



## ITEM 1.2

### ACUPUNCTURE AND EASTERN MEDICINE ADVISORY COMMITTEE GOTO MEETING AGENDA

Friday, February 12, 2021  
9:00 AM

**This meeting is only available via webinar/phone.  
To join the meeting, please see the link on the last page of this agenda.**

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COMMITTEE MEMBERS: JACOB GODWIN, EAMP, DAOM; LISA MILLER, PUBLIC MEMBER;  
INDERJEET RAMGOTRA, EAMP, CHAIR; LISA VANHAAGEN, EAMP,  
VICE-CHAIR

CONTACT: VICKI BROWN, PROGRAM MANAGER  
(360) 236-4865; FAX (360) 236-2901  
[vicki.brown@doh.wa.gov](mailto:vicki.brown@doh.wa.gov)

In accordance with the Open Public Meetings Act, notices were mailed electronically to individuals who requested notification of meetings of the East Asian Medicine Advisory Committee.

**Times and Order:** The open session meeting will start at 9:00 a.m. on Friday, February 12, 2021 and continue until all agenda items are complete. This agenda schedule may change and items may not be taken in order of the agenda. The committee will adjourn for the evening as determined by the agenda and the members. This agenda is subject to change.

**Accessibility:** This meeting is accessible to person with disabilities. Special aids and services can be made available upon advanced request. Advance request for special aids and services must be made no later than one week before the meeting. If you need assistance with special needs and services, you may leave a message with that request at 1-800-525-0127 or, if calling from outside Washington State, call 360-236-4052. TDD may also be accessed by calling the TDD relay service at 1-800-833-6388. If you need assistance due to a speech disability, Speech-to-Speech provides human voicers for people with difficulty being understood. The Washington Speech-to-Speech toll free access number is 1-877-833-6341. If you wish general information about this meeting, please call the program at 360-236-4865.

**Please Note:** Comments from the public in attendance may be solicited after each agenda item.

#### OPEN SESSION – 9:00 a.m.

##### 1. CALL TO ORDER

- 1.1 Introductions
- 1.2 Approval of Agenda
- 1.3 Approval of Meeting Minutes from November 20, 2020

**PUBLIC HEALTH**  
ALWAYS WORKING FOR A SAFER AND  
HEALTHIER WASHINGTON

## 2. 2021 LEGISLATION UPDATE

- 2.1 Department of Health Weekly Legislative Update conference call – Update - Lisa vanHaagen, EAMP and Lisa Miller, Public Member
- 2.2 2021 Legislation Update – Trina Crawford, Executive Director

## 3. OPEN PUBLIC MEETINGS ACT (OPMA) – Joyce Roper, Assistant Attorney General (AAG) will provide abbreviated training on the OPMA.

## 4. PROGRAM MANAGEMENT REPORT – Information provided to the committee by the program manager and executive director.

- 4.1 Interim Operating Budget Report
- 4.2 Updated credentialing and disciplinary report
- 4.3 Update on rules hearing for Chapter 246-803 WAC
- 4.4 Other

## 5. CONSENT AGENDA – CORRESPONDENCE

The following item(s) and any additional correspondence received or sent is for the committee's information. If separate discussion is desired on an item, a single motion by a committee member will place the specific item(s) on the regular business agenda. If there is no motion, there will be no discussion.

## 6. FUTURE AGENDA ITEMS AND PLANNING FOR FUTURE MEETINGS

- 2019 – 2021 Business Plan
- Presentation on the 02G fund and how it operates
- 2021 Legislation update

## 7. OPEN FORUM FOR PUBLIC INPUT

## 8. ADJOURNMENT

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## ACUPUNCTURE AND EASTERN MEDICINE ADVISORY COMMITTEE GOTO MEETING MINUTES

Friday, November 20, 2020

On Friday, November 20, 2020, the Acupuncture and Eastern Medicine Advisory Committee met by GoTo Meeting. In accordance with the Open Public Meetings Act, notices were sent to individuals requesting notification of meetings.

**Members Present:** Cris Angel, EAMP  
Jacob Godwin, EAMP, DAOM  
Inderjeet Ramgotra, EAMP, Chair  
Lisa vanHaagen, EAMP

**Members Absent:** Lisa Miller, Public Member

**Staff Present:** Vicki Brown, Health Services Consultant 4  
Trina Crawford, Executive Director  
Sandie Pearson, Health Services Consultant 1  
Julianne Kolln, Policy Analyst  
Joyce Roper, Assistant Attorney General (AAG)

**Others Present:** Rochelle Fedor  
Leslie Emerick, Public Policy Director, Washington Acupuncture  
and Eastern Medicine Association (WAEMA)  
Sheila Ivanov  
Cole Alexander  
Carly Samish  
John Z.  
Tong

**OPEN SESSION – 9:00 a.m.**

### 1. CALL TO ORDER

The business meeting of the Acupuncture and Eastern Medicine Advisory Committee (committee) was called to order at 9:02 a.m. on Friday, November 20, 2020 by Inderjeet Ramgotra, EAMP, Chair.

1.1 Introductions

Committee members, staff and audience members introduced themselves.

1.2 Approval of Agenda

The committee reviewed and approved the November 20, 2020 GoTo meeting agenda as presented.

1.3 Approval of Meeting Minutes from February 21, 2020

A motion was made by Cris Angel and seconded by Lisa vanHaagen to approve the February 21, 2020 meeting minutes as presented. The committee voted in favor of the motion and the February 21, 2020 meeting minutes were approved as presented.

**2. ELECTION OF OFFICERS**

The committee elected the chair and vice-chair for the 2021 calendar year. The committee nominated and re-elected Inderjeet Ramgotra, EAMP as chair and Lisa vanHaagen, EAMP as vice-chair for 2021.

**3. 2021 MEETING DATES AND LOCATIONS**

The committee discussed and set the following meeting dates for 2021:

Meeting Date	Location	Start time
February 12, 2021	Webinar	9:00 a.m.
April 9, 2021	Webinar	9:00 a.m.
July 16, 2021	Webinar	9:00 a.m.
November 12, 2021	Tentatively Kent	10:00 a.m.

Updated meeting information will be posted to the acupuncture and Eastern medicine practitioner webpage.

**4. .LEGISLATIVE LIAISON AND MEET-ME-CALL PARTICIPANT**

Ms. Brown explained that the legislative liaison would be her contact person that could review a bill quickly and provide feedback. The committee voted and delegated Cris Angel, EAMP as the legislative liaison for the 2021 legislative session.

Ms. Brown also explained the purpose of the meet-me-calls is to go over bills that are introduced during the legislative session. The calls are held weekly and last approximately 30 minutes each. The committee voted and designated Lisa vanHaagen, EAMP; Inderjeet Ramgotra, EAMP and Lisa Miller as the 2021 legislative meet-me-call representatives.

**5. PROGRAM MANAGEMENT REPORT** – Information provided to the committee by the program manager and executive director.

5.1 Interim Operating Budget Report

Trina Crawford, Executive Director provided information to the committee regarding the program’s budget. She provided a budget report from July 1, 2019 to September 30, 2020. She shared information about the Health Enforcement and Licensing Modernization System (HELMS) that will be replacing the current licensing system. The HELMS cost will come out of each professions fund balance over the next four years. Beta testing of the system is scheduled to begin in 2021. An updated budget report will be presented at the next committee meeting.

5.2 Updated credentialing and disciplinary report

Ms. Brown provided an updated licensing and disciplinary statistics report showing the number of licensees. The report listed the following:

<b>CREDENTIAL STATUS</b>	<b>AEMP LICENSURE</b>
Active	1,561
Inactive	49
Revoked	3
Voluntary Surrender	2
Suspended	1
Active with Conditions	1
Active on Probation	1

5.3 Update on rules hearing for Chapter 246-803 WAC

Vicki Brown provided information regarding the rules hearing for Chapter 246-803 WAC. The CR-102 has been submitted for review. The rules hearing is tentatively scheduled for February 12, 2021. Updated information will be sent out via GovDelivery.

5.4 Other

Joyce Roper, AAG asked members about whether practitioners offer telemedicine. Lisa vanHaagen, EAMP shared that some practitioners may provide consultations via telemedicine. Currently the department is having conversations about how to implement the recently required telemedicine training. Updates will be provided as they become available.

## 6. CONSENT AGENDA – CORRESPONDENCE

The following item(s) and any additional correspondence received or sent is for the committee's information. If separate discussion is desired on an item, a single motion by a committee member will place the specific item(s) on the regular business agenda. If there is no motion, there will be no discussion.

There were no items for the consent agenda.

## 7. FUTURE AGENDA ITEMS AND PLANNING FOR FUTURE MEETINGS

- 2021-2023 Business Plan
- Presentation on the 02G fund and how it operates
- 2021 Legislation update
- Telemedicine update
- Governor's Proclamation on non-urgent medical care

## 8. OPEN FORUM FOR PUBLIC INPUT

Leslie Emerick shared with the committee information two items the association is working on. The association is working with the Governor's Office on the proclamation regarding non-urgent medical care and they will be running legislation again in 2021. This will be the same legislation that was run during the 2020 legislative session.

## 9. ADJOURNMENT

There being no further business before the committee, the meeting was adjourned at 10:08 a.m. on Friday, November 20, 2020. The next committee meeting is scheduled for Friday, February 12, 2021 by webinar. Updated meeting information will be posted to the acupuncture and Eastern medicine practitioner webpage.

Respectfully Submitted By:

Approved By:

\_\_\_\_\_  
Vicki Brown, Program Manager

\_\_\_\_\_  
Inderjeet Ramgotra, EAMP, Chair  
Acupuncture and Eastern Medicine  
Advisory Committee

**2021 Legislation**  
(as of February 1, 2021)

**Impacts the Profession**

Acupuncture Eastern medicine

[SB 5018](#)

Health equity continuing education for health care professionals

[SB 5229](#)

**Does not directly impact the professions laws**

Open Public Meeting Notice and Emergencies

[ESHB 1056](#)

Audio-only telemedicine

[HB 1196](#)

**Cutoffs – 90 day long session**

January 11, 2021 – First day of session

February 15, 2021 – House Policy Committee cutoff

February 22, 2021 – House fiscal committee cutoff

March 9, 2021 – House of origin cutoff

March 26, 2021 – Policy Committee cutoff – opposite house

April 2, 2021 – Opposite house committee cutoff

April 11, 2021 – Opposite house bill cutoff

April 25, 2021 – Last day allowed for regular session under state  
constitution



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SENATE BILL 5018

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State of Washington

67th Legislature

2021 Regular Session

By Senators Rivers and Nobles

Prefiled 12/15/20.

1 AN ACT Relating to acupuncture and Eastern medicine; and amending  
2 RCW 18.06.010 and 18.06.230.

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

4 **Sec. 1.** RCW 18.06.010 and 2019 c 308 s 2 are each amended to  
5 read as follows:

6 The following terms in this chapter shall have the meanings set  
7 forth in this section unless the context clearly indicates otherwise:

8 (1) "Acupuncture(~~"or"~~) and Eastern medicine" means a health  
9 care service utilizing acupuncture or Eastern medicine diagnosis and  
10 treatment to promote health and treat organic or functional disorders  
11 (~~and includes the following~~), which includes a variety of  
12 traditional and modern acupuncture and Eastern medicine therapeutic  
13 treatments, such as the practice of acupuncture techniques and herbal  
14 medicine to maintain and promote wellness, prevent, manage, and  
15 reduce pain, and treat substance use disorder. Acupuncture and  
16 Eastern medicine includes the following:

17 (a) (~~Acupuncture, including the use~~) Use of presterilized,  
18 disposable needles, such as filiform needles, and other acupuncture  
19 needles, syringes, or lancets to directly and indirectly stimulate  
20 meridians and acupuncture points (~~and meridians~~) including ashi

1 points, motor points, trigger points, and other nonspecific points  
2 throughout the body;

3 (b) Use of electrical, mechanical, or magnetic devices to  
4 stimulate meridians and acupuncture points ((and—meridians))  
5 including ashi points, motor points, trigger points, and other  
6 nonspecific points throughout the body;

7 (c) Intramuscular needling and dry needling of trigger points and  
8 other nonspecific points throughout the body in accordance with  
9 acupuncture and Eastern medicine training;

10 (d) All points and protocols for ear acupuncture including  
11 auricular acupuncture, national acupuncture detoxification  
12 association protocol, battlefield acupuncture, and the Nogier system;

13 (e) Use of contact needling and noninsertion tools such as  
14 teishin, enshin, or zanshin;

15 (f) Moxibustion;

16 ((~~d~~)) (g) Acupressure;

17 ((~~e~~)) (h) Cupping;

18 ((~~f~~)) (i) Dermal friction technique;

19 ((~~g~~)) (j) Infra-red;

20 ((~~h~~)) (k) Sonopuncture;

21 ((~~i~~)) (l) Laserpuncture;

22 ((~~j~~)) (m) Point injection therapy, as defined in rule by the  
23 department. Point injection therapy includes injection of substances,  
24 limited to saline, sterile water, herbs, minerals, vitamins in liquid  
25 form, and homeopathic and nutritional substances, consistent with the  
26 practice of acupuncture or Eastern medicine. Point injection therapy  
27 also includes injection of local anesthetics, such as lidocaine and  
28 procaine, for reduction of pain during point injection therapy,  
29 consistent with the practice of acupuncture and Eastern medicine and  
30 training requirements as defined in rule. An acupuncturist or  
31 acupuncture and Eastern medicine practitioner using point injection  
32 therapy who has met the training and education requirements  
33 established pursuant to RCW 18.06.230 may use oxygen, and epinephrine  
34 for potential emergency purposes, such as an allergic or adverse  
35 reaction, for patient care and safety. Point injection therapy does  
36 not include injection of controlled substances contained in Schedules  
37 I through V of the uniform controlled substances act, chapter 69.50  
38 RCW or steroids as defined in RCW 69.41.300;

39 ((~~k~~)) (n) Dietary advice and health education based on  
40 acupuncture or Eastern medical theory, including the recommendation

1 and sale of herbs, vitamins, minerals, and dietary and nutritional  
2 supplements;

3 ~~((l))~~ (o) Breathing, relaxation, and Eastern exercise  
4 techniques;

5 ~~((m))~~ (p) Qi gong;

6 ~~((n))~~ (q) Eastern massage and Tui na, which is a method of  
7 Eastern bodywork, characterized by the kneading, pressing, rolling,  
8 shaking, and stretching of the body and does not include spinal  
9 manipulation; and

10 ~~((o))~~ (r) Superficial heat and cold therapies.

11 (2) "Acupuncturist" or "acupuncture and Eastern medicine  
12 practitioner" means a person licensed under this chapter.

13 (3) "Department" means the department of health.

14 (4) "Secretary" means the secretary of health or the secretary's  
15 designee.

16 Nothing in this chapter requires individuals to be licensed as an  
17 acupuncturist or acupuncture and Eastern medicine practitioner in  
18 order to provide the techniques and services in subsection (1) ~~((k))~~  
19 (n) through ~~((o))~~ (r) of this section or to sell herbal products.

20 **Sec. 2.** RCW 18.06.230 and 2019 c 308 s 12 are each amended to  
21 read as follows:

22 (1) Prior to providing point injection therapy services, an  
23 acupuncturist or acupuncture and Eastern medicine practitioner must  
24 obtain the education and training necessary to provide the service.

25 (2) Any acupuncturist or acupuncture and Eastern medicine  
26 practitioner performing point injection therapy prior to June 9,  
27 2016, must be able to demonstrate, upon request of the department of  
28 health, successful completion of education and training in point  
29 injection therapy.

30 (3) Prior to administering local anesthetics, epinephrine, or  
31 oxygen in providing point injection therapy services, an  
32 acupuncturist or acupuncture and Eastern medicine practitioner must  
33 satisfy education and training requirements established by the  
34 department. The department must adopt rules establishing these  
35 requirements by July 1, 2022.

--- END ---



**Board Report**  
**62607-EAST ASIAN MEDICINE PRACTITIONER**

**ITEM 4.1**

	Biennium Budget	Current Month Dec 2020				2021 Biennium-To-Date Jul 01, 2019 Thru Dec 31, 2020			
		Allotment	Actual	Encumbrance	Variance	Allotment	Actual	Encumbrance	Variance
<b>62607-EAST ASIAN MEDICINE PRACTITIONER</b>									
FTE, Staff and Board	14.03	0.55	0.73	0.00	(0.18)	10.73	13.03	0.00	(2.30)

**Expenditures**

**Direct Charges**

Salaries Staff (A)	88,727	3,584	4,095	0	(511)	67,223	76,262	0	(9,039)
Board (AE)	3,184	133	100	0	33	2,390	1,150	0	1,240
Benefits (B)	32,837	1,300	1,499	0	(199)	25,043	27,797	0	(2,754)
Personal Svcs (C)	0	0	0	0	0	0	0	0	0
Goods and Supplies (E)	37,151	1,435	207	0	1,228	28,541	3,299	284	24,957
Supplies (EA)	1,490	60	0	0	60	1,130	327	284	519
Communications (EB)	0	0	0	0	0	0	0	0	0
Bldg/Rent/Utilities (EC/ED)	0	0	0	0	0	0	0	0	0
Repairs, Alterations, & Maint. (EE)	0	0	0	0	0	0	0	0	0
Printing (EF)	0	0	0	0	0	0	0	0	0
Training/Dues/Conference (EG)	0	0	0	0	0	0	0	0	0
Rental/Leases (EH)	480	20	0	0	20	360	124	0	236
Subscriptions (EJ)	0	0	0	0	0	0	0	0	0
Consolidated Mail (EK)	0	0	0	0	0	0	0	0	0
Data Processing Services (EL)	0	0	0	0	0	0	429	0	(429)
AG Support (EM)	35,925	1,386	457	0	929	27,609	6,023	0	21,586
Insurance (EP)	0	0	0	0	0	0	0	0	0
Contractual Services (ER)	0	0	0	0	0	0	0	0	0
Vehicle Maint. & Oper Costs (ES)	0	0	0	0	0	0	0	0	0
Software Licenses, Maint. (EY)	192	8	0	0	8	144	550	0	(406)
Other Goods & Services (EZ)	(936)	(39)	(250)	0	211	(702)	(4,153)	0	3,451
Travel (G)	9,344	389	0	0	389	7,010	1,777	0	5,233
Equipment (J)	1,516	63	0	0	63	1,138	714	0	424
Grants and Subsidies (N)	0	0	0	0	0	0	0	0	0
Inter-Agency Reimb. (S)	0	0	0	0	0	0	0	0	0
Intra-Agency Reimb. (T)	172,593	7,290	12,475	0	(5,185)	128,856	135,312	0	(6,456)
Goods and Services (TE)	0	0	0	0	0	0	0	0	0
G & S-Rent (TE 6740)	8,225	322	351	0	(29)	6,293	6,610	0	(317)
G & S-IT Support (TE E350 & TE E360)	3,258	131	0	0	131	2,474	1,929	0	545
G & S-Phone (TE E370)	338	13	16	0	(3)	261	259	0	2
<b>Sub Total Direct Charges</b>	<b>184,580</b>	<b>7,370</b>	<b>6,268</b>	<b>0</b>	<b>1,102</b>	<b>140,373</b>	<b>119,797</b>	<b>284</b>	<b>20,292</b>



**Board Report**  
**62607-EAST ASIAN MEDICINE PRACTITIONER**

	Biennium Budget	Current Month Dec 2020				2021 Biennium-To-Date Jul 01, 2019 Thru Dec 31, 2020			
		Allotment	Actual	Encumbrance	Variance	Allotment	Actual	Encumbrance	Variance
<b>Service Units (TA)</b>									
Adjudicative Clerks Office (A010)	2,424	102	582	0	(480)	1,812	1,434	0	378
Adjudicative Services Unit (A020)	300	13	0	0	13	222	224	0	(2)
WRAMP (A230)	948	40	25	0	15	708	514	0	194
HP Investigations (A100)	29,612	1,257	1,354	0	(97)	22,070	25,495	0	(3,425)
Self Insurance (A220)	0	0	0	0	0	0	0	0	0
Legal Services (A150)	14,938	648	2,387	0	(1,739)	11,050	11,965	0	(915)
Call Center (A030)	13,566	591	846	0	(255)	10,020	10,777	0	(757)
Public Disclosure (A180)	3,436	148	230	0	(82)	2,548	2,789	0	(241)
Online Licensing Project (A130)	3,562	143	801	0	(658)	2,704	2,506	0	198
Investigations Case Mgt (A070)	4,332	183	248	0	(65)	3,234	3,103	0	131
Complaint Intake (A040)	2,148	91	151	0	(60)	1,602	1,712	0	(110)
Legal Compliance (A140)	2,826	121	186	0	(65)	2,100	2,279	0	(179)
HP & Director (A110)	12,612	532	553	0	(21)	9,420	9,397	0	23
Credentialing (A060)	53,544	2,260	3,731	0	(1,471)	39,984	41,852	0	(1,868)
Home Care Aide (A240)	0	0	0	0	0	0	0	0	0
Renewal Unit (A190)	12,384	520	889	0	(369)	9,264	8,719	0	545
Revenue Unit (A200)	2,196	93	124	0	(31)	1,638	1,585	0	53
FBI Background Check (A090)	1,944	82	0	0	82	1,452	699	0	753
HP Suicide Assessment (A120)	0	0	0	0	0	0	0	0	0
OS Review Officer (A210)	0	0	0	0	0	0	0	0	0
<b>Sub Total Service Units (TA)</b>	<b>160,772</b>	<b>6,824</b>	<b>12,108</b>	<b>0</b>	<b>(5,284)</b>	<b>119,828</b>	<b>125,051</b>	<b>0</b>	<b>(5,223)</b>
<b>Sub Total Expenditures</b>	<b>345,352</b>	<b>14,194</b>	<b>18,376</b>	<b>0</b>	<b>(4,182)</b>	<b>260,201</b>	<b>244,848</b>	<b>284</b>	<b>15,069</b>
<b>Indirect Charges</b>									
Agency Management	58,364	2,399	3,106	0	(707)	43,974	40,869	0	3,105
Assistant Secretary	0	0	2,076	0	(2,076)	0	24,924	0	(24,924)
<b>Sub Total Indirect Charges</b>	<b>58,364</b>	<b>2,399</b>	<b>5,182</b>	<b>0</b>	<b>(2,783)</b>	<b>43,974</b>	<b>65,793</b>	<b>0</b>	<b>(21,819)</b>
<b>Total Charges</b>	<b>403,716</b>	<b>16,593</b>	<b>23,558</b>	<b>0</b>	<b>(6,965)</b>	<b>304,175</b>	<b>310,641</b>	<b>284</b>	<b>(6,751)</b>
<b>Beginning Balance</b>						1,083,399			
<b>Revenue</b>						477,147			
<b>Fines</b>						0			
<b>Total Revenue</b>						477,147			
<b>Current Balance</b>							1,249,621		

## License Counts by County - Active - February 1, 2021

ITEM 4.2

	ACUP
Unknown	17
Adams	1
Benton	8
Chelan	12
Clallam	15
Clark	65
Columbia	1
Cowlitz	9
Douglas	5
Grays Harbor	3
Island	20
Jefferson	19
King	792
Kitsap	41
Kittitas	2
Klickitat	4
Lewis	3
Lincoln	0
Mason	6
Okanogan	6
Pacific	0
Pend Oreille	1
Pierce	69
San Juan	13
Skagit	20
Skamania	2
Snohomish	144
Spokane	46
Stevens	5
Thurston	58
Walla Walla	10
Whatcom	56
Whitman	2
Yakima	6
Out of State	105
Total	1,566

### Revoked

	ACUP
Unknown	1
Clark	1
King	1
Total	3

### Voluntary Surrender

	ACUP
Clark	1
King	1
Total	2

### Suspended

	ACUP
King	1
Total	1

### Active with Conditions

Snohomish	1
Total	1

### Active on Probation

ACUP		
Pierce	1	
Total	1	

## License Counts by County - Inactive

	ACUP
Unknown	3
Benton	2
Cowlitz	2
King	10
Lewis	1
Snohomish	3
Spokane	1
Thurston	1
Whatcom	1
Out of State	25
Total	49

## Count of Alleged Issues      November 4, 2020 to February 1, 2021

Receiving Profession	Alleged Issue	Case #
Acupuncturist or Acupuncture and Eastern Medicine Practitioner License	Violation of Federal or State Statutes, Regulations or Rules	2
Acupuncturist or Acupuncture and Eastern Medicine Practitioner License	COVID-19	2
Acupuncturist or Acupuncture and Eastern Medicine Practitioner License	Malpractice	1

## Count of Case Natures

Receiving Profession	Case Nature	Cases
Acupuncturist or Acupuncture and Eastern Medicine Practitioner License	COVID-19	2
Acupuncturist or Acupuncture and Eastern Medicine Practitioner License	Mandatory Malpractice Reports	1
Acupuncturist or Acupuncture and Eastern Medicine Practitioner License	Violation of regulations or rules	2

ITEM 4.3  
**PROPOSED RULE MAKING**



**CR-102 (December 2017)**  
**(Implements RCW 34.05.320)**  
 Do **NOT** use for expedited rule making

CODE REVISER USE ONLY

OFFICE OF THE CODE REVISER  
 STATE OF WASHINGTON  
 FILED

**DATE: January 13, 2021**  
**TIME: 11:55 AM**

**WSR 21-03-036**

**Agency:** Department of Health

- Original Notice**
- Supplemental Notice to WSR**
- Continuance of WSR**

- Preproposal Statement of Inquiry was filed as WSR 20-13-008 ; or**
- Expedited Rule Making--Proposed notice was filed as WSR ; or**
- Proposal is exempt under RCW 34.05.310(4) or 34.05.330(1).**
- Proposal is exempt under RCW .**

**Title of rule and other identifying information:** (describe subject) Chapter 246-803 WAC Acupuncture and Eastern Medicine Practitioner. The Department of Health (department) is proposing rulemaking necessary to implement various legislative changes throughout the chapter, including: adding continuing education; making title changes; repealing apprenticeship and tutorial requirements; repealing the AIDS education and training requirement; and adding new rules for suicide prevention and education. Non-substantive housekeeping changes are being proposed as well.

**Hearing location(s):**

<b>Date:</b>	<b>Time:</b>	<b>Location: (be specific)</b>	<b>Comment:</b>
02/24/2021	10:00 a.m.	<p>In response to the coronavirus disease 2019 (COVID-19), the Department of Health will not provide a physical location for this hearing to promote social distancing and the safety of the citizens of Washington State. A virtual public hearing, without a physical meeting space, will be held instead.</p> <p>To access the meeting please register at:</p> <p><a href="https://attendee.gotowebinar.com/register/1163873052618881807">https://attendee.gotowebinar.com/register/1163873052618881807</a></p> <p>After registering, you will receive a confirmation email containing information about joining the webinar.</p> <p>Participants can use their telephone or computer mic &amp; speakers (VoIP).</p> <p>United States                      +1 (914) 614-3221</p>	

**Date of intended adoption:** 03/03/2021 (Note: This is **NOT** the **effective** date)

**Submit written comments to:**

Name: Vicki Brown, Program Manager



Address: Office of Health Professions  
P.O. Box 47852  
Olympia, WA 98504-7852  
Email: <https://fortress.wa.gov/doh/policyreview>  
Fax: 360-236-2901  
Other: [vicki.brown@doh.wa.gov](mailto:vicki.brown@doh.wa.gov)  
By (date) 02/24/2021

**Assistance for persons with disabilities:**

Contact Vicki Brown  
Phone: 360-236-4865  
Fax: 360-236-2901  
TTY: 711  
Email: [vicki.brown@doh.wa.gov](mailto:vicki.brown@doh.wa.gov)  
Other:  
By (date) 02/17/2021

**Purpose of the proposal and its anticipated effects, including any changes in existing rules:** The department is proposing amendments to comply with and align the rules with 2019 and 2020 legislation. Other housekeeping changes are also proposed to implement these amendments.

**Reasons supporting proposal:** Substitute House Bill (SHB) 1865 (chapter 308, Laws of 2019). The department is proposing a new rule for continuing education, has changed the term "East Asian" to "acupuncture and Eastern medicine", deleted the apprenticeship and tutorial requirements, and made other housekeeping changes.

Engrossed Substitute House Bill (ESHB) 1551 (chapter 76, Laws of 2020) amended RCW 70.24.270 Health professionals-Rules for AIDS education and training by removing AIDS education and training requirements. The proposed amendments will remove subsections in WAC 246-803-100, 246-803-110, and 246-803-130 requiring AIDS education and training. These rules detail the definitions, acceptable training and education, and documentation requirements for acupuncture and Eastern medicine practitioners concerning AIDS including the number of hours of training required. The department is proposing to no longer require these in support of legislation and reducing stigma towards people living with HIV/AIDS (PLWH).

Engrossed Substitute House Bill (ESHB) 2411 (chapter 229, Laws of 2020) amended RCW 43.70.442 to require acupuncture and Eastern medicine practitioners to complete one-time training in suicide assessment, treatment and management approved by the relevant disciplining authority. The rules address this required training.

**Statutory authority for adoption:** RCW 18.06.160 and SHB 1855 (chapter 308, Laws of 2019)

**Statute being implemented:** Chapter 18.06 RCW, SHB 1855 (Chapter 308, Laws 2019), ESHB 2411 (chapter 229, Laws of 2020) and ESHB 1551 (chapter 76, 2020)

**Is rule necessary because of a:**

Federal Law?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Federal Court Decision?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
State Court Decision?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

If yes, CITATION:

**Agency comments or recommendations, if any, as to statutory language, implementation, enforcement, and fiscal matters:** None

**Name of proponent:** (person or organization) Department of Health  Private  
 Public  
 Governmental

<b>Name of agency personnel responsible for:</b>			
	Name	Office Location	Phone
Drafting:	Vicki Brown, Program Manager	111 Israel Rd. S.E., Tumwater, WA 98501	360-236-4865
Implementation:	Vicki Brown, Program Manager	111 Israel Rd. S.E., Tumwater, WA 98501	360-236-4865
Enforcement:	Vicki Brown, Program Manager	111 Israel Rd. S.E., Tumwater, WA 98501	360-236-4865

**Is a school district fiscal impact statement required under RCW 28A.305.135?**  Yes  No

If yes, insert statement here:

The public may obtain a copy of the school district fiscal impact statement by contacting:

Name:  
Address:  
Phone:  
Fax:  
TTY:  
Email:  
Other:

**Is a cost-benefit analysis required under RCW 34.05.328?**

Yes: A preliminary cost-benefit analysis may be obtained by contacting:  
Name: Vicki Brown, Program Manager  
Address: Office of Health Professions  
P.O. Box 47852  
Olympia, WA 98504-7852  
Phone: 360-236-4865  
Fax: 360-236-2901  
TTY: 711  
Email: vicki.brown@doh.wa.gov  
Other:

No: Please explain:

**Regulatory Fairness Act Cost Considerations for a Small Business Economic Impact Statement:**

This rule proposal, or portions of the proposal, **may be exempt** from requirements of the Regulatory Fairness Act (see chapter 19.85 RCW). Please check the box for any applicable exemption(s):

This rule proposal, or portions of the proposal, is exempt under RCW 19.85.061 because this rule making is being adopted solely to conform and/or comply with federal statute or regulations. Please cite the specific federal statute or regulation this rule is being adopted to conform or comply with, and describe the consequences to the state if the rule is not adopted.

Citation and description:

This rule proposal, or portions of the proposal, is exempt because the agency has completed the pilot rule process defined by RCW 34.05.313 before filing the notice of this proposed rule.

This rule proposal, or portions of the proposal, is exempt under the provisions of RCW 15.65.570(2) because it was adopted by a referendum.

This rule proposal, or portions of the proposal, is exempt under RCW 19.85.025(3). Check all that apply:

RCW 34.05.310 (4)(b)  
(Internal government operations)

RCW 34.05.310 (4)(e)  
(Dictated by statute)

RCW 34.05.310 (4)(c)  
(Incorporation by reference)

RCW 34.05.310 (4)(f)  
(Set or adjust fees)

RCW 34.05.310 (4)(d)  
(Correct or clarify language)

RCW 34.05.310 (4)(g)  
((i) Relating to agency hearings; or (ii) process requirements for applying to an agency for a license or permit)

This rule proposal, or portions of the proposal, is exempt under RCW .

Explanation of exemptions, if necessary:

**COMPLETE THIS SECTION ONLY IF NO EXEMPTION APPLIES**

If the proposed rule is **not exempt**, does it impose more-than-minor costs (as defined by RCW 19.85.020(2)) on businesses?

No Briefly summarize the agency's analysis showing how costs were calculated. The requirements proposed in WAC 246-803-420 and 246-803-430 do not apply to businesses.

Yes Calculations show the rule proposal likely imposes more-than-minor cost to businesses, and a small business economic impact statement is required. Insert statement here:

The public may obtain a copy of the small business economic impact statement or the detailed cost calculations by contacting:

- Name:
- Address:
- Phone:
- Fax:
- TTY:
- Email:
- Other:

Date: 01/12/2021

Signature:

Name: Jessica Todorovich for Umair A. Shah MD, MPH



Title: Chief of Staff for Secretary of Health

**Chapter 246-803 WAC**  
**((EAST ASIAN)) ACUPUNCTURE AND EASTERN MEDICINE PRACTITIONER**

**((EAST ASIAN)) ACUPUNCTURE AND EASTERN MEDICINE PRACTITIONERS**

AMENDATORY SECTION (Amending WSR 20-03-112, filed 1/15/20, effective 2/15/20)

**WAC 246-803-010 Definitions.** The definitions in this section apply throughout this chapter unless the context clearly requires otherwise:

(1) "Accredited school, college or program" means:

(a) Accredited or has candidacy status as a United States postsecondary school, college or program; or

(b) Accredited by or has candidacy status with the Accreditation Commission for Acupuncture and Oriental Medicine (ACAOM).

(2) "Acupuncture needles" means solid filiform instruments intended to pierce the skin in the practice of acupuncture. Acupuncture needles used on a patient must be sterile and disposable, and may only be used once.

(3) "Acupuncturist or acupuncture and Eastern medicine practitioner" is a person licensed under chapter 18.06 RCW.

(4) "Acupuncturist or acupuncture and Eastern medicine program" means training in acupuncture or Eastern medicine offered by an academic institution that satisfies the education requirements set out in WAC 246-803-210, 246-803-220, and 246-803-230. A program is an established area of study offered on a continuing basis. An acupuncture or acupuncture and Eastern medicine program may be referred to as a program in acupuncture, acupuncture and Eastern medicine, or Eastern medicine.

(5) "Acupuncture or acupuncture and Eastern medicine school" means an accredited academic institution which has the sole purpose of offering training in acupuncture or acupuncture and Eastern medicine that satisfies the education requirements set out in WAC 246-803-210, 246-803-220, and 246-803-230.

(6) "Approved school" means a school, college or program approved by the secretary of the department of health that meets the requirements of WAC 246-803-500.

~~((4))~~ (7) "Credit" means ten classroom contact hours on the quarter system or fifteen classroom contact hours on the semester or trimester system.

~~((5))~~ (8) "Department" means the department of health.

~~((6))~~ "East Asian medicine apprenticeship" means training in East Asian medicine administered by an apprenticeship trainer that satisfies the educational requirements set out in WAC 246-803-210, 246-803-220, and 246-803-230. An apprenticeship is of limited duration

and ends at the time the parties to the apprenticeship agreement have completed their obligations.

~~(7) "East Asian medicine practitioner" is a person licensed under chapter 18.06 RCW.~~

~~(8) "East Asian medicine program" means training in East Asian medicine offered by an academic institution that satisfies the education requirements set out in WAC 246-803-210, 246-803-220, and 246-803-230 and also offers training in other areas of study. A program is an established area of study offered on a continuing basis. An East Asian medicine program may be referred to as a program in acupuncture, acupuncture and Oriental medicine, or Oriental medicine.~~

~~(9) "East Asian medicine school" means an accredited academic institution which has the sole purpose of offering training in East Asian medicine that satisfies the education requirements set out in WAC 246-803-210, 246-803-220, and 246-803-230.~~

~~(10) "East Asian medicine tutorial instruction" means training in East Asian medicine which is offered by an academic institution or qualified instructor on the basis of a tutorial agreement between the school or instructor and the student and satisfies the education requirements set out in WAC 246-803-210, 246-803-220, and 246-803-230. A tutorial is of limited duration and ends at the time the parties to the tutorial agreement have performed their obligations under the agreement.~~

~~(11)) (9) "Hypodermic needle" means a device intended to inject fluids into, or withdraw fluids from, parts of the body below the surface of the skin.~~

~~((12)) (10) "Primary health care provider" means an individual licensed under:~~

- ~~(a) Chapter 18.36A RCW, Naturopathy;~~
- ~~(b) Chapter 18.57 RCW, Osteopathy—Osteopathic medicine and surgery;~~
- ~~(c) Chapter 18.57A RCW, Osteopathic physicians' assistants;~~
- ~~(d) Chapter 18.71 RCW, Physicians;~~
- ~~(e) Chapter 18.71A RCW, Physician assistants; or~~
- ~~(f) RCW 18.79.050, "Advanced registered nursing practice" defined—Exceptions.~~

AMENDATORY SECTION (Amending WSR 11-17-105, filed 8/22/11, effective 9/22/11)

**WAC 246-803-020 Advertising.** (1) A person licensed under this chapter may use the title ~~((East Asian medicine practitioner (EAMP) or~~ acupuncturist (Ac), licensed acupuncturist (L.Ac.), acupuncture and Eastern medicine practitioner (AEMP), EAMP, or any derivative thereof in all forms of advertising, professional literature and billing.

(2) An ~~((East Asian))~~ acupuncturist or acupuncture and Eastern medicine practitioner may not use the title "doctor," "Dr.," or "Ph.D." on any advertising or other printed material unless the nature of the degree is clearly stated.

(3) An ~~((East Asian))~~ acupuncturist or acupuncture and Eastern medicine practitioner may not represent that he or she holds a degree from an ~~((East Asian))~~ acupuncture or acupuncture and Eastern medicine

school other than that degree which appears on his or her application for licensure.

(4) An (~~East-Asian~~) acupuncturist or acupuncture and Eastern medicine practitioner shall not engage in false, deceptive, or misleading advertising including, but not limited to, the following:

(a) Advertising that misrepresents the potential of (~~East-Asian medicine or~~) acupuncture or Eastern medicine; and

(b) Advertising of any service, technique, or procedure that is outside the scope of practice for an (~~East-Asian~~) acupuncturist or acupuncture and Eastern medicine practitioner.

AMENDATORY SECTION (Amending WSR 20-03-112, filed 1/15/20, effective 2/15/20)

**WAC 246-803-030 (~~East-Asian~~) Acupuncture or Eastern medicine.**

(~~East-Asian~~) Acupuncture or Eastern medicine is a health care service using (~~East-Asian~~) acupuncture or Eastern medicine diagnosis and treatment to promote health and treat organic or functional disorders. (~~East-Asian~~) Acupuncture and Eastern medicine includes the following:

(1) Acupuncture, includes the use of acupuncture needles or lancets to directly (~~or~~) and indirectly stimulate acupuncture points and meridians;

(2) Use of electrical, mechanical, or magnetic devices to stimulate acupuncture points and meridians;

(3) Moxibustion;

(4) Acupressure;

(5) Cupping;

(6) Dermal friction technique;

(7) Infrared;

(8) Sonopuncture;

(9) Laserpuncture;

(10) Point injection therapy (~~(aquapuncture)~~):

(a) Is defined as meaning the subcutaneous, intramuscular and intradermal injection of substances consistent with the practice of (~~East-Asian~~) acupuncture or Eastern medicine to stimulate acupuncture points, ashi points, trigger points and meridians. Substances are limited to:

(i) Saline;

(ii) Sterile water;

(iii) Herbs specifically manufactured for injection by means of hypodermic needles;

(iv) Minerals specifically manufactured for injection by means of hypodermic needles;

(v) Vitamins in liquid form specifically manufactured for injection by means of hypodermic needles; and

(vi) Homeopathic and nutritional substances specifically manufactured for injection by means of hypodermic needles.

(b) For the purposes of this section, includes trigger points as a subset of acupuncture points and ashi points as recognized in the current practice of (~~East-Asian~~) acupuncture or Eastern medicine.

(c) Does not include injection of controlled substances contained in Schedules I through V of the Uniform Controlled Substances Act, chapter 69.50 RCW or steroids as defined in RCW 69.41.300.

(11) Dietary advice and health education based on ((East-Asian)) acupuncture or Eastern medical theory, including the recommendation and sale of herbs, vitamins, minerals, and dietary and nutritional supplements.

((Health-education.)) (a) Health education is educational information directed to the patient that attempts to improve, maintain, promote and safeguard the health care of the patient. Health education consists of educating the patient on how the mind, body and spirit connect in context of imbalances, emotional patterns and tendencies as defined by and treated in ((East-Asian)) acupuncture or Eastern medicine.

(b) Health education does not include mental health counseling;

(12) Breathing, relaxation, and ((East-Asian)) Eastern exercise techniques;

(13) Qi gong;

(14) ((East-Asian)) Eastern massage. ((East-Asian)) Eastern massage means manual techniques having originated in East Asia involving the manipulation of the soft tissues of the body for therapeutic purposes.

(a) ((East-Asian)) Eastern massage consists of:

(i) Applying fixed or movable pressure;

(ii) Passive, resistive, and assisted stretching of fascial and connective tissue;

(iii) Holding or causing movement of the body; or

(iv) Tapping, compressions or friction.

(b) ((East-Asian)) Eastern massage may be performed with the use of tools common to the practice and aids of superficial heat, cold, water, lubricants, salts, minerals, liniments, poultices, and herbs.

(c) ((East-Asian)) Eastern massage does not include attempts to adjust or manipulate any articulations of the body or spine or mobilization of these articulations by the use of a thrusting force.

(15) Tui na. Tui na is a method of ((East-Asian)) Eastern bodywork, characterized by the kneading, pressing, rolling, shaking, and stretching of the body and does not include spinal manipulation; and

(16) Superficial heat and cold therapies.

AMENDATORY SECTION (Amending WSR 17-15-006, filed 7/5/17, effective 7/5/17)

**WAC 246-803-040 Education and training for point injection therapy.** ((East-Asian)) Acupuncturist or acupuncture and Eastern medicine practitioners employing point injection therapy shall use only those substances and techniques for which they have received training.

(1) The education and training for point injection therapy must:

(a) Consist of a minimum total of twenty-four contact hours of training in the topics required in this section;

(b) Include at least eight hours of clinical practical experience; and

(c) Be administered by an instructor that meets the requirements of subsection (4) of this section.

(2) A curriculum for a point injection therapy training program must include:

(a) Review of physical examination, contraindications and universal precautions, and differential diagnosis;

(b) Compounding and administration of the substances authorized for point injection therapy under WAC 246-803-030, including aseptic technique, recordkeeping and storage of substances authorized for use in point injection therapy;

(c) Emergency procedures;

(d) Point injection therapy techniques and contraindication within the ((East-Asian)) acupuncture or Eastern medicine scope of practice relative to the authorized substances listed in WAC 246-803-030 (10)(a)(i) through (vi).

(3) Except for the training in the use of intramuscular epinephrine, the training must be delivered in person and not through webinar or other online or distance learning method.

(4) An instructor for point injection therapy must have:

(a) A health care credential in good standing with a scope of practice that includes point injection therapy; and

(b) At least five years of experience in a health care practice that includes point injection therapy.

(5) In addition to point injection therapy meeting the requirements of subsections (1) and (2) of this section, ((East-Asian)) acupuncturists or acupuncture and Eastern medicine practitioners using point injection therapy must complete training in the use of intramuscular epinephrine.

(a) Training in the use of intramuscular epinephrine must be according to RCW 70.54.440(4).

(b) This training may be taken separately from the training in point injection therapy.

(c) Up to two hours of training in the use of intramuscular epinephrine count in meeting the requirement for twenty-four hours of training.

(d) An ((East-Asian)) acupuncturist or acupuncture and Eastern medicine practitioner who holds an active credential with a scope of practice that includes the authority to prescribe, dispense or administer epinephrine does not need to meet the requirements of (a) of this subsection.

(6) To qualify under this section, the training program shall provide each successful student with a:

(a) Certificate of successful completion of the program; and

(b) Course syllabus outlining the schedule and curriculum of the program.

(7) The requirements of subsections (1) through (6) of this section do not apply to an ((East-Asian)) acupuncturist or acupuncture and Eastern medicine practitioner who has provided point injection therapy prior to July 1, 2017. ((East-Asian)) Acupuncturists or acupuncture and Eastern medicine practitioners using point injection therapy prior to July 1, 2017, must have completed training and education in point injection therapy.

(8) Any ((East-Asian)) acupuncturist or acupuncture and Eastern medicine practitioner performing point injection therapy must be able to demonstrate, upon request of the department of health, successful completion of education and training in point injection therapy.



AMENDATORY SECTION (Amending WSR 16-01-158, filed 12/21/15, effective 1/21/16)

**WAC 246-803-100 Application requirements for applicants from approved schools, colleges or programs.** An applicant for an (~~East Asian~~) acupuncturist or acupuncture and Eastern medicine practitioner license who has graduated from an approved school, college or program must submit to the department:

(1) A completed application.  
(2) The application fee required under WAC 246-803-990.  
(3) Verification of academic or educational study and clinical training at a school, college or program approved by the secretary. The school, college or program verification must include one of the following:

(a) Original copy of school transcript evidencing completion of a program in (~~East Asian~~) acupuncture or Eastern medicine that includes the required basic sciences sent directly from the school, college or program (~~to the department~~). If all the required basic sciences were not included as a part of the curriculum, then the applicant must also provide official transcripts from where the basic sciences were obtained;

(b) A notarized affidavit or statement signed by an officer of the school, college, or program certifying the applicant's satisfactory completion of the training and designating the subjects and hours;  
or

(c) If the school no longer exists, a copy of the transcript and a sworn affidavit stating the school no longer exists.

(4) Verification of clinical training as required in WAC 246-803-230.

(5) Verification of successful completion of the examinations as required in WAC 246-803-240.

(6) Verification of all (~~East Asian~~) acupuncture, acupuncture and Eastern medicine practitioner or health care licenses held, submitted directly from the licensing agency. The certification shall include the license number, issue date, expiration date and whether the (~~East Asian~~) acupuncturist or acupuncture and Eastern medicine practitioner has been the subject of final or pending disciplinary action.

(7) (~~Verification of completion of seven clock hours of AIDS education as required in chapter 246-12 WAC, Part 8.~~

~~(8))~~ Verification of current cardiopulmonary resuscitation (CPR) certification. The training in CPR shall consist of a minimum of one quarter credit or equivalent. Red Cross certification or documentation of equivalent training may be substituted for the one quarter credit.

~~((9))~~ (8) Any additional documents requested by the secretary.

AMENDATORY SECTION (Amending WSR 16-01-158, filed 12/21/15, effective 1/21/16)

**WAC 246-803-110 Application requirements for applicants from accredited schools, colleges or programs.** An applicant for an (~~East Asian~~) acupuncturist or acupuncture and Eastern medicine practitioner license who has graduated from an accredited school, college or program must submit to the department:

- (1) A completed application.
- (2) The application fee required under WAC 246-803-990.
- (3) Verification of academic or educational study and clinical training at a school, college or program accredited by the Accreditation Commission for Acupuncture and Oriental Medicine (ACAOM). The school, college or program verification must include one of the following:
  - (a) Original copy of school transcript evidencing completion of a program in ~~((East-Asian))~~ acupuncture or Eastern medicine that includes the required basic sciences sent directly from the school, college or program. If all of the required basic sciences were not included as a part of the curriculum, then the applicant must also provide official transcripts from where the basic sciences were obtained; or
  - (b) A notarized affidavit or statement signed by an officer of the school, college or program certifying the applicant's satisfactory completion of the training and designating the subjects and hours; or
  - (c) If the school no longer exists, a copy of the transcript and a sworn affidavit stating the school no longer exists.
- (4) Verification of clinical training as required in WAC 246-803-230.
- (5) Verification of successful completion of the examinations as required in WAC 246-803-240.
- (6) Verification of all ~~((East-Asian))~~ acupuncture, acupuncture or Eastern medicine practitioner or health care licenses held, submitted directly from the licensing agency. The certification shall include the license number, issue date, expiration date and whether the ~~((East-Asian))~~ acupuncturist or acupuncture and Eastern medicine practitioner has been the subject of final or pending disciplinary action.
- ~~(7) ((Verification of completion of seven clock hours of AIDS education as required in chapter 246-12 WAC, Part 8.~~
- ~~(8))~~ Verification of current cardiopulmonary resuscitation (CPR) certification. The training in CPR shall consist of a minimum of one quarter credit or equivalent. Red Cross certification or documentation of equivalent training may be substituted for the one quarter credit.
- ~~((9))~~ (8) Any additional documents requested by the secretary.

AMENDATORY SECTION (Amending WSR 20-03-112, filed 1/15/20, effective 2/15/20)

**WAC 246-803-130 Application requirements for applicants from foreign schools.** (1) An applicant for an ~~((East-Asian))~~ acupuncturist or acupuncture and Eastern medicine practitioner license who has graduated from a foreign ~~((East-Asian))~~ acupuncture or Eastern medicine practitioner program not accredited, or approved by the secretary must:

- (a) Have at least a bachelor's or master's degree in ~~((East-Asian))~~ Eastern medicine or acupuncture from an institution of higher learning which is approved by the foreign country's ministry of education/health, or other governmental entity;
- (b) Have graduated from a program of ~~((East-Asian))~~ Eastern medicine or acupuncture education with requirements substantially equal to those required of graduates of secretary-approved programs; and
- (c) Demonstrate fluency in reading, speaking, and understanding the English language by taking the examinations required in WAC

246-803-240 (2) (a) through (c) in English or by passage of the test of English as a foreign language in WAC 246-803-240(3).

(2) An applicant for an ~~((East-Asian))~~ acupuncturist or acupuncture and Eastern medicine practitioner license must submit to the department:

(a) A completed application.

(b) The application fee required under WAC 246-803-990.

(c) Original copy of school transcripts from the ~~((East-Asian))~~ Eastern medicine or acupuncture program showing degree and degree date.

(d) A credentialing evaluation report from the International Consultants of Delaware (ICD).

(e) Verification of clinical training as required in WAC 246-803-230.

(f) Verification of successful completion of the examinations as required in WAC 246-803-240.

(g) Verification of all ~~((East-Asian))~~ acupuncturist, acupuncture and Eastern medicine practitioner or health care licenses held, submitted directly from the licensing agency. The verification shall include the license number, issue date, expiration date and whether the ~~((East-Asian))~~ acupuncturist or acupuncture and Eastern medicine practitioner has been the subject of final or pending disciplinary action.

~~(h) ((Verification of completion of seven clock hours of AIDS education as required in chapter 246-812 WAC, Part 8.~~

~~(i))~~ Verification of current cardiopulmonary resuscitation (CPR) certification. The training in CPR shall consist of a minimum of one quarter credit or equivalent. Red Cross certification or documentation of equivalent training may be substituted for the one quarter credit.

~~((j))~~ (i) Any additional documents requested by the secretary.

(3) The department recognizes the ICD for credential evaluations. The applicant shall request that the ICD send their evaluation directly to the department. To obtain a credentialing evaluation report, the applicant shall submit to the ICD:

(a) Transcripts;

(b) Appropriate fees; and

(c) Other requested documentation.

AMENDATORY SECTION (Amending WSR 11-17-105, filed 8/22/11, effective 9/22/11)

**WAC 246-803-200 Training for ~~((East-Asian))~~ acupuncture and Eastern medicine practitioners.** To become an ~~((East-Asian))~~ acupuncturist or acupuncture and Eastern medicine practitioner, an applicant must have training in:

(1) Basic sciences as described in WAC 246-803-210;

(2) ~~((East-Asian))~~ Acupuncture and Eastern medicine sciences as described in WAC 246-803-220; and

(3) Clinical training as described in WAC 246-803-230.

AMENDATORY SECTION (Amending WSR 11-17-105, filed 8/22/11, effective 9/22/11)

**WAC 246-803-210 Basic sciences.** To become an ((~~East-Asian~~)) acupuncturist or acupuncture and Eastern medicine practitioner, an applicant must have training in basic sciences that must consist of a minimum of forty-five quarter credits or thirty semester or trimester credits. These credits shall consist of the following:

- (1) Anatomy;
- (2) Physiology;
- (3) Microbiology;
- (4) Biochemistry;
- (5) Pathology;
- (6) Survey of western clinical sciences; and
- (7) Hygiene.

AMENDATORY SECTION (Amending WSR 11-17-105, filed 8/22/11, effective 9/22/11)

**WAC 246-803-220 ((~~East-Asian~~)) Acupuncture and Eastern medicine sciences.** To become an ((~~East-Asian~~)) acupuncturist or acupuncture and Eastern medicine practitioner, an applicant must have training in ((~~East-Asian~~)) acupuncture or Eastern medicine sciences consisting of a minimum of seventy-five quarter credits or fifty semester or trimester credits. These credits must include, but not be limited to, the following subjects of ((~~acupuncture/East-Asian~~)) acupuncture/Eastern medicine:

- (1) Fundamental principles;
- (2) Diagnosis;
- (3) Pathology;
- (4) Therapeutics;
- (5) Meridians/vessels and points; and
- (6) Techniques, including electro-acupuncture.

AMENDATORY SECTION (Amending WSR 11-17-105, filed 8/22/11, effective 9/22/11)

**WAC 246-803-230 Clinical training.** To become an ((~~East-Asian~~)) acupuncturist or acupuncture and Eastern medicine practitioner, an applicant must complete a minimum of five hundred hours of supervised clinical training in acupuncture or Eastern medicine including no more than one hundred hours of observation which includes case presentation and discussion. At least four hundred hours must be patient treatment.

(1) Qualified instructors must observe and provide guidance to the student as appropriate. Instructors must be qualified to provide instruction in their areas of specialization in ((~~East-Asian~~)) acupuncture or Eastern medicine as demonstrated by possession of the following:

(a) Broad and comprehensive training in ((~~East-Asian~~)) acupuncture or Eastern medicine; and

(b) Two years of relevant current work experience or teaching experience in ((East-Asian)) acupuncture or Eastern medicine.

(2) Qualified instructors must be available within the clinical facility to provide consultation and assistance to the student for patient treatments. Prior to initiation of each treatment, instructors must have knowledge of and approve the diagnosis and treatment plan.

(3) "Patient treatment" includes:

(a) Conducting a patient intake interview concerning the patient's past and present medical history;

(b) Performing ((East-Asian)) acupuncture or Eastern medicine examination and diagnosis;

(c) Discussion between the instructor and the student concerning the proposed diagnosis and treatment plan;

(d) Applying ((East-Asian)) acupuncture or Eastern medicine treatment principles and techniques; and

(e) Charting of patient conditions, evaluative discussions and findings, and concluding remarks.

AMENDATORY SECTION (Amending WSR 11-17-105, filed 8/22/11, effective 9/22/11)

**WAC 246-803-240 Examinations.** (1) The examinations administered by the National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM) are the official examinations for licensure as an ((East-Asian)) acupuncturist or acupuncture and Eastern medicine practitioner.

(2) An applicant for licensure as an ((East-Asian)) acupuncturist or acupuncture and Eastern medicine practitioner must pass the following examinations:

(a) Foundations of Oriental medicine examination;

(b) Acupuncture with point location examination;

(c) Biomedicine examination; and

(d) Council of Colleges of Acupuncture and Oriental Medicine (CCAOM) clean needle technique course.

(3) If the applicant takes the examinations listed in subsection (2) of this section in a language other than English, they must also take and pass the test of English as a foreign language (TOEFL) internet-based (IBT) examination. This is done by obtaining scores on the TOEFL IBT of at least:

(a) 24 on the writing section;

(b) 26 on the speaking section;

(c) 21 on the reading section; and

(d) 18 on the listening comprehension section.

AMENDATORY SECTION (Amending WSR 20-03-112, filed 1/15/20, effective 2/15/20)

**WAC 246-803-300 Patient notification of qualifications and scope of practice.** ((East-Asian)) Acupuncturists or acupuncture and Eastern medicine practitioners in the state of Washington shall provide to

each patient prior to or at the time of the initial patient visit the qualifications and scope of practice form. The form must include:

(1) The ~~((East-Asian))~~ acupuncturist's or acupuncture and Eastern medicine practitioner's education. The degree obtained ~~((or if the education was by apprenticeship,))~~ and the dates and locations of the didactic and clinical training.

(2) License information, including state license number and date of licensure.

(3) A statement that the practice of ~~((East-Asian))~~ acupuncture or acupuncture and Eastern medicine in the state of Washington includes the following:

(a) Acupuncture, including the use of acupuncture needles or lancets to directly and indirectly stimulate acupuncture points and meridians;

(b) Use of electrical, mechanical, or magnetic devices to stimulate acupuncture points and meridians;

(c) Moxibustion;

(d) Acupressure;

(e) Cupping;

(f) Dermal friction technique;

(g) Infrared;

(h) Sonopuncture;

(i) Laserpuncture;

(j) Point injection therapy ~~((acuapuncture))~~ is defined as meaning the subcutaneous, intramuscular and intradermal injection of substances consistent with the practice of ~~((East-Asian))~~ acupuncture or Eastern medicine to stimulate acupuncture points, ashi points, trigger points and meridians.

(i) For the purposes of this section, point injection therapy includes trigger points as a subset of acupuncture points and ashi points as recognized in the current practice of ~~((East-Asian))~~ acupuncture and Eastern medicine.

(ii) Does not include injection of controlled substances contained in Scheduled I through V of the Uniform Controlled Substance Act, chapter 69.50 RCW or steroids as defined in RCW 69.41.300.

(iii) Substances are limited to:

(A) Saline;

(B) Sterile water;

(C) Herbs specifically manufactured for injection by means of hypodermic needles;

(D) Minerals specifically manufactured for injection by means of hypodermic needles;

(E) Vitamins in liquid form specifically manufactured for injection by means of hypodermic needles; and

(F) Homeopathic and nutritional substances specifically manufactured for injection by means of hypodermic needles.

(k) Dietary advice and health education based on ~~((East-Asian))~~ acupuncture or Eastern medical theory, including the recommendation and sale of herbs, vitamins, minerals, and dietary and nutritional supplements;

(l) Breathing, relaxation, and ~~((East-Asian))~~ Eastern exercise techniques;

(m) Qi gong;

(n) ~~((East-Asian))~~ Eastern massage and Tui na (which is a method of ~~((East-Asian))~~ Eastern bodywork); and

(o) Superficial heat and cold therapies.

(4) A statement that side effects of the treatments listed above may include, but are not limited to, the following:

- (a) Pain following treatment;
- (b) Minor bruising;
- (c) Infection;
- (d) Needle sickness; and
- (e) Broken needle.

(5) A statement that patients must inform the ((East-Asian)) acupuncturist or acupuncture and Eastern medicine practitioner if they have a severe bleeding disorder or pacemaker prior to any treatment.

AMENDATORY SECTION (Amending WSR 20-03-112, filed 1/15/20, effective 2/15/20)

**WAC 246-803-305 Patient record content.** (1) A licensed ((East-Asian)) acupuncturist or acupuncture and Eastern medicine practitioner shall:

(a) Make a complete, legible, and accurate record of each patient to whom an ((East-Asian)) acupuncture or Eastern medicine treatment is given. The ((East-Asian)) acupuncturist or acupuncture and Eastern medicine practitioner shall ensure that a patient record is in English and includes:

- (i) Name of the patient;
- (ii) Patient history;
- (iii) Dates of treatment;
- (iv) Treatment given; and
- (v) Progress made during treatment.

(b) Maintain a patient record for six years after the last treatment of the patient.

(c) Maintain a patient record for at least six years after the patient reaches eighteen years of age.

(2) A licensed ((East-Asian)) acupuncturist or acupuncture and Eastern medicine practitioner shall comply with chapter 70.02 RCW and the Health Insurance Portability and Accountability Act, 45 C.F.R. destruction and privacy regulations.

(3) For the purposes of this section "patient records" means all records maintained by a practitioner that includes all information related to the patient.

AMENDATORY SECTION (Amending WSR 20-03-112, filed 1/15/20, effective 2/15/20)

**WAC 246-803-308 Patient abandonment.** (1) An ((East-Asian)) acupuncturist or acupuncture and Eastern medicine practitioner may accept or reject a patient, but shall respond to any reasonable request for services in the interest of public health and welfare.

(2) The attending ((East-Asian)) acupuncturist or acupuncture and Eastern medicine practitioner, without reasonable cause, shall not neglect, ignore, abandon, or refuse to treat a patient. If the ((East-Asian)) acupuncturist or acupuncture and Eastern medicine practitioner chooses to withdraw responsibility for a patient of record, the ((East-

Asian)) acupuncturist or acupuncture and Eastern medicine practitioner shall:

(a) Advise the patient in writing that treatment is being terminated and that another ((East-Asian)) acupuncturist or acupuncture and Eastern medicine practitioner should be sought for future care; and

(b) Advise the patient that the ((East-Asian)) acupuncturist or acupuncture and Eastern medicine practitioner shall remain reasonably available for up to fifteen calendar days from the date of such notice to address clinical concerns related to the care provided.

AMENDATORY SECTION (Amending WSR 11-17-105, filed 8/22/11, effective 9/22/11)

**WAC 246-803-310 Referral to primary health care provider. (1)**

When an ((East-Asian)) acupuncturist or acupuncture and Eastern medicine practitioner sees a patient with a potentially serious disorder, the ((East-Asian)) acupuncturist or acupuncture and Eastern medicine practitioner shall immediately request a consultation or written diagnosis from a primary health care provider.

(2) Potentially serious disorders include, but are not limited to:

- (a) Cardiac conditions including uncontrolled hypertension;
- (b) Acute abdominal symptoms;
- (c) Acute undiagnosed neurological changes;
- (d) Unexplained weight loss or gain in excess of fifteen percent body weight within a three-month period;
- (e) Suspected fracture or dislocation;
- (f) Suspected systemic infection;
- (g) Any serious undiagnosed hemorrhagic disorder; and
- (h) Acute respiratory distress without previous history or diagnosis.

(3) In the event a patient with a potentially serious disorder refuses to authorize such consultation or provide a recent diagnosis from a primary health care provider, ((East-Asian medical treatments, including)) acupuncture or Eastern medicine treatments, may only continue after the patient signs a written waiver acknowledging the risks associated with the failure to pursue treatment from a primary health care provider.

(4) The written waiver must include:

(a) A statement acknowledging that failure by the patient to pursue treatment from a primary health care provider may involve risks that such a condition can worsen without further warning and even become life threatening;

(b) An explanation of an ((East-Asian)) acupuncturist's or acupuncture and Eastern medicine practitioner's scope of practice, to include the services and techniques ((East-Asian)) acupuncturists or acupuncture and Eastern medicine practitioners are authorized to provide; and

(c) A statement that the services and techniques that an ((East-Asian)) acupuncturist or acupuncture and Eastern medicine practitioner is authorized to provide will not resolve the patient's underlying potentially serious disorder.



AMENDATORY SECTION (Amending WSR 20-03-112, filed 1/15/20, effective 2/15/20)

**WAC 246-803-320 Instrument sterilization procedure.** (1) An ((East-Asian)) acupuncturist or acupuncture and Eastern medicine practitioner shall use sterile instruments and follow proper instrument sterilization procedures and the keeping of accurate records of sterilization cycles and equipment service maintenance as described in the manufacturer's instruction manual and the 7th edition of "*Best Practices for Acupuncture Needle Safety and Related Procedures*" published by the Council of Colleges of Acupuncture and Oriental Medicine revised May 2017. This shall not apply to needles, which may not be reused or sterilized for a subsequent use on more than one patient under any circumstances.

(2) "Sterilization" means to kill all microbial life, including bacterial spores, for instruments which enter tissues. Sterilization is accomplished by subjecting clean items to steam pressure (autoclaving), ultraviolet-C, or to dry heat.

AMENDATORY SECTION (Amending WSR 20-03-112, filed 1/15/20, effective 2/15/20)

**WAC 246-803-325 Preparing and maintaining a clean field.** (1) A clean field is the area that has been prepared to contain the equipment necessary for acupuncture in such a way as to reduce the possible contamination of sterile needles and other clean or sterile equipment.

(2) An ((East-Asian)) acupuncturist or acupuncture and Eastern medicine practitioner must prepare and maintain a clean field for each patient.

AMENDATORY SECTION (Amending WSR 11-17-105, filed 8/22/11, effective 9/22/11)

**WAC 246-803-400 Inactive status.** (1) An ((East-Asian)) acupuncturist or acupuncture and Eastern medicine practitioner may obtain an inactive license by meeting the requirements of WAC 246-12-090.

(2) An inactive license must be renewed every year on the ((East-Asian)) acupuncturist's or acupuncture and Eastern medicine practitioner's birthday according to WAC 246-12-100 and 246-803-990.

(3) If a license is inactive for three years or less, to return to active status an ((East-Asian)) acupuncturist or acupuncture and Eastern medicine practitioner must meet the requirements of WAC 246-12-110 and 246-803-990.

(4) If a license is inactive for more than three years and the ((East-Asian)) acupuncturist or acupuncture and Eastern medicine practitioner has been actively practicing in another state of the United States or its major territories, to return to active status the ((East-Asian)) acupuncturist or acupuncture and Eastern medicine practitioner must:

(a) Provide certification of an active (~~East-Asian~~) acupuncturist or acupuncture and Eastern medicine practitioner license, submitted directly from another licensing entity. The certification shall include the license number, issue date, expiration date and whether the (~~East-Asian~~) acupuncturist or acupuncture and Eastern medicine practitioner has been the subject of final or pending disciplinary action;

(b) Provide verification of current active practice in another state of the United States or its major territories for the last three years; and

(c) Meet the requirements of WAC 246-12-110 and 246-803-990.

(5) If a license is inactive for more than three years, and the (~~East-Asian~~) acupuncturist or acupuncture and Eastern medicine practitioner has not been actively practicing in another state of the United States or its major territories, to return to active status the (~~East-Asian~~) acupuncturist or acupuncture and Eastern medicine practitioner must provide:

(a) A written request to change licensure status;

(b) (~~The applicable fees according to WAC~~) Meet the requirements of WAC 246-12-110 and 246-803-990;

(c) Proof of successful completion of the examinations as required in WAC 246-803-240 (2)(a), (b), and (c) within the past year; and

(d) Written certification of all (~~East-Asian~~) acupuncturist, acupuncture and Eastern medicine practitioner or health care licenses held, submitted directly from the licensing agency. The certification shall include the license number, issue date, expiration date and whether the (~~East-Asian~~) acupuncturist or acupuncture and Eastern medicine practitioner has been the subject of final or pending disciplinary action(~~;~~ and

~~(e) Proof of AIDS education according to WAC 246-803-100, 246-803-110 or 246-803-120).~~

AMENDATORY SECTION (Amending WSR 20-03-112, filed 1/15/20, effective 2/15/20)

**WAC 246-803-410 Expired license.** An (~~East-Asian~~) acupuncturist or acupuncture and Eastern medicine practitioner with an expired license may return his or her license to an active license. During the time the license is expired, an (~~East-Asian~~) acupuncturist or acupuncture and Eastern medicine practitioner cannot practice in Washington state.

(1) If an (~~East-Asian~~) acupuncturist's or acupuncture and Eastern medicine practitioner's license has expired for one year or less, the (~~East-Asian~~) acupuncturist or acupuncture and Eastern medicine practitioner may return to active status by meeting the requirements of WAC 246-12-040 (3)(a)(i) through (v) and 246-803-990.

(2) If an (~~East-Asian~~) acupuncturist's or acupuncture and Eastern medicine practitioner's license has expired for more than one year but less than three, the (~~East-Asian~~) acupuncturist or acupuncture and Eastern medicine practitioner may return to active status by meeting the requirements of WAC 246-12-040 (3)(b)(i) through (ix) and 246-803-990.

(3) If an (~~East Asian~~) acupuncturist's or acupuncture and Eastern medicine practitioner's license has expired for three years or more at the time of application and they have been engaged in practice in another state or United States jurisdiction, the (~~East Asian~~) acupuncturist or acupuncture and Eastern medicine practitioner may return to active status by submitting proof to the department of:

(a) Verification of active practice from any other state or United States jurisdiction. For this purpose "active practice" means a minimum of five hundred sixty hours of practice in the preceding twenty-four months; and

(b) Having met the requirements of WAC 246-12-040 (3)(c)(i) through (xi) and 246-803-990.

(4) If an (~~East Asian~~) acupuncturist's or acupuncture and Eastern medicine practitioner's license has expired for three years or more at the time of application and they have not been engaged in practice in another state or United States jurisdiction, the (~~East Asian~~) acupuncturist or acupuncture and Eastern medicine practitioner may return to active status by submitting proof to the department of:

(a) Having met the requirements of subsection (2) of this section; and

(b) In addition to these requirements, the practitioner has the choice of:

(i) Completion of extended course work preapproved by the department; or

(ii) Successfully retaking and passing the examinations as required in WAC 246-803-240.

#### NEW SECTION

**WAC 246-803-420 Continuing education requirements.** The goal of continuing education is to encourage the lifetime development of the licensed acupuncturist or acupuncture and Eastern medicine practitioner, and enhance the professional skills and judgment needed to protect the health and safety of all patients.

(1) A licensed acupuncturist or acupuncture and Eastern medicine practitioner shall complete a minimum of twenty hours of continuing education every two years.

(a) The two-year continuing education reporting period for an acupuncturist or acupuncture and Eastern medicine practitioner licensed in Washington before April 30, 2021, begins May 1, 2021, and verification of completion of continuing education hours will be due on the acupuncturist's or acupuncture and Eastern medicine practitioner's annual license renewal date in 2023, and every two years thereafter. The two-year continuing education reporting period for an acupuncturist or acupuncture and Eastern medicine practitioner initially licensed in Washington on or after May 1, 2021, begins upon date of licensure.

(b) A licensed acupuncturist or acupuncture and Eastern medicine practitioner shall attest to the completion of twenty hours of continuing education every two years as a part of their license renewal requirement.

(c) The department of health (department) may randomly audit up to twenty-five percent of licensed acupuncturists or acupuncture and

Eastern medicine practitioners every two years for compliance after the license is renewed as allowed by chapter 246-12 WAC, Part 7.

(d) A licensed acupuncturist or acupuncture and Eastern medicine practitioner shall comply with the requirements of chapter 246-12 WAC, Part 7.

(e) The department will not authorize or approve specific continuing education courses.

(2) A licensed acupuncturist or acupuncture and Eastern medicine practitioner may alternatively meet the requirement of twenty hours of continuing education every two years if they hold a current diplomate status from the National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM). The required documentation is proof of diplomate status during the two-year period.

(3) A licensed acupuncturist or acupuncture and Eastern medicine practitioner shall maintain a current cardiopulmonary resuscitation (CPR) and basic first aid certification. A licensed acupuncturist or acupuncture and Eastern medicine practitioner may count the actual hours earned per renewal cycle for this requirement.

(4) Continuing education must contribute to the professional knowledge and development of the licensed acupuncturist or acupuncture and Eastern medicine practitioner or enhance services provided to patients or public health and safety. Continuing education must be completed in one or more of the following categories:

(a) Educational courses as listed in RCW 18.06.050 relating to the practice of health care, western clinical sciences, acupuncture, or acupuncture and Eastern medicine;

(b) Emergency management or disaster preparedness;

(c) Infection control and federal/state safety standards;

(d) Ethics;

(e) Patient care related education including patient communication, risk management, methods of health delivery, cultural diversity, and suicide prevention education;

(f) Washington state acupuncture and Eastern medicine law;

(g) Patient communication;

(h) Practice management and billing practices. A licensed acupuncturist or acupuncture and Eastern medicine practitioner may not count more than ten hours every two years in this category.

(5) Continuing education in subject categories identified in subsection (4) of this section may be completed using any of the following activities or methods:

(a) Attendance at local, state, national, or international education courses, live interactive webinars, postdoctoral education, and study clubs. A study club is defined as two or more practitioners meeting to discuss topics relative to their health care practice;

(b) Self-study by various means, relevant to acupuncture or acupuncture and Eastern medicine, without an instructor physically present.

(i) Self-study can be continuing education provided online or through the mail provided by a continuing education provider.

(A) A licensee must have documentation of course completion; or

(B) Provide a two-page synopsis of what was learned written by the licensed acupuncturist or acupuncture and Eastern medicine practitioner is required. Two hours of continuing education for each synopsis will be granted. A licensed acupuncturist or acupuncture and Eastern medicine practitioner may earn up to a maximum of six hours every two years for this activity.

(ii) Self-study can be reading a book that contributes to the professional knowledge and development of the licensed acupuncturist or acupuncture and Eastern medicine practitioner, or enhance services provided to patients. A two-page synopsis of what was learned written by the licensed acupuncturist or acupuncture and Eastern medicine practitioner is required. Two hours of continuing education for each book and synopsis will be granted. A licensed acupuncturist or acupuncture and Eastern medicine practitioner may earn up to a maximum of six hours every two years for this activity.

(c) Teaching, presenting, or lecturing in a course, only if the presentation or lecture is created or authored by the acupuncturist or acupuncture and Eastern medicine practitioner claiming the continuing education hours, may earn up to a maximum of ten hours every two years;

(d) Panelist at a conference or seminar for health care providers. Up to a maximum of two hours may be applied per topic in the two-year period;

(e) Primary author of published multimedia material including, but not limited to: CD, audio, or video. Up to a maximum of five hours may be applied per publication in the two-year period;

(f) Participating member of a clinical research study team. Up to a maximum of ten hours may be applied in the two-year period;

(g) Direct clinical supervision of acupuncturist or acupuncture and Eastern medicine students in a school verified externship, internship, or preceptorship, may earn up to a maximum of ten hours every two years;

(h) Acupuncturist or acupuncture and Eastern medicine licensure examinations or serving on an acupuncturist or acupuncture and Eastern medicine professional board, committee or association may earn up to a maximum of ten hours every two years;

(i) Publishing a paper in a peer review journal up to a maximum of five hours the year the paper is published; and

(j) Provision of clinical acupuncturist or acupuncture and Eastern medicine patient care services in a documented volunteer capacity, may earn up to a maximum of ten hours every two years.

(6) The department may not accept any claim of credit for a continuing education course that does not meet the requirements of subsection (4) or (5) of this section.

(7) Proof of continuing education is a certificate of completion, letter, or other documentation verifying or confirming attendance or completion of continuing education hours. Documentation must be from the organization that provided the activity, except in subsection (5)(b)(i) and (ii), and (c) of this section, and must contain at least the following:

(a) Date of attendance or completion;

(b) Name of licensed acupuncturist or acupuncture and Eastern medicine practitioner;

(c) Hours earned; and

(d) Course title or subject.

(8) Upon showing good cause by the licensed acupuncturist or acupuncture and Eastern medicine practitioner in writing, the department may waive the acupuncturist or acupuncture and Eastern medicine practitioner from any, all, or part of the continuing education requirements in this chapter or may grant additional time for the acupuncturist or acupuncture and Eastern medicine practitioner to complete the requirements. Good cause includes, but is not limited to:

(a) Illness;

- (b) Medical necessity or family emergency;
- (c) Hardship to practice; or
- (d) Other extenuating circumstances.

NEW SECTION

**WAC 246-803-430 Suicide prevention education.** Effective June 11, 2020, a licensed acupuncturist or acupuncture and Eastern medicine practitioner must complete a department-approved one-time training that is at least six hours in length for suicide assessment that includes assessment, treatment, and management.

(1) This training must be completed by the end of the first full continuing education reporting period after August 1, 2021, or during the first full continuing education reporting period after initial licensure, whichever is later.

(2) Training approved by the department for this requirement must be on the department's model list as authorized in chapter 246-12 WAC, Part 14.

(3) Training completed between June 11, 2020, and August 1, 2021, that meets the requirements of this section, is accepted as meeting the one-time training requirement of this section.

(4) The hours spent completing the training in suicide assessment under this section count toward meeting applicable continuing education requirements for acupuncturist or acupuncture and Eastern medicine practitioner license renewal.

**(~~EAST ASIAN~~) ACUPUNCTURE AND EASTERN MEDICINE PROGRAM APPROVAL**

AMENDATORY SECTION (Amending WSR 11-17-105, filed 8/22/11, effective 9/22/11)

**WAC 246-803-990 (~~East Asian~~) Acupuncturist or acupuncture and Eastern medicine practitioner fees and renewal cycle.** (1) Licenses must be renewed every year on the practitioner's birthday as provided in chapter 246-12 WAC, Part 2.

(2) The following nonrefundable fees will be charged:

<b>Title of Fee</b>	<b>Fee</b>
License application	\$100.00
License renewal	196.00
Inactive license renewal	50.00
Late renewal penalty	105.00
Expired license reissuance	50.00
Expired inactive license reissuance	50.00

<b>Title of Fee</b>	<b>Fee</b>
Duplicate license	15.00
Certification of license	25.00
<del>((East Asian))</del> <u>Acupuncture or Eastern</u> medicine training program application	500.00
UW library access fee	9.00

REPEALER

The following sections of the Washington Administrative Code are repealed:

- |                 |   |
|-----------------|---|
| WAC 246-803-120 | Application requirements for applicants from approved apprenticeships or tutorials. |
| WAC 246-803-510 | Application for approval of alternative training.                                   |