExCPT).

Assessment:

A [new ExCPT](#) will be released by NHA on July 9, 2025. The examination was updated by NHA to reflect the skills and competencies needed by Certified Pharmacy Technicians (CPhT) in today's rapidly evolving workforce.

Program staff seek to update the policy statement to reflect approval of the new ExCPT exam that will be released by NHA on July 9, 2025.

Recommendation: Program staff recommend the commission approve updating Policy Statement P014, [Commission Approved Examinations and WAC 246-945-165 and 246-945-205](#), reflect approval of the new ExCPT exam that will be released by NHA on July 9, 2025.

Follow-up Action: If approved, commission staff will update the policy statement.

Department of Health
Pharmacy Quality Assurance Commission

Policy Statement

<i>Title:</i>	Commission Approved Examinations and WACs 246-945-165 and 246-945-205	<i>Number: P014</i>
<i>References:</i>	RCW 18.64.005 ; RCW 18.64.080 ; RCW 18.64A.020 ; WAC 246-945-165 ; WAC 246-945-205 ;	
<i>Contact:</i>	Marlee B. O'Neill, Executive Director	
<i>Phone:</i>	(360) 236-4946	
<i>Email:</i>	wspqac@doh.wa.gov	
<i>Effective Date:</i>	May 22, 2025	
<i>Supersedes:</i>	N/A	
<i>Approved By:</i>	Hawkins DeFrance, PharmD Pharmacy Quality Assurance Commission Chair	

This policy statement establishes the commission-approved examinations for pharmacy technicians and pharmacists described in WACs 246-945-165 and 246-945-205.

The Pharmacy Quality Assurance Commission (commission) requires in WAC 246-945-205(3)(c) an individual applying for a pharmacy technician license to “pass a national certification examination approved by the commission.” The national certification examinations approved by the commission are the Pharmacy Technician Certification Board’s (PTCB) Pharmacy Technician Certification Exam (PTCE) and the National Healthcareer Association’s (NHA) Exam for the Certification of Pharmacy Technicians (ExCPT), including the new ExCPT effective July 9, 2025.

Pharmacist applicants must also satisfactorily pass exams approved by the commission. WAC 245-945-165(1) requires an individual applying for a pharmacist license to “take and pass a pharmacy licensure examination and jurisprudence examination approved by the commission.” The commission-approved pharmacy licensure examination is the North American Pharmacist Licensure Examination (NAPLEX). The commission-approved jurisprudence examination is the Multistate Pharmacy Jurisprudence Examination (MPJE). Both exams are administered through the National Association of Boards of Pharmacy (NABP).

Commission SBAR Communication

Agenda Item/Title: Policy Statement P007: Accreditation of Colleges of Pharmacy

Date SBAR Communication Prepared: May 8, 2025

Reviewer: T. Nomi Peaks

☒ **Action**

☐ **Information**

☐ **Follow-up**

☐ **Report only**

Situation: Program staff request the Pharmacy Quality Assurance Commission (Commission) amend Policy Statement P007, [Accreditation of Colleges of Pharmacy](#).

Background: The Commission adopted Policy Statement P007, Accreditation of Colleges of Pharmacy, in May 2020. This document states, “The Pharmacy Quality Assurance Commission (Commission) accredits schools and colleges of pharmacy accredited by the Accreditation Council for Pharmacy Education (ACPE) by meeting the 2016 ACPE standards.”

The policy statement also notes, “The Commission will review this policy statement any time there are changes to ACPE’s accreditation standards, or as deemed necessary by the Commission.”

As of July 1, 2025, the 2016 standards will be replaced by ACPE ‘s Accreditation Standards and Key Elements for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree, also known as “[Standards 2025](#).” Program staff are seeking the Commission’s approval to amend P007 to reflect ACPE’s standards update.

Assessment: The final version of “Standards 2025” was approved by the ACPE Board of Directors in June 2024 and has an effective date of July 1, 2025. Programs evaluated by ACPE beginning in the fall of 2025 must comply with “Standards 2025.” Amending P007 will create alignment with the new standards and inform licensees of the update.

Recommendation: Program staff recommend the Commission amend Policy Statement P007, Accreditation of Colleges of Pharmacy to reflect ACPE’s adoption of “Standards 2025.”

Follow-up Action: If approved, Commission staff will withdraw the current policy statement through the code reviser, remove it from the Commission’s website, and replace it with the amended policy statement.



Pharmacy Quality Assurance Commission POLICY

Title:	Accreditation of Schools or Colleges of Pharmacy
Reference:	RCW 18.64.005 and RCW 18.64.080
Contact:	Marlee B. O'Neill, JD, Executive Director
Effective Date:	July 1, 2025
Supersedes:	P007 , May 29, 2020
Approved:	Hawkins DeFrance, PharmD, Pharmacy Quality Assurance Commission Chair

The Pharmacy Quality Assurance Commission (Commission) accredits schools and colleges of pharmacy as required by RCW 18.64.080(1)(c).

The Commission recognizes schools or colleges of pharmacy that are accredited by the Accreditation Council for Pharmacy Education (ACPE) and that meet ACPE's Accreditation Standards and Key Elements for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree ("Standards 2025"), effective July 1, 2025, as being accredited in Washington for the purposes of RCW 18.64.080.

The Commission will review this policy statement any time there are changes to ACPE's accreditation standards, or as deemed necessary by the Commission.

6.1. Frequently Asked Question on Sterile Hypodermic Syringes and Needles

FAQ Approved at the March 27, 2025 Business Meeting

Q: May a pharmacy sell and distribute sterile hypodermic syringes and needles without a prescription?

A: Pharmacies are not prohibited from selling and distributing sterile hypodermic syringes without a prescription (RCW 69.50.4121(3)). Further, individuals over the age of 18 may possess sterile hypodermic syringes and needles for the purpose of reducing blood-borne diseases (RCW 69.50.412(5)).

If “hypodermic syringes, hypodermic needles, or any device adapted for the use of drugs by injection” is sold at retail by a pharmacy, then the pharmacist “shall satisfy himself or herself that the device will be used for the legal use intended” (RCW 70.115.050). The Commission has previously determined that “legal use” includes the distribution of sterile hypodermic syringes and needles for the purpose of reducing the transmission of blood-borne diseases.

DRAFT Revised FAQ for review at the May 22, 2025 Business Meeting

Q: May a pharmacist distribute sterile hypodermic syringes or needles without a prescription?

A: Washington law permits a pharmacist to distribute sterile hypodermic syringes or needles without a prescription, including hypodermic syringes or needles used for subcutaneous or intramuscular injections (RCW 69.50.4121(3)). Washington law also requires that a pharmacist who sells a hypodermic needle or syringe at retail “shall satisfy himself or herself that the device will be used for the legal use intended” (RCW 70.115.050). The Commission has previously determined, and continues to maintain, that the sale of sterile hypodermic syringes and needles for the purpose of reducing the transmission of blood-borne diseases is a legal use under RCW 70.115.050.

6.3. Nonresident Pharmacy: List of Approved Inspection Programs



Department of Health Pharmacy Quality Assurance Commission Directive

Title:	Nonresident Pharmacy: List of Approved Inspection Programs
Reference:	RCW 18.64.360
Contact:	Marlee B. O'Neill, JD, Executive Director
Effective Date:	<i>insert Commission-determined effective date</i>
Supersedes:	Nonresident Pharmacy: Approved List of Recognized States
Approved:	Hawkins DeFrance, PharmD, Pharmacy Quality Assurance Commission Chair

[RCW 18.64.360\(1\)\(b\)](#) requires a nonresident pharmacy, upon initial licensure and at renewal, to submit a copy of an inspection report that is conducted by an inspection program approved by the Pharmacy Quality Assurance Commission (Commission) as having substantially equivalent standards to those of the Commission, and that was issued within the last two years. This directive identifies those inspection programs the Commission has approved as having substantially equivalent standards to those of the Commission.

Approved Inspection Programs

The Commission has approved the inspection programs of the following state boards of pharmacy (or equivalent state regulatory agency) and two third-party inspection programs as having substantially equivalent standards to those of the Commission:

Alabama	New Hampshire
California	New Jersey
Colorado	North Carolina
Connecticut	North Dakota
Gates Healthcare Associates	Ohio
Iowa	Pennsylvania
Massachusetts	South Dakota
Michigan	Virginia
Minnesota	West Virginia
NABP's Verified Pharmacy Program	

Approved Inspection Programs That Do Not Meet Commission Frequency Standards

The Commission has approved the inspection programs of the following state boards of pharmacy (or equivalent state regulatory agency) as having substantially equivalent standards to those of the Commission. The Commission also understands these inspection programs do not conduct inspections every two years. Nonresident pharmacies are reminded that inspection reports submitted as part of an application or as part of the renewal process must have occurred within the last two years. So, while inspection reports conducted by the following state boards of pharmacy (or equivalent state regulatory agency) are acceptable, they must have occurred within the last two years or another inspection report from an approved inspection program will need to be submitted:

Delaware	New York
Nebraska	

Approved Inspection Programs for Nonresident Pharmacies Who Attest They Do Not Engage in Compounding

The Commission has approved the inspection programs of the following state boards of pharmacy (or equivalent state regulatory agency) as having substantially equivalent standards to those of the Commission ***but only for*** nonresident pharmacies attesting that they do not engage in compounding as defined in RCW 18.64.011(6).

Arizona	Montana
Arkansas	Nevada
Florida	New Mexico
Georgia (pending further discussion)	Oklahoma
Idaho	Oregon
Illinois	Rhode Island
Indiana	South Carolina
Kansas	Tennessee
Kentucky	Texas
Louisiana (pending further discussion)	Utah
Maine*	Vermont
Maryland	Wisconsin
Mississippi	Wyoming
Missouri	

*Inspections are not conducted every two years.

Inspection Programs That Have Not Been Approved by the Commission

The Commission has determined that inspections from the following state board of pharmacy (or equivalent state regulatory agency) are not substantially equivalent to those of the Commission and will not be accepted:

Alaska	
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The Commission is aware the Hawaii Board of Pharmacy does not conduct inspections. Nonresident pharmacies located in Hawaii are still required to comply with [RCW 18.64.360\(1\)\(b\)](#) and must provide an inspection report from an approved inspection program as outlined in this Directive.

The Commission will review this Directive on an annual basis.

Need more information? See [frequently asked questions](#).

8.1. Legislative Session Wrap Up

2025 Legislative Session Bill Tracker

[Link to Washington State Legislature Bill Information 2025](#)

Monday, January 13 – First day of session
Friday, February 21 – Policy committee cutoff
Friday, February 28 – Fiscal committee cutoff
Wednesday, March 12 – House of origin cutoff

Wednesday, April 2 – Policy committee cutoff (opposite house)
Tuesday, April 8 – Fiscal committee cutoff (opposite house)
Wednesday, April 16 – Opposite house cutoff
Sunday, April 27 – Sine die: Last day allowed for regular session under state constitution

TVW - <http://www.tvw.org/>

Focus Bills			
Bill # /Companion	Short Title	Brief Description	Committee Action (subject to change)
SHB 1009	Membership of the Pharmacy Quality Assurance Commission	SHB 1009 amends RCW 18.64.001 pertaining to individual eligibility to apply for a seat on the Pharmacy Quality Assurance Commission (commission). The bill changes one of the seats reserved only for a licensed pharmacist to allow for a public member who “may be an owner, officer, or operator of a pharmacy, but may not be licensed as a pharmacist or pharmacy technician” to also apply for the seat. The substitute bill adds an additional seat to the commission reserved for a pharmacy technician.	HB 1009 <i>Sponsor(s):</i> Representatives Low, Ramel, and Eslick <i>Third Reading/Floor Vote (Senate):</i> 3/26/2025, passed through chamber by majority vote (49/0/0/0). <i>Concurrence (House):</i> 4/19/2025, Senate amendments accepted and bill passed final passage (95/0/0/3). <i>Signatures:</i> House Speaker (4/22); Senate President (4/23). <i>Delivered to Governor:</i> 4/24/2025 Governor Signed: 5/12/2025 (effective date: 7/27/2025)
SHB 1186	Prepackaged medication distribution	RCW 70.41.480(3) creates restrictions for a practitioner or registered nurse to distribute prepackaged emergency medications to patients upon discharge from an emergency department. Effective January 1, 2025, these restrictions include no more than a 48-hour supply that can be dispensed to a patient except when:	SHB 1186 <i>Sponsor(s):</i> Representatives Parshley, Rule, Low, Reed, Ramel, Macri, Obras,

Focus Bills			
Bill # /Companion	Short Title	Brief Description	Committee Action (subject to change)
		<ul style="list-style-type: none"> community or hospital pharmacy services will not be available within 48 hours; or human immunodeficiency virus postexposure prophylaxis (HIV PEP) drugs or therapies are required. <p>SHB 1186 amends these exceptions to include when anti-infective drugs or therapies are required or when drugs are packaged directly by the manufacturer in quantities larger than 48 hours (that cannot be altered down to a 48-hour supply), in addition to the above list.</p> <p>The bill also amends RCW 18.64.450 to allow health care entities (HCEs) to dispense and deliver legend drugs and controlled substances beyond the 72-hour limit in the following situations:</p> <ul style="list-style-type: none"> Community or hospital outpatient pharmacy services will not be available within 72 hours; Anti-infectives or human immunodeficiency virus postexposure prophylaxis (HIV PEP) drugs; or Drugs or therapies packaged directly by the manufacturer for a period longer than a 72-hour period. <p>The striker amendment, 1186-S AMS HLTC S2527.1, adds language clarifying that the amended statutes do not permit hospital emergency departments or HCEs to bill separately from the bundled payment for drugs or therapies dispensed pursuant to those sections.</p>	<p>Farivar, Doglio, Fosse, Ormsby, Salahuddin, Bernbaum, and Hill</p> <p><i>Third Reading/Floor Vote:</i> 4/16/2025, passed through chamber by majority vote (49/0/0/0).</p> <p><i>Concurrence (House):</i> 4/21/2025, Senate amendments accepted and bill passed final passage (97/0/0/1).</p> <p><i>Signatures:</i> House Speaker (4/22); Senate President (4/23).</p> <p><i>Delivered to Governor:</i> 4/23/2025</p> <p>Governor Signed: 5/12/2025 (effective date: 7/27/2025)</p>
SHB 1720	Types of medication assistance in community-based care settings	<p>This bill amends the definition of “medication assistance” in RCW 69.41.010(15) for the purpose of expanding the actions available to nonpractitioners providing medication assistance to individuals residing in a community-based or in-home care setting. Nonpractitioners would be allowed to set up diabetic devices for self-administration and would also be allowed to hand injectable medications to an individual for self-administration.</p>	<p>SHB 1720</p> <p><i>Sponsor(s):</i> Representatives Schmick and Low</p> <p><i>Third Reading/Floor Vote (Senate):</i> 3/26/2025, passed through chamber by majority vote (49/0/0/0).</p> <p><i>Signatures:</i> House Speaker (3/31); Senate President (3/31).</p> <p><i>Delivered to Governor:</i> 4/2/2025</p>

Focus Bills			
Bill # /Companion	Short Title	Brief Description	Committee Action (subject to change)
			Governor Signed: 4/7/2025 (effective date: 7/27/2025)
<u>E2SHB 1686</u>	Health care entity registry	<p>This bill seeks to “develop a plan and recommendations with the goal of establishing a complete and interactive registry.” The department is tasked with developing the plan and recommendations with consultation from the HCA, OIC, governor’s office, and OFM, as well as input from stakeholders.</p> <p>The plan and recommendations must identify health care entities that would be required to provide regular reports to the registry. These include but are not limited to “licensed and unlicensed facilities, providers, provider groups, systems, carriers, and health care benefit managers.” The department must also identify information that must be reported and fees to be charged to registering entities.</p> <p>The department must consider opportunities to streamline reporting and information sharing, strategies to “fully understand and monitor” the business structure of health care entities in Washington, including elements such as ownership, funding, and affiliations with external organizations. The department would need to provide an update to the legislature by December 31, 2027 and a final report by December 31, 2028. This bill is null and void if specific funding for the development of recommendations and a plan is not provided by June 30, 2025.</p>	<p><u>E2SHB 1686</u> <i>Sponsor(s):</i> Representatives Bronoske, Fosse, Reed, Scott, Nance, Hill, and Macri</p> <p><i>Third Reading/Floor Vote (Senate):</i> 4/14/2025, passed through chamber by majority vote (49/0/0/0). <i>Signatures:</i> House Speaker (4/15); Senate President (4/16) <i>Delivered to Governor:</i> 4/17/2025 Governor Signed: 4/22/2025 (effective date: 7/27/2025)</p>

Agency Request Bills			
Bill # /Companion	Short Title	Brief Description	Committee Action (subject to change)
2SHB 1422	Modifying the drug take-back program	<p>This bill amends various statutes in chapters 69.48 and 43.131 RCW relating to the drug take-back (i.e. safe medication return program) program. The bill expands the number of required elements that a program operator must submit via report to the department and updates the evaluation and approval standards for such reports.</p> <p>The bill further updates enforcement mechanisms if a program operator is out of compliance and allows the department to set an annual operating fee. A new section is also created in chapter 69.48 RCW to further outline the duties and responsibilities of a drug take-back program operator.</p>	<p>HB 1422 <i>Sponsor(s):</i> Representatives Peterson, Davis, Thai, Ormsby, Hill, Macri, and Timmons</p> <p><i>Executive Session (Ways & Means):</i> 4/25/2025, passed through committee with a DO PASS recommendation. <i>Third Reading/Floor Vote (Senate):</i> 4/26/2025, passed through chamber by majority vote (46/0/0/2). <i>Signatures:</i> House Speaker (4/27); Senate President (4/27). <i>Delivered to Governor:</i> 4/27/2025 Governor Signed: 5/12/2025 (effective date: 7/27/2025)</p>
SB 5051	Consolidating regulatory authority for nursing assistants	This bill amends sections in chapters 18.79 and 18.88A RCW to consolidate the regulatory authority of nursing assistants under the Board of Nursing's jurisdiction.	<p>SB 5051 <i>Sponsor(s):</i> Senators Bateman, Riccelli, Cleveland, Nobles, and Wellman</p> <p><i>Third Reading/Floor Vote (House):</i> 3/26/2025, passed through chamber by majority vote (98/0/0/0). <i>Signatures:</i> Senate President (3/28); House Speaker (3/31). <i>Delivered to Governor:</i> 4/1/2025 Signed by Governor: 4/4/2025 (effective date: 7/1/2026)</p>

Agency Request Bills			
Bill # /Companion	Short Title	Brief Description	Committee Action (subject to change)
SB 5244	WIC program staff exemptions for hematological screening tests	This bill adds a subsection to RCW 18.360.090 to include hematological tests and evaluations conducted by persons working at a special supplemental nutrition program for women, infants, and children (WIC) as exempt from other prohibitions or restrictions in chapter 18.360 RCW.	SB 5244 <i>Sponsor(s):</i> Senators Riccelli, Bateman, Nobles, Saldaña, and C. Wilson <i>Second Reading (Rules):</i> 3/25/2025 <i>Third Reading/Floor Vote:</i> 3/27/2025; passed through chamber by majority vote (93/0/0/5). <i>Signatures:</i> Senate President (3/28); House Speaker (3/31). <i>Delivered to Governor:</i> 4/1/2025 <i>Signed by Governor:</i> 4/4/2025 <i>(effective date: 7/27/2025)</i>

Additional Bills to Watch			
Bill # /Companion	Short Title	Committee Action (subject to change)	
SHB 1209	Transfer of sodium nitrite	HB 1209 <i>Sponsor(s):</i> Representatives Mena, Walen, Reed, Ryu, Berry, Alvarado, Macri, Farivar, Doglio, Pollet, Ormsby, Salahuddin, and Hill <i>Third Reading/Floor Vote (Senate):</i> 3/26/2025, passed through chamber by majority vote (49/0/0/0). <i>Signatures:</i> House Speaker (3/31); Senate President (3/31). <i>Delivered to Governor:</i> 4/2/2025 <i>Signed by Governor:</i> 4/7/2025 (effective date: 4/7/2025)	

Dead/dormant Bills (relevant if needed to pass the budget)		
Bill # /Companion	Short Title	Bill Summary
ESSB 5594	Biosimilar and interchangeable biological product access	<p><u>ESSB 5594</u> <i>Sponsor(s):</i> Senators Harris, Cleveland, Hasegawa, and Shewmake</p> <p><i>Public Hearing (Health Care & Wellness):</i> 3/26/2025 <i>Executive Session (Health Care & Wellness):</i> 4/1/2025, no action taken. <i>Missed cutoff:</i> 4/2/2025, Opposite house policy committee</p>
HB 1725	Biosimilar product access	<p><u>HB 1725</u> <i>Sponsor(s):</i> Representatives Thai, Shavers, Parshley, Duerr, and Macri</p> <p><i>First Reading (House):</i> 1/30/2025, referred to Health Care & Wellness Committee <i>Public Hearing (Health Care & Wellness):</i> 2/12/2025 <i>Missed cutoff:</i> 2/28/2025, House-of-origin policy committee</p>
HB 1520	Pharmacists' scope of practice	<p><u>HB 1520</u> <i>Sponsor(s):</i> Representatives Thai, Reed, Simmons, and Macri</p> <p><i>First Reading (House):</i> 1/22/2025, referred to Health Care & Wellness Committee. <i>Missed cutoff:</i> 2/28/2025, House-of-origin policy committee</p>
SB 5513	Pharmacists' scope of practice	<p><u>SB 5513</u> <i>Sponsor(s):</i> Senators Slatter, Chapman, Nobles, and Short</p> <p><i>First Reading (Senate):</i> 1/27/2025, referred to Health & Long-Term Care Committee. <i>Missed cutoff:</i> 2/28/2025, House-of-origin policy committee</p>
HB 2072	Opioid impact fee on opioid manufacturers	<p><u>HB 2072</u> <i>Sponsor(s):</i> Representative Davis</p> <p><i>Introduced:</i> 4/8/2025, referred to Appropriations committee. <i>Missed cutoff:</i> 4/16/2025, Opposite house floor vote</p>

Dead/dormant Bills (relevant if needed to pass the budget)		
Bill # /Companion	Short Title	Bill Summary
<u>SSB 5019</u>	Prepackaged medication distribution	<p><u>SSB 5019</u> <i>Sponsor(s):</i> Senators Chapman, Bateman, Christian, Dhingra, Harris, Riccelli, Saldaña, Slatter, and Wellman</p> <p><i>Public Hearing (Health & Long-Term Care):</i> 1/23/2025 <i>Executive Session (Health & Long-Term Care):</i> 2/6/2025, substitute bill adopted and passed through committee with a DO PASS recommendation; passed to Rules Committee for second reading (2/7). <i>Missed cutoff:</i> 3/12/2025, House-of-origin floor vote</p>
<u>SSB 5112</u>	Psychologist prescriptive authority certification	<p><u>SSB 5112</u> <i>Sponsor(s):</i> Senators Bateman, Harris, Shewmake, Trudeau, Conway, Nobles, Riccelli, C. Wilson, Robinson, and Hasegawa</p> <p><i>Executive Session (Health & Long-Term Care):</i> 2/21/2025; substitute bill adopted and passed through policy committee with a DO PASS recommendation. Passed to Rules Committee for second reading. <i>Second Reading (Rules):</i> 3/7/2025 <i>Missed cutoff:</i> 3/12/2025, House-of-origin floor vote</p>
<u>SB 5228</u> Agency request legislation	Governor's interagency coordinating council on health disparities updates	<p><u>SB 5228</u> <i>Sponsor(s):</i> Senators Riccelli, Hasegawa, Conway, Nobles, and C. Wilson</p> <p><i>First Reading (Senate):</i> 1/13/2025, referred to Health & Long-Term Care Committee. <i>Public Hearing (Health & Long-Term Care):</i> 1/24/2025 <i>Missed cutoff:</i> 2/28/2025, House-of-origin policy committee</p>
<u>2SSB 5387</u>	Corporate practice of health care (formerly medicine)	<p><u>2SSB 5387</u> <i>Sponsor(s):</i> Senators Robinson, Hasegawa, Lias, Nobles, Riccelli, Stanford, and Valdez</p> <p><i>Public Hearing (Ways & Means):</i> 2/26/2025 <i>Executive Session (Ways & Means):</i> 2/28/2025, 2nd substitute bill introduced, adopted, and passed through committee with a DO PASS recommendation. Passed to Rules Committee for second reading. <i>Missed cutoff:</i> 3/12/2025, House-of-origin floor vote</p>

Dead/dormant Bills (relevant if needed to pass the budget)		
Bill # /Companion	Short Title	Bill Summary
HB 1849	Unexpired prescription drug donation program eligibility	<p>HB 1849 <i>Sponsor(s):</i> Representatives Graham, Griffey, Stuebe, Keaton, Volz, Eslick, and Obras</p> <p><i>First Reading (House):</i> 2/5/2025, referred to Health Care & Wellness Committee. <i>Missed cutoff:</i> 2/28/2025, House-of-origin policy committee</p>
HB 1850	Replacement of continuous glucose monitoring equipment	<p>HB 1850 <i>Sponsor(s):</i> Representatives Graham, Burnett, Griffey, Volz, Eslick, and Obras</p> <p><i>First Reading (House):</i> 2/5/2025, referred to Health Care & Wellness Committee. <i>Missed cutoff:</i> 2/28/2025, House-of-origin policy committee</p>
HB 1638	Good Faith Pain Act	<p>HB 1638 <i>Sponsor(s):</i> Representative Caldier</p> <p><i>First Reading (House):</i> 1/28/2025, referred to Health Care & Wellness Committee. <i>Missed cutoff:</i> 2/28/2025, House-of-origin policy committee</p>
SB 5201	Access to psychedelic substances	<p>SB 5201 <i>Sponsor(s):</i> Senators Salomon, Nobles, Bateman, Trudeau, Lovelett, Frame, Chapman, Hasegawa, Wellman, Holy, King, Saldaña, Schoesler, and J. Wilson</p> <p><i>Public Hearing (Labor & Commerce):</i> 2/18/2025, substitute version heard in committee <i>Executive Session (Labor & Commerce):</i> 2/21/2025 <i>Missed cutoff:</i> 2/28/2025, House-of-origin policy committee</p>
HB 1433	Access to psychedelic substances	<p>HB 1433 <i>Sponsor(s):</i> Representatives Macri, Couture, Ramel, Griffey, Lekanoff, Ormsby, Nance, Walen, Cortes, Fosse, Doglio, Reeves, Goodman, McEntire, Bernbaum, Waters, Street, Pollet, Gregerson, Rude, Simmons, Berry, Fitzgibbon, Parshley, Peterson, Reed, Farivar, Tharinger, and Hill</p> <p><i>First Reading (House):</i> 1/20/2025, referred to Health Care & Wellness Committee. <i>Public Hearing (Health Care & Wellness):</i> 2/5/2025 <i>Missed cutoff:</i> 2/28/2025, House-of-origin policy committee</p>

Dead/dormant Bills (relevant if needed to pass the budget)		
Bill # /Companion	Short Title	Bill Summary
<u>SB 5713</u>	Chemical abortion	<p><u>SB 5713</u> <i>Sponsor(s):</i> Senator Fortunato</p> <p><i>First Reading (Senate):</i> 2/10/2025, referred to Law & Justice Committee. <i>Missed cutoff:</i> 2/28/2025, House-of-origin policy committee</p>
<u>HB 1124</u>	Psychologist prescriptive authority certification	<p><u>HB 1124</u> <i>Sponsor(s):</i> Representatives Simmons, Macri, Senn, Stonier, Ormsby, Tharinger, Kloba, Duerr, Ryu, Morgan, Reed, Callan, Obras, Doglio, Ortiz-Self, Goodman, Reeves, and Hill</p> <p><i>Pre-filed:</i> 12/23/2024 <i>First Reading (House):</i> 1/13/2025, referred to Health Care & Wellness Committee. <i>Missed cutoff:</i> 2/28/2025, House-of-origin policy committee</p>
<u>HB 1034</u>	Nonopioid drugs for the treatment of pain	<p><u>HB 1034</u> <i>Sponsor(s):</i> Representatives Ortiz-Self, Peterson, Simmons, Kloba, Ormsby, Lekanoff, Donaghy, and Hill</p> <p><i>First Reading (House):</i> 1/13/2025, referred to Health Care & Wellness Committee. <i>Public Hearing (Health Care & Wellness):</i> 1/21/2025 <i>Missed cutoff:</i> 2/28/2025, House-of-origin policy committee</p>
<u>SB 5242</u>	Interactive screening program for behavioral health service access	<p><u>SB 5242</u> <i>Sponsor(s):</i> Senators Orwall, Harris, Hasegawa, Krishnadasan, Nobles, Shewmake, Valdez, and C. Wilson</p> <p><i>First Reading (Senate):</i> 1/14/2025, referred to Health & Long-Term Care Committee. <i>Public Hearing (Health & Long-Term Care):</i> 1/28/2025 <i>Missed cutoff:</i> 2/28/2025, House-of-origin policy committee</p>
<u>HB 1675</u>	Corporate practice of medicine	<p><u>HB 1675</u> <i>Sponsor(s):</i> Representatives Thai and Macri</p> <p><i>First Reading (House):</i> 1/28/2025, referred to Health Care & Wellness Committee. <i>Missed cutoff:</i> 2/28/2025, House-of-origin policy committee</p>

Dead/dormant Bills (relevant if needed to pass the budget)		
Bill # /Companion	Short Title	Bill Summary
<u>SB 5452</u>	Licensing psychiatric pharmacists as agency-affiliated counselors	<p><u>SB 5452</u> <i>Sponsor(s):</i> Senators Slatter and Nobles</p> <p><i>First Reading (Senate):</i> 1/23/2025, referred to Health & Long-Term Care Committee. <i>Missed cutoff:</i> 2/28/2025, House-of-origin policy committee</p>
<u>SB 5765</u>	Board-certified psychiatric pharmacists	<p><u>SB 5765</u> <i>Sponsor(s):</i> Senator Slatter</p> <p><i>First Reading (Senate):</i> 2/18/2025, referred to Health & Long-Term Care Committee. <i>Missed cutoff:</i> 2/28/2025, House-of-origin policy committee</p>
<u>SB 5178</u>	Transfer of sodium nitrite	<p><u>SB 5178</u> <i>Sponsor(s):</i> Senators Trudeau, Harris, Frame, Hasegawa, Liias, Nobles, Orwall, Pedersen, Salomon, and Shewmake</p> <p><i>Second Reading (Rules):</i> 2/19/2025 <i>Third Reading/Floor Vote (Senate):</i> 3/3/2025, passed through chamber by majority vote (49/0/0/0)</p> <p><i>First Reading (House):</i> 3/5/2025, referred to Consumer Protection & Business Committee. <i>Missed cutoff:</i> 2/28/2025, House-of-origin policy committee</p>

8.2. Medication Assistance - SHB 1720

CERTIFICATION OF ENROLLMENT

SUBSTITUTE HOUSE BILL 1720

Chapter 26, Laws of 2025

69th Legislature
2025 Regular Session

COMMUNITY-BASED CARE SETTINGS—MEDICATION ASSISTANCE

EFFECTIVE DATE: July 27, 2025

Passed by the House February 20, 2025
Yeas 97 Nays 0

LAURIE JINKINS

**Speaker of the House of
Representatives**

Passed by the Senate March 26, 2025
Yeas 49 Nays 0

DENNY HECK

President of the Senate

Approved April 7, 2025 11:29 AM

BOB FERGUSON

Governor of the State of Washington

CERTIFICATE

I, Bernard Dean, Chief Clerk of the House of Representatives of the State of Washington, do hereby certify that the attached is **SUBSTITUTE HOUSE BILL 1720** as passed by the House of Representatives and the Senate on the dates hereon set forth.

BERNARD DEAN

Chief Clerk

FILED

April 7, 2025

**Secretary of State
State of Washington**

SUBSTITUTE HOUSE BILL 1720

Passed Legislature - 2025 Regular Session

State of Washington

69th Legislature

2025 Regular Session

By House Health Care & Wellness (originally sponsored by Representatives Schmick and Low)

READ FIRST TIME 02/14/25.

1 AN ACT Relating to expanding the types of medication assistance
2 that may be provided to residents of community-based care settings;
3 and amending RCW 69.41.010.

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

5 **Sec. 1.** RCW 69.41.010 and 2024 c 102 s 1 are each amended to
6 read as follows:

7 As used in this chapter, the following terms have the meanings
8 indicated unless the context clearly requires otherwise:

9 (1) "Administer" means the direct application of a legend drug
10 whether by injection, inhalation, ingestion, or any other means, to
11 the body of a patient or research subject by:

12 (a) A practitioner; or

13 (b) The patient or research subject at the direction of the
14 practitioner.

15 (2) "Commission" means the pharmacy quality assurance commission.

16 (3) "Community-based care settings" include: Community
17 residential programs for persons with developmental disabilities,
18 certified by the department of social and health services under
19 chapter 71A.12 RCW; adult family homes licensed under chapter 70.128
20 RCW; and assisted living facilities licensed under chapter 18.20 RCW.

Community-based care settings do not include acute care or skilled nursing facilities.

(4) "Deliver" or "delivery" means the actual, constructive, or attempted transfer from one person to another of a legend drug, whether or not there is an agency relationship.

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

(6) "Dispense" means the interpretation of a prescription or order for a legend drug and, pursuant to that prescription or order, the proper selection, measuring, compounding, labeling, or packaging necessary to prepare that prescription or order for delivery.

(7) "Dispenser" means a practitioner who dispenses.

(8) "Distribute" means to deliver other than by administering or dispensing a legend drug.

(9) "Distributor" means a person who distributes.

(10) "Drug" means:

(a) Substances recognized as drugs in the official United States pharmacopoeia, official homeopathic pharmacopoeia of the United States, or official national formulary, or any supplement to any of them;

(b) Substances intended for use in the diagnosis, cure, mitigation, treatment, or prevention of disease in human beings or animals;

(c) Substances (other than food, minerals or vitamins) intended to affect the structure or any function of the body of human beings or animals; and

(d) Substances intended for use as a component of any article specified in (a), (b), or (c) of this subsection. It does not include devices or their components, parts, or accessories.

(11) "Electronic communication of prescription information" means the transmission of a prescription or refill authorization for a drug of a practitioner using computer systems. The term does not include a prescription or refill authorization transmitted verbally by telephone nor a facsimile manually signed by the practitioner.

(12) "In-home care settings" include an individual's place of temporary and permanent residence, but does not include acute care or skilled nursing facilities, and does not include community-based care settings.

(13) "Legend drugs" means any drugs which are required by state law or regulation of the pharmacy quality assurance commission to be

1 dispensed on prescription only or are restricted to use by
2 practitioners only.

3 (14) "Legible prescription" means a prescription or medication
4 order issued by a practitioner that is capable of being read and
5 understood by the pharmacist filling the prescription or the nurse or
6 other practitioner implementing the medication order. A prescription
7 must be hand printed, typewritten, or electronically generated.

8 (15) "Medication assistance" means assistance rendered by a
9 nonpractitioner to an individual residing in a community-based care
10 setting or in-home care setting to facilitate the individual's self-
11 administration of a legend drug or legend drugs, which may include a
12 controlled substance or controlled substances. It includes reminding
13 or coaching the individual, handing the medication container to the
14 individual, opening the individual's medication container, using an
15 enabler, or placing the medication in the individual's hand, and such
16 other means of medication assistance as defined by rule adopted by
17 the department. A nonpractitioner may help in the preparation of
18 legend drugs ~~((~~or~~))~~, including controlled substances, for self-
19 administration where a practitioner has determined and communicated
20 orally or by written direction that such medication preparation
21 assistance is necessary and appropriate. Medication assistance shall
22 not include assistance with intravenous medications or injectable
23 medications, except ~~((~~prefilled insulin syringes~~))~~ setting up
24 diabetic devices for self-administration or handing injectable
25 medications to an individual for self-administration.

26 (16) "Person" means individual, corporation, government or
27 governmental subdivision or agency, business trust, estate, trust,
28 partnership or association, or any other legal entity.

29 (17) "Practitioner" means:

30 (a) A physician under chapter 18.71 RCW, an osteopathic physician
31 or an osteopathic physician and surgeon under chapter 18.57 RCW, a
32 dentist under chapter 18.32 RCW, a podiatric physician and surgeon
33 under chapter 18.22 RCW, an acupuncturist or acupuncture and Eastern
34 medicine practitioner to the extent authorized under chapter 18.06
35 RCW and the rules adopted under RCW 18.06.010(1)(m), a veterinarian
36 under chapter 18.92 RCW, a registered nurse, advanced practice
37 registered nurse ~~((~~practitioner~~))~~, or licensed practical nurse under
38 chapter 18.79 RCW, an optometrist under chapter 18.53 RCW who is
39 certified by the optometry board under RCW 18.53.010, a physician
40 assistant under chapter 18.71A RCW, a naturopath licensed under

1 chapter 18.36A RCW, a licensed athletic trainer to the extent
2 authorized under chapter 18.250 RCW, a pharmacist under chapter 18.64
3 RCW, when acting under the required supervision of a dentist licensed
4 under chapter 18.32 RCW, a dental hygienist licensed under chapter
5 18.29 RCW, a licensed dental therapist to the extent authorized under
6 chapter 18.265 RCW, or a licensed midwife to the extent authorized
7 under chapter 18.50 RCW;

8 (b) A pharmacy, hospital, or other institution licensed,
9 registered, or otherwise permitted to distribute, dispense, conduct
10 research with respect to, or to administer a legend drug in the
11 course of professional practice or research in this state; and

12 (c) A physician licensed to practice medicine and surgery or a
13 physician licensed to practice osteopathic medicine and surgery in
14 any state, or province of Canada, which shares a common border with
15 the state of Washington.

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

Passed by the House February 20, 2025.

Passed by the Senate March 26, 2025.

Approved by the Governor April 7, 2025.

Filed in Office of Secretary of State April 7, 2025.

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8.3. Rulemaking Update: Wholesaler Suspicious Orders

Wholesaler Suspicious Orders and Zero Reports Language Draft Approved at March 2024 Business Meeting

WAC 246-945-585 Wholesaler—Suspicious orders and due diligence. (1) For the purposes of this section and WAC 246-945-590, "suspicious order" means an order(s) of a controlled substance or drug of concern that, relative to the customer's order history and the history of similarly situated customer, may include:

- (a) Unusual size;
- (b) Substantial deviation from a normal pattern; or
- (c) Unusual frequency.

(2) Wholesalers shall design and operate a system to identify and report suspicious orders to the commission that resulted in customer termination.

(a) Suspicious orders that resulted in customer termination shall be submitted electronically to the commission within five business days of the customer termination, and must include, but not necessarily be limited to:

- (i) Customer name;
- (ii) Customer address;

(iii) Customer DEA registration number, if applicable;

(iv) Washington state license number(s);

(v) Order date;

(vi) Drug name;

(vii) NDC number;

(viii) Quantity ordered; and

(ix) The factual basis for the identification of the order as suspicious and customer termination.

(b) Wholesalers may apply to the commission for an exemption from the reporting requirements if they do not distribute controlled substances or drugs of concern.(3) Except as provided in subsection (4) of this section, a wholesaler shall conduct due diligence on customers ordering or seeking to order controlled substances or drugs of concern, and establish the normal and expected transactions conducted by those customers, in order to identify and prevent the sale of controlled substances or drugs of concern that are likely to be diverted from legitimate channels. Such due diligence measures shall include, but are not limited to, the following, which shall be conducted prior to an initial sale and as necessary:

(a) Questionnaires and affirmative steps by the wholesaler to confirm the accuracy and validity of the information provided, it shall be considered illegal for a customer to provide false or misleading information;

(b) For a customer who is a prescriber, confirmation of prescriber type, specialty practice area, and if the prescriber personally furnishes controlled substances or drugs of concern, the quantity furnished;

(c) Review of drug utilization reports; and

(d) Obtaining and conducting a review of the following:

(i) Methods of payment accepted and in what ratios;

(ii) The ratio of controlled versus noncontrolled prescriptions and overall sales;

(iii) Orders for controlled substances or drugs of concern from other wholesalers U.S. DEA's Automation of Reports and Consolidated Orders System (ARCOS); and

(iv) The ratio of out-of-state patients served compared to in-state patients.

(4) A wholesaler receiving a request for an initial sale of a controlled substance or drugs of concern may conduct the sale

before complying with subsection (3) of this section if all of the following apply:

(a) The sale is to a new customer;

(b) The wholesaler documents that the order is to meet an emergent need;

(c) The wholesaler completes the requirements of subsection (3) of this section no later than sixty business days from the date of sale.

(5) Any potential customer that the wholesaler refuses to onboard due to a possible diversion risk shall be electronically reported to the commission within five business days of the wholesaler's refusal to onboard. Such reports shall include:

(a) Name of potential customer;

(b) Address of potential customer;

(c) Potential customer's DEA number, if applicable;

(d) Washington state license number(s); and

(e) A detailed explanation of why the wholesaler identified the potential customer as a possible diversion risk.

(6) All information submitted under this section must be readable and accessible to the commission.

[Statutory Authority: RCW 18.64.005, 18.64.080, 18.130.075, 18.64.043, 18.64.044, 18.64.045, 18.64.046, 18.64.370, 18.64.460, 69.50.310, 18.64.011, 18.64.245, 18.64.470, 18.64.255, 18.64.205, 18.64.253, 18.64.410, 18.64.500, 18.64.590. WSR 20-12-072, § 246-945-585, filed 6/1/20, effective 7/1/20.]

Commission SBAR Communication

Agenda Item/Title: Rulemaking Authorization: Timeframe for Reporting Disciplinary Action in WAC 246-945-231

Date SBAR Communication Prepared: May 8, 2025

Reviewer: Julia Katz

☒ **Action** ☐ **Information** ☐ **Follow-up** ☐ **Report only**

Situation: Program staff request the commission consider authorizing rulemaking on [WAC 246-945-231 Reporting Disciplinary Action](#) to add a timeframe for pharmaceutical firms to report disciplinary action to the commission.

Background: The Pharmacy Quality Assurance Commission (commission) adopted WAC 246-945-231 as part of [WSR 25-07-097](#) which took effect on April 18, 2025. WAC 246-945-231 does not include timeframe guidance.

Assessment: WSR 25-07-097 established WAC 246-945-231 to require pharmaceutical firms to report disciplinary action to the commission and amended WAC 246-945-592 to establish reporting requirements for permanently closing manufacturers and wholesalers.

Staff often get questions from pharmaceutical firm licensees pertaining to the timeframe of reporting disciplinary action to the commission. Having a timeframe in rule will provide guidance and clarity to pharmaceutical firm licensees.

Recommendation: Program staff recommend the commission authorize rulemaking on WAC 246-945-231 to add a timeframe for pharmaceutical firms to report disciplinary action to the commission.

Follow-up Action: If approved, commission staff will initiate rulemaking by filing a CR-101.