

**THURSTON COUNTY MEDIC ONE
OPERATIONS COMMITTEE ~ REGULAR MEETING
EMERGENCY SERVICES CENTER/EOC**

June 4, 2015, 2:00 PM

AGENDA

- I. CALL TO ORDER/ROLL CALL
- II. APPROVAL OF AGENDA
- III. PUBLIC PARTICIPATION
- IV. REVIEW AND APPROVAL OF MINUTES
 - A. Operations Committee - May 14, 2015 Meeting
 - B. EMS Council - Draft May 20, 2015 Meeting (Informational Only)
- V. COMMITTEE REPORTS
 - A. West Region EMS Council
 - B. Subcommittees
 - 1. Equipment Committee (EqC) – Chair or Representative
 - 2. Mass Casualty Incident (MCI) Committee – Chair or Representative
 - 3. Training Advisory Committee (TAC) – Chair or Representative
 - C. Staff Report
 - D. Medic One Office Update

VI. OLD BUSINESS

	ITEM	PRESENTER	EXPECTED OUTCOME
A.	EMS Report	Wright	Informational
B.	Completion of 2014 statistics for EMSC	Wright	Update
C.			

OLD BUSINESS - ISSUES & ACTIONS PENDING

Paramedic exam/eval process (policy 20A)
Customer Satisfaction Survey
Bylaws Committee

VII. NEW BUSINESS

	ITEM	PRESENTER	EXPECTED OUTCOME
A.	Non-emergent transports in Thurston County	Wright	Discussion
B.	Thurston County Association of Fire Chief's Training Concerns	Wright	Update
C.			

VIII. GOOD OF THE ORDER -

IX. ADJOURNMENT

**THURSTON COUNTY MEDIC ONE
OPERATIONS COMMITTEE ~ MEETING MINUTES
EMERGENCY SERVICES CENTER
May 14, 2015**

PRESENT: Brian VanCamp, Steve Brooks, Keith Flewelling, Jim Fowler, Mary Campbell, Dave Pearsall, Russ Kaleiwahea, Larry Fontanilla MD (MPD), Jody Halsey, Kathy Pace, Amy Larson, Stewart Mason

ABSENT: Alex Christiansen

EXCUSED: Greg Wright, Scott LaVielle

GUESTS: Anthony Kuzma, Warren Peterson

STAFF: Cindy Hambly, Catherine Griffin, Alan Provencher

I. CALL TO ORDER/ROLL CALL – Chair VanCamp called the regular meeting of the Operations Committee to order at 2:00 PM. Roll was recorded by staff.

II. APPROVAL OF AGENDA –MSC (Fowler/Brooks) Accept agenda.

III. PUBLIC PARTICIPATION – None

IV. REVIEW AND APPROVAL OF MINUTES

1. Operations Committee – April 2, 2015 – **MSC** (Fowler/Brooks) moved to approve.
2. EMS Council – Draft April 15, 2015 Mtg. (Informational Only)

V. COMMITTEE REPORTS

A. WEST REGION – Hambly reported WREMS are discussing if a 2016 conference will be held. WREMS was not selected to receive a \$19K funding grant this year. Unless significant funding from sponsors come forward the 2016 conference may have to be canceled. WREMS will be moving their office to Station 95 (125 Delphi Rd NW, Olympia) July 2015.

B. SUBCOMMITTEES

1. Equipment Committee (EqC) – Provencher briefed Ops on their April 15th meeting and presented their minutes. Of specific note they are working on notification of expiration dates of medical products supplied by Medic One.
2. Mass Casualty Incident (MCI) Committee – Hambly reported they working on the After Action Report and it should be completed by the end of June 2015.
3. Training Advisory Committee (TAC) – TAC did not hold a meeting in April and Hambly provided minutes dated March 18, 2015. The next TAC meeting is scheduled for May 20, 2015.

C. STAFF REPORT – Staff report was included in the packet. Hambly highlighted the following:

- TRPC met with the Chiefs on April 29th to obtain input. TRPC will be submitting their Scope of Work report to the EMSC.
- CPR total instructors are 63.
- Ebola – All PPE items have been received for our preparedness. Enough equipment is now available for just-in-time training should the need arise.
- Protocol Update BLS Rollout classes should conclude around June 30, 2015.
- Paramedic hiring list has 4 individuals. Two carried over from the last testing process and two newly added from the May 2015 testing.
- The BLS data system implementation is almost complete. OFD still requires training. Training is complete for all other BLS agencies. AMR still waiting on a working program interface.
- EMT class had 38 original applicants, 30 accepted, as of today 23 students remain (5 self-dropped, 2 failed testing). Graduation date is scheduled for June 18, 2015, 6:30pm at the Yelm High School auditorium.
- Hambly highlighted the Legislative Report.

- D. **MEDIC ONE OFFICE UPDATE** – Hambly provided an update on the Director’s status and current staffing levels. It is anticipated the Director may return around August 2015.

VI. OLD BUSINESS

- A. **EMS Council Report** – Hambly said the Director wanted the updated Strategic Plan and 2014 Business Plan provided. VanCamp asked that that an electronic version be sent via email.
- B. **Special Projects** – Brooks presented a spreadsheet summary with subcommittees comments and recommendations. After briefing Operations on the subcommittees recommendations and some discussion a motion was made. **MSC** (Pace/Flewelling) move to accept funding as presented totaling \$13,414.

VII. NEW BUSINESS

- A. **EMS Week May 17-23rd, 2015**. Hambly briefed committee that the BOCC signed the proclamation on May 12th. On May 17th and 20th the Olympian will publish an insert with the names active Thurston County EMS providers, basic CPR instructions and TCEMS history.
- B. **Min/Max** – Hambly presented the current WA State DOH Min/Max along with Thurston County actual Min/Max count. Discussion concerning possibly pushing forward the 2013 changes/recommendations that were previously submitted to DOH but not acted on. Staffs recommendation is to move to approve and recommend the same to the WREMS Council modifying min/max number of verified trauma services as described in the attachment 7B (table) listed as Operations Committee Min/Max 2015-2013. Discussion continued about pushing through with the original 2013 recommendations. **MSC** (Mason/Fontanilla) to move to recommend and submit the original recommendations submitted in 2013.

- VIII. GOOD OF THE ORDER** – Brooks shared the current OFD EMS Officer was recently diagnosed with lung cancer. He is currently seeking treatment and has a significant road ahead.

IX. ADJOURNMENT - 2:40 PM

**Thurston County Medic One
Emergency Medical Services Council – Regular Meeting
Emergency Operations Center/ECC
May 20, 2015**

PRESENT: Jim Copper, Rena Merithew, Frank Kirkbride, Dr. Tom Fell, Russ Hendrickson, Lenny Greenstein, Stan Moon, Roger McMaster, Margaret McPhee, Eileen Swarhout, John Ricks, Bud Blake

EXCUSED: John Christiansen, Dr. Larry Fontanilla

GUESTS: Terry Ware, Alex Christiansen, Meredith Hutchins, Anthony Kuzma

STAFF: Cindy Hambly, Fay Flanery, Catherine Griffin

- I. **CALL TO ORDER/ROLL CALL** – Chair McPhee called the regular meeting of the Emergency Medical Services Council (EMSC) to order at 3:30 PM. Roll was recorded by staff.
- II. **APPROVAL OF AGENDA – MSC** (Cooper/Ricks) moved to approve agenda as presented.
- III. **PUBLIC PARTICIPATION** – None.
- IV. **REVIEW AND APPROVAL OF MINUTES**
 - A. EMS COUNCIL – April 15, 2015 – **MSC** (Kirkbride/Greenstein) move to approve as presented.
 - B. OPERATIONS COMMITTEE – May 14, 2015 Meeting Minutes not available. (Informational Only)
- V. **COMMITTEE REPORTS**
 - A. OPERATIONS COMMITTEE – Wright will present updated EMS data at the next meeting. Special projects and Min/Max were discussed and are listed on this agenda for further discussion.
 - B. WEST REGION EMS COUNCIL– Hambly reported they are moving to Station 95, 125 Delphi Rd NW, Olympia in July. They are finalizing Min/Max for West Region. WREMS was not selected to receive a \$19K funding grant this year. Unless significant funding from sponsors come forward the 2016 conference may have to be canceled.
 - C. STAFF REPORT– Hambly provided an update on Steve Romines medical condition. Included with packet, Hambly highlighted on:
 - EMS Week May 17th- 23rd there is a mailing insert in the local paper.
 - CPR Instructors increased to >60. CPR class will be provided by Preston Wallace after EMSC adjourns.
 - BLS protocol update rollout continues with the bulk of the classes being presented by Anna Lee Drewry. All BLS providers should be updated by the end of June.
 - ALS protocols changes will then begin and it's anticipated all changes and the final document should be completed by the end of August 2015.
 - BLS data system – All training has been completed except for AMR (review of the final contract) and OFD. The rollout training to be held simultaneously as they are interdependent on each other when facilitating BLS transports with AMR.
 - National Registry: Thurston County is at 95% passing, which is top 3 in Washington State. The national level is 79%.
 - Spring EMT class started with 30 students, currently at 22 (5 self-dropped, 3 fail).
 - Legislative report was included in the packet.
- VI. **OLD BUSINESS –**
 - A. TRPC Study – Kirkbride reported Paul Brewster was unable to attend May EMSC meeting but will be available in June if needed. The packet submitted is for direct follow up from the priority list that was developed. He added, the Chiefs have been working on getting BLS in the same format as the ALS data so that it can be used and the 2014 data will create the platform for future data statistics. Kirkbride continued that we are about two years out for usable data. TRPC has met with staff at Medic One, individual Chief's and the Fire Chief's Association to find out exactly where they are and what data is available. Kirkbride indicated the contract was included in the packet and the earliest the contract could be executed by BOCC is in August. Brewster feels comfortable with the cost proposal of \$14,250 to complete. Council discussion followed with Kirkbride stating the methodology TRPC develops will be transferred to Medic One for continued assessments of the system. The contract will come back to the June meeting for vote.

- B. 2016 Reserve Budget – McPhee provided an overview of the budget committee discussion and work. She^{4B} added a clean draft policy will be presented at next month's meeting. McPhee continued, the unreserved part of the reserve fund is now being called the Operations & Capital Reserve Fund Balance. In addition, in the 2016 operations budget you will see that we will start using our unreserved operations and capital fund balance to supplement our operating budget. Hambly added the policy will be written to indicate a balance we want to maintain in the reserve fund. McPhee indicated the current projection of the levy restoration is anticipated to take place around 2018 if we set aside 6 months reserves for operations. If the voters say no, the reserve fund would provide some time to search for other options.

VII. NEW BUSINESS –

- A. Special Projects – Wright presented the spreadsheet with the list of Special Projects grant requests from various TC EMS agencies. 13 proposals and 10 deemed acceptable by the subcommittee. **MSC** (Moon/McMaster) Recommendation to approve the request as submitted for the full amount recommended by the Operations and Special Projects Subcommittee totaling \$13,414 for EMS agencies and \$5,000 for SORT.
- B. Min/Max Review – Wright briefed EMSC on the requirement that must be fulfilled with the state. Hambly explained the spreadsheet data and requested the Council vote due to short turnaround time back to the State. She added, this data can be updated/changed anytime throughout the year with the state if it becomes necessary. Hambly stated the Operations Committee recommendation is to re-submit the 2013 numbers to the state. **MSC** (Greenstein/Kirkbride) Moved to approve the (2013) status quo current Min/Max recommendation of Thurston County's current state approved trauma verified. Council discussion followed.
- C. EMS Week – Hambly presented during staff report.

VIII. PUBLIC PARTICIPATION – None.

IX. GOOD OF THE ORDER – OFD EMSO was recently diagnosed with lung cancer.

X. ADJOURNMENT – Meeting adjourned at 4:31 PM.

EMS System Operational Review, TRPC as Process Project Manager, proposed at July meeting, recommending contract to BOCC. Signed by BOCC September 25, TRPC initiating, last session 12/19, contacting Chiefs/Com, Report 6/19 EMS Council meeting 3:30, presented, to EMS community for comment. Presentations: EMSC 6/19, Fire Commissioner/Chiefs Assoc 7/16, BOCC 8/7 (Medic One website, System Reports), comments due, EMS Council accepts 9/18, to BOCC, Steering Committee (expanded) working, EMSC agenda/minutes recommendation 4.4 approved to staff on website; Governance recommendation 4.3.1 approved by BOCC. BOCC appoints new/vacant EMSC Citizen members (Dr Tom Fell, countywide MD rep, Rena Merithew BOCC 1 rep). Steering Committee report to EMS Council, projects prioritized at July meeting, reviewed at September meeting, approved work plan at Jan 21, to Business Plan. TRPC reviewing priority project list for proposal. **Medic One staff and TRPC met with Fire Chiefs Assoc May 29.**

CPR Outreach, special on site upcoming Community CPR classes: Intercity Transit (4 classes), Washington State Parks (2 classes), Dept. of Revenue committed to have all their employees trained setting up dates next month. Instructor pool increased (6 to 41). Citizen Hands Only CPR class implemented. CPR Instructor course set for April 2, completed with 24. 60 CPR Instructors available for citizen CPR classes. 2014 Cardiac Arrest Survival = 47% (+2 EMD)

Ebola planning, 9-1-1 screening protocol, supplemental PPE received (completed), PPE protocol developed, training being prepared, response plan being developed

Protocol update processing to agencies, app update to follow. Update classes scheduled, required EMS attendance.

2015 Budget drafted by staff and budget committee, presenting to EMSC, 7/16 meeting, Status quo budget being recommended, targeting zero increase, EMS Council recommends \$1,000 per agency enhancement, to BOCC, rejected, Fire Commissioners Assoc to request reconsideration at budget hearing, approved to add \$1,000 base/agency financial. 2014 Business plan Q2 report on website. Website updated for plan, agendas, minutes, bylaws, members, completed. 2015 Levy Rate = \$0.3709/\$1,000; \$9,958,158.20 (2014 = \$0.3855/\$1,000; \$9,738,937.35)

Medic hiring and oral exams. Completed May 4-5 2015 exam, 15 aps, 1 protocol review attendee, 3 pass written, 2 passed oral, 4 on list. Oct 2014 written exam 16 tested, 6 passed, 5 to retake oral plus 6 new, 11 testing, 2 on list, day 2 completed, 5 on eligible list.

NurseLine Criteria Based Dispatch Program, started December 11, 8AM, calls routed to Evergreen Hospital "Healthline," contract completed, implemented: 15 in August 2003, 14 September, 15 October, 15 November, 16 December, 11 January 2004, 13 February, 11 March, 8 April, 11 May, 7 June, 11 July, 8 Aug, 12 Sept, 8 Oct, 8 Nov, 13 Dec, 11 Jan 2005, 13 Feb, 12 Mar, 10 Apr, 11 May, 10 June; 11 July; 6 Aug; 4 Sept; 9 Oct; 5 Nov; 12 Dec; 14 Jan 2006; 11 Feb; 4 Mar; 14 Apr; 4 May; 9 June; 9 July; 11 Aug; 8 Sep; 7 Oct; 15 Nov; 6 Dec; 10 Jan; 12 Feb; 13 Mar; 7 Apr; 20 May; 15 June; 18 July; 10 Aug; 13 Sept; 8 Oct; 15 Nov; 11 Dec; Jan '08 11, 15 Feb, 10 Mar, 12 Apr, 14 May, 11 June, 14 July, 15 Aug; 22 Sept; 11 Oct; 14 Nov; 7 Dec. 5 Jan '09, 7 Feb, 6 Mar, 17 Apr, 7 May; 10 Jun; 17 Jul; 7 Aug; 10 Sep; 11 Oct; 15 Nov; 14 Dec; 11 Jan 2010; 7 Feb; 14 Mar; 10 Apr; 10 May, 16 Jun, 21 Jul, 18 Aug, 23 Sep, 14 Oct, 10 Nov, 16 Dec; 11 Jan 2011, Feb 15, Mar 24, Apr 19, May 20, Jun 10, July 21, Aug 14, Sep 17, Oct 15, Nov 10, Dec 21; 12 Jan 23, Feb 16, Mar 17, Apr 18, May 19, Jun 14, Jul 9 Aug 25, Sep 16, Oct 13, Nov 14, Dec 16; Jan 13, Feb 9, Mar 9, Apr 14, May 5, June 14, July 10, Aug 12, Sep 11, Oct 27, Nov 17, Dec 12; 14 Jan 16, Feb 11, Mar 13, Apr 9, May 14, Jun 17, Jul 16, Aug 10, Sep 10, Oct 19, Nov 4, Dec 13; **15 Jan 19, Feb 15, Mar 7, Apr 2, Total to date = 1,784/140** (avg 12.8/month) **Rate increase to \$17.40** from \$17.05/call allowed by contract medical CPI (line fee is same \$100/month)

EMS Data 2013 (TCOMM source), 28,630 system call volume +2,060 calls, +7.7% (2013 data volume 26,570). ALS response time 7.0 minutes average countywide, 94% goals achieved, call volume 8,622, +295 calls, responses +3.5% (2013 response time 7.6 minutes, 94% of goals, 8,327 responses). BLS call volume 20,008, +1,765, +9.7% (2013 18,243) Countywide BLS average response time 6.6 minutes, all BLS. BLS TCOMM Data Warehouse report, **draft data to Operations Committee for review.**

BLS data system, equipment received. HIPAA Business Associate agreements to be developed. Roll out started with LFD3 (due to troubleshooting proximity to M1 office) then FD12, installing all, training restarted, Olympic Ambulance agrees to use SafetyPad system, AMR reviewing interface possibility. (*Strategic area*) In production: FD 6, 8, 9, 12, 16, 17, SETFA, WTRFA, TFD, LFD3, Bucoda. Unscheduled: OFD, AMR (interface only), FD13. **Working with Trittech for CAD interface, fee \$35,000.**

WATRAC Advisory Group member added, meeting 9/9, planning sessions next 5/16, **next regular meeting 6/1**

TRAINING: average pass rate NR EMT exam = national 79%, WA state 85%, WR 90%, CR 93%, TC 95%
First Responder Course, none held

EMT Course 15-1 started 3/2/15 sta 9-5. Received 38 applications (7 late), 30 student start, now 25

EMS Instructor/Evaluator Workshop 42 instructors (9 new), completed

NIMS online training available at <http://training.fema.gov/EMIweb/IS/is700.asp>

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LEGISLATIVE UPDATE -As of 06/1/2015

EMS & TRAUMA CARE STEERING COMMITTEE
For Questions: Call Les Myhre at (360)236-2831

Introduction

This *Legislative Update* will be updated weekly and emailed to the members of the EMS and Trauma Care Steering Committee and its sub-committees every week during the 2015 Legislative Session. This update is being provided for information purposes only and is provided at the request of the EMS and Trauma Care Steering Committee. This update is in summary form and does not contain all bill information. It is not intended to convey support or opposition on any issue. If you have any questions, please contact Les Myhre at (360) 236-2831.

For additional information regarding the 2015 Legislative Session and Washington Legislative bills being introduced, please go to: www.leg.wa.gov.

Important 2015 Session Cut-off Dates

- 1/12 First Day of Session.
- 2/20 Last day to read in committee reports in house of origin, except House fiscal committees and Senate Ways & Means and Transportation committees.
- 2/27 Last day to read in committee reports from House fiscal committees and Senate Ways & Means and Transportation committees in house of origin.
- 3/11 Last day to consider bills in house of origin (5 p.m.).
- 4/1 Last day to read in committee reports from opposite house, except House fiscal committees and Senate Ways & Means and Transportation committees.
- 4/7 Last day to read in opposite house committee reports from House fiscal committee and Senate Ways & Means and Transportation committees.
- 4/15 Last day to consider opposite house bills (5 p.m.) (except initiatives and alternatives to initiatives, budgets and matters necessary to implement budgets, differences between the houses, and matters incident to the interim or closing of the session).
- 4/26 Sine Die -- Last day allowed for regular session under state constitution.
- 4/29 First day of Special Session
- 5/29 Last day of Special Session

- The Governor has five (5) days, excluding Sundays, to take action on any bill passed by the Legislature, provided adjournment does not occur within those five (5) days.

Bill # Sponsor	Bill Title	Brief Description	Status
BILLS			
+SHB 1340 Rep Cody, etc	An Act relating to developing a process to allow pilot programs for health care professionals to learn new skills or roles	<p>This bill amends RCW 18 by establishing the ability for sponsoring organizations to propose pilot projects – approved by the department - to test provider training or scope of practice flexibility. Pilot projects approved by the department would complete a trial period and then be evaluated. The evaluation will include possible changes to existing laws, training curriculum or scope of practice based on findings.</p> <p>Formalizes pilot project process.</p> <p>1st Substitute Permits the Department of Health to approve health workforce pilot projects that teach new skills to health care personnel, use existing skills in new settings, accelerate training, or teach new roles and skills to previously trained persons whose skills or license are not recognized in Washington.</p> <p>Permits a trainee in an approved project to perform services under a collaborative work agreement with a sponsoring organization and supervisor.</p> <p>Permits (rather than requires) the Department to consult with stakeholders, provides that the Department's decisions are not appealable, and directs that fees be set at a level to defray the costs of the program.</p>	<p>Jan 19-1st reading, referred to Health Care & Wellness</p> <p>Jan 28-Public hearing in House Cmte on Health Care & Wellness</p> <p>Jan 30-Executive session scheduled in House Cmte on Health Care & Wellness but no action taken</p> <p>Feb 3-Executive session scheduled for executive session in House Cmte on Health Care & Wellness but no action taken</p> <p>Feb 4- Executive session scheduled in House Cmte on Health Care & Wellness but no action taken</p> <p>Feb 6- Executive action taken in House Cmte on Health Care & Wellness; Majority 1st substitute bill be substituted, do pass</p> <p>Feb 10 – Referred to Appropriations</p> <p>Feb 24 – Public Hearing in House Cmte on Appropriations at 1:30pm</p> <p>2015 1ST SPECIAL SESSION</p> <p>Apr 29 By resolution, reintroduced and retained in present status.</p> <p>2015 2ND SPECIAL SESSION</p> <p>May 29 By resolution, reintroduced and retained in present</p>

Bill # Sponsor	Bill Title	Brief Description	Status
~ SB 5151 Sen Keiser, etc	Continuing education related to cultural competency for health care professionals	Amends RCW 43.70.615 and adding a new section to RCW 43.70. Requires a disciplining authority for certain health care professions to adopt rules requiring a health care provider to receive cultural competency continuing education (CE) training. DOH is required to approve, develop and make available a list of CE opportunities related to cultural competency. Expands cultural training requirement, would require additional CE hours.	status. Jan 14 -1 st reading, referred to Health Care 2015 1ST SPECIAL SESSION Apr 29 By resolution, reintroduced and retained in present status. 2015 2ND SPECIAL SESSION May 29 By resolution, reintroduced and retained in present status.
+HB 1135 Rep Cody, etc; by request of DOH, Companion bill SB 5754	Relating to education-based practice remediation for licensed health and health-related professions	Authorizes a disciplining authority to, after investigation, offer a remediation plan to licensed health and health- related professions. A remediation plan must not be used in any case in which there is evidence of harm to a patient or client as a direct result of the license holder's practice-related deficiencies. A remediation plan is not a disciplinary action, adverse action, or negative action and is not reportable under RCW 18.130.110 Allows for non-disciplinary remediation. 1st substitute Allows a credentialed health professional and disciplining authority to agree to a remediation plan to resolve allegations of unprofessional conduct. Provides for situations where a remediation plan is inappropriate.	Jan 14 -First reading referred to Health Care & Wellness Feb 10 - Public hearing in House Cmte on Health Care & Wellness at 8:00am Feb 13 -Executive action taken in House Cmte on Health Care & Wellness Majority, 1 st substitute; do pass Feb 17 – Referred to Rules 2 Review Mar 6 – Rules committee relieved of further consideration. Placed on second reading Mar 9 – 1 st Substitute Rules suspended. Placed on Third Reading; passed yeas, 98; <u>In Senate</u> Mar 11 –_First reading, referred to Health Care Mar 17 –Public hearing in the Senate Cmte on Health Care at 10:00 am

Bill # Sponsor	Bill Title	Brief Description	Status
			<p>Apr 24 By resolution, returned to House Rules Committee for third reading.</p> <p>2015 1ST SPECIAL SESSION</p> <p>Apr 29 By resolution, reintroduced and retained in present status.</p> <p>2015 2ND SPECIAL SESSION</p> <p>May 29 By resolution, reintroduced and retained in present status.</p>
<p>+HB 1009 Rep Manweller, etc</p> <p>Companion Bill SB 5000</p>	<p>Relating to allowing rural counties providing emergency medical services to locations with a rural amphitheater to impose an additional admissions surcharge</p>	<p>Amending RCW 36.38.010 and RCW 36.38.020; adding a new section to chapter RCW 43.10; and creating a new section</p> <p>HB 1009 authorizes certain counties to levy and apply an emergency medical services surcharge of up to one dollar per person to the price of admission at events (concerts and festivals) in rural amphitheaters.</p> <p>The county must distribute 65% of the proceeds of the surcharge to a hospital district providing service to the rural amphitheater and the remainder must be distributed to a fire protection district providing service to the rural amphitheater. The county legislative authority may authorize a person collecting EMS surcharge to retain up to five cents per dollar of surcharge as reimbursement for costs associated with collecting the surcharge.</p> <p>Rural amphitheater is defined as an outdoor amphitheater with capacity to accommodate greater than ten thousand people at one time in a county with fewer than one hundred fifteen thousand people as determined by OFM on April 1st of each year.</p> <p>Gorge at George cost recovery issue.</p> <p>1st substitute</p> <p>The Attorney General is required to appear and represent any county</p>	<p>Dec 8- Prefiled for introduction</p> <p>Jan 12-First reading, referred to House Cmte Local Government</p> <p>Jan 14 – Public hearing in House Cmte on Local Government</p> <p>Feb 17 – Executive action taken in House Cmte on Local Government at 10:00am; Majority, 1st substitute do pass</p> <p>Feb 19 – Referred to Finance</p> <p>Feb 23 – Public hearing in House Cmte on Finance at 8:00 am</p> <p>Feb 25 – Executive action taken in House Cmte on Finance at 8:00am Majority; 2nd substitute, do pass</p> <p>Feb 27 – Referred to Rules 2 Review</p> <p>Mar 6 – Rules Committee relieved of further consideration. Placed on Second Reading</p> <p>Mar 13 – Returned to Rules Committee for second reading</p> <p>2015 1ST SPECIAL SESSION</p>

Bill # Sponsor	Bill Title	Brief Description	Status
		<p>imposing the surcharge with respect to any action or proceeding arising from the imposition of the surcharge.</p> <p>Rural amphitheater must be in a rural county.</p> <p>2nd Substitute</p> <p>Removed section 43.10 that required Attorney General to appear and represent county imposing the EMS charge.</p>	<p>Apr 29 By resolution, reintroduced and retained in present status</p> <p>2015 2ND SPECIAL SESSION</p> <p>May 29 By resolution, reintroduced and retained in present status.</p>
<p>+SSB 5175 Sen Becker, etc</p>	<p>Relating to telemedicine</p>	<p>Amending RCW 70.40.020 and 70.41.230; adding a new section to chapter RCW 41.05; adding a new section to chapter RCS 48.43; adding a new section to chapter RCW 74.09; creating new sections; and providing an effective date.</p> <p>Legislature intent is to recognize the application of telemedicine as a reimbursable service by which an individual receives medical services from a health care provider without in person contact with the provider. Telemedicine means the delivery of health care services through the use of interactive audio and video technology, permitting real-time communication between the patient at the originating site and the provider, for the purpose of diagnosis, consultation, or treatment. For purposes of this section only, 'telemedicine' does not include the use of audio- only telephone, facsimile, or electronic mail.</p> <p>Allows for cost recovery.</p> <p>1st substitute</p> <p>Health insurance carriers, including health plans offered to state employees and Medicaid managed care plan enrollees, must reimburse a provider for a health care service delivered through telemedicine or store and forward technology if:</p> <ul style="list-style-type: none"> the plan provides coverage of the health care service when provided in person; the health care service is medically necessary; and the health care service is a service recognized as an essential health benefit under the ACA. 	<p>Jan 15-1st reading, referred to Health Care</p> <p>Jan 26-Public hearing in Senate Cmte on Health care at 10:00am</p> <p>Feb 5 – Executive action taken in Senate Cmte on Health Care at 10:00 am; Majority; 1st substitute be substituted, do pass</p> <p>Feb 6 – Passed to Rules Committee for second reading</p> <p>Feb 10 – Placed on second reading by Rules Committee</p> <p>Feb 11 – 1st substitute , Rules suspended. Place on Third Reading; passed.</p> <p>In the House:</p> <p>Feb 16 – First reading, referred to Health Care & Wellness</p> <p>Mar 25 – Scheduled for public hearing in House Cmte on Health Care & Wellness at 1:30pm</p> <p>Mar 26– Executive action taken in House Cmte on Health Care & Wellness at 10:00am;HWC; Majority; do pass</p>

Bill # Sponsor	Bill Title	Brief Description	Status
			<p>Mar 31 – Referred to Appropriations Apr 1 – Committee relieved of further consideration. Referred to Rules 2 Review Apr 8 – Placed on second reading by Rules Committee, Rules suspended, placed on third reading. Third reading, passed</p> <p>In Senate Apr 9 – President signed IN THE HOUSE Apr 10 Speaker signed. OTHER THAN LEGISLATIVE ACTION Apr 13 Delivered to Governor. (View Bill as Passed Legislature) Apr 17 Governor signed. Chapter 23, 2015 Laws. (View Session Law) Effective date 7/24/2015*.</p>
~SB 5291 Sen Mullet, etc	Relating to authorized health care providers prescribing epinephrine autoinjectors in the name of authorized entities	<p>Adds a new section to chapter RCW 70.54</p> <p>Authorized health care provider may prescribe epinephrine autoinjectors in the name of an authorized entity for use in accordance with this section, and pharmacists and physicians may dispense epinephrine autoinjectors pursuant to a prescription issued in the name of an authorized entity. The authorized entity may acquire and stock a supply in a location readily accessible in an emergency. Employees or agents of entity must complete anaphylaxis training prior to providing or administering an epinephrine autoinjector.</p>	<p>Jan 19-1st reading, referred to Health Care Feb 10- Public Hearing in Senate Cmte on Health Care at 10:00am Feb 12 – Executive action taken in Senate Cmte on Health Care; Majority; do pass Feb 13 – Passed to Rules Committee for second reading Feb 26 – Placed on second reading by Rules Committee Mar 23 - Senate Rules “x” file.</p>

Bill # Sponsor	Bill Title	Brief Description	Status
		Broadens epipen availability. MPD opinions?	2015 1ST SPECIAL SESSION Apr 29 By resolution, reintroduced and retained in present status. 2015 2ND SPECIAL SESSION May 29 By resolution, reintroduced and retained in present status.
+HB 1339 Rep Cody, etc	Relating to allowing the secretary of health to intercede and stay any decision of a disciplining authority that expands scope of practice	Adding a new section to chapter RCW 18.130; and creating a new section. Scope of practice for all health care professions is determined by the legislature. The scope of practice may be clarified, but not expanded, by a disciplining authority. Disciplining authorities do, on occasion, impermissibly expand the scope of practice for a profession under the guise of clarification. The legislature intends to create a process to allow the secretary of health to intercede and stay any decision of a disciplining authority that expands scope of practice Amendment- striker If the Secretary issues a stay, the Secretary must provide notice to the health care committees of the legislature and include a brief summary of the basis for the determination. Secretary may also include recommendations for addressing the scope of practice of the affected DOH must review the sunrise review statues and address specific criteria related to investigating scope of practice expansion issues. Results of the review must be reported to the health care committees of the Legislature by December 1, 2016. Clarifying	Jan 19 -First reading referred to Health Care & Wellness Jan 28 -Public hearing in the House Cmte on Health Care & Wellness Jan 30 -Executive action taken in House Cmte on Health Care & Wellness. Majority; do pass Feb 3 – Referred to Rules 2 Review. Feb 5 – Placed on second reading by Rules Cmte Feb 9 – Rules suspended. Placed on Third Reading. Third reading, passed <u>In Senate</u> Feb 10 – First reading referred to Health Care Mar 16 – Public hearing in Senate Cmte on Health Care at 10:00am Mar 31 – Executive action taken in Senate Cmte on Health Care at 10:00am Apr 1 – HLTH-Majority; do pass with amendment; Passed to Rules Committee for second reading Apr 24 By resolution, returned to

Bill # Sponsor	Bill Title	Brief Description	Status
			House Rules Committee for third reading. 2015 1ST SPECIAL SESSION IN THE HOUSE Apr 29 By resolution, reintroduced and retained in present status. 2015 2ND SPECIAL SESSION May 29 By resolution, reintroduced and retained in present status.
+SB 5821 Sen Rivers and Litzow	Relating to updating pharmacy provisions	Amending RCW 18.64.046, 18.64.020, 69.50.302, and 69.50.310; reenacting and amending RCW 18.64.011 and 18.64.044; adding new sections to chapter RCW 18.64; and creating a new section. Current legislative and regulatory laws relating to pharmacy practice in Washington state are out of date and in need of updating. Every pharmacy must establish a continuous quality improvement program that documents medication errors, contributing factors to the error, and how the error was resolved. The continuous quality improvement program must advance error prevention by conducting a systems review approach in response to a quality related event. Requires QI process for pharmaceutical errors.	Feb 4 – First reading, referred to Health Care 2015 1ST SPECIAL SESSION Apr 29 By resolution, reintroduced and retained in present status. 2015 2ND SPECIAL SESSION May 29 By resolution, reintroduced and retained in present status.
+HB 1944 Rep Rodne, etc	Relating to exemptions and immunities during a state of emergency	Amending RCW 43.06.220 Expands the list of waivers or suspensions of statutory or regulatory obligations or limitations that the governor may order after proclaiming a state of emergency. Those providing health care services in an area identified by the governor’s emergency proclamation including but not limited to hospitals, nursing homes, emergency medical services, home health care agencies, kidney dialysis facilities, assisted living facilities, and their employees and agents, is not liable for property damage or a	Feb 3 – First reading, referred to Judiciary 2015 1ST SPECIAL SESSION Apr 29 By resolution, reintroduced and retained in present status. 2015 2ND SPECIAL SESSION May 29 By resolution, reintroduced and retained in present

Bill # Sponsor	Bill Title	Brief Description	Status
		<p>persons' death or injury resulting from health care provided under the extreme emergency conditions, including but not limited to limited or rationed resources, damaged infrastructure, or exceeding the scope of practice or the limits of licensure for which the person or facility is licensed. This subsection does not apply when the injury, loss, or damage is due to: (a) The willful misconduct or gross negligence of the person, firm, corporation, or entity; or (b) The person being under the influence of or affected by 14 intoxicating liquor, marijuana, or any drug.</p> <p>Expands medical hold harmless during declared emergency.</p>	status.
<p>?HB 1878 Rep Kagi, etc</p>	<p>Relating to authorizing emergency medical technicians to administer glucagon in emergency situations</p>	<p>Amending RCW 18.73.250 All state's ambulance and aid services shall: make glucagon emergency kits available to their emergency medical technicians in their emergency care supplies; emergency medical technicians may administer epinephrine or glucagon.</p> <p>Unknown if supported by state MPD Committee or EMS/Trauma Steering Committee, will increase costs for: initial training, CE, supplies, equipment. MPD opinion?</p>	<p>Feb 2 – First reading, referred to Health Care & Wellness 2015 1ST SPECIAL SESSION Apr 29 By resolution, reintroduced and retained in present status. 2015 2ND SPECIAL SESSION May 29 By resolution, reintroduced and retained in present status.</p>
<p>+HB 1721 Rep Robinson etc</p>	<p>Relating to transport of patients by ambulance to facilities other than hospitals</p>	<p>Amending RCW 70.168.100 and 18.71.210; adding a new section to chapter RCW 70.168; adding a new section to chapter to RCW 18.73; and adding a new section to chapter RCW 74.09.</p> <p>Requires DOH in consultation with DSHS to convene a workgroup to establish guidelines for the development of protocols and procedures for the emergency medical transport of patients in need of mental health or chemical dependency services to an appropriate treatment facility other than a hospital emergency department.</p> <p>1st substitute Establishes a workgroup to adopt guidelines for appropriate transport of patients to chemical dependency treatment programs or mental health</p>	<p>Jan 27 – First reading, referred to Health Care & Wellness Feb 13 – Public hearing in House Cmte on Health Care & Wellness at 10:00am Feb 18 - Executive action taken in House Cmte on Health Care & Wellness at 1:00pm Feb 20 – House Cmte on Health Care & Wellness ; Majority, 1st substitute do pass; Referred to Rules 2 Review.</p>

Bill # Sponsor	Bill Title	Brief Description	Status
		<p>facilities by ambulance.</p> <p>Directs Health Care Authority to develop a reimbursement methodology for ambulance services that transport patients to a mental health facility or chemical dependency treatment program in accordance with regional alternative facility procedures.</p> <p>Aligns with Community Mobile Medicine concept, National and State EMS Strategic initiatives. Will require protocol development and provider training/continuing education.</p>	<p>Feb 27 – Placed on second reading by Rules Committee</p> <p>Mar 2 – 1st substitute bill substituted. Rules suspended. Placed on Third Reading; passed yeas 95 nays 2 absent 0 excused 1</p> <p>In Senate:</p> <p>Mar 4 – First reading, referred to Health Care</p> <p>Mar 12 – Public hearing in Senate Cmte on Health Care at 10:00am</p> <p>Mar 26 – Executive action taken in Senate Cmte on Health Care at 10:00am</p> <p>Mar 27 – HLTH-Majority; do pass, Passed to Rules Committee for second reading.</p> <p>Apr 8 – Placed on second reading by Rules Committee.</p> <p>Apr 13 Rules suspended. Placed on Third Reading.</p> <p>Third reading, passed; yeas, 47; nays, 0; absent, 0; excused, 2. (View Roll Calls)</p> <p>IN THE HOUSE</p> <p>Apr 16 Speaker signed.</p> <p>IN THE SENATE</p> <p>Apr 17 President signed.</p> <p>OTHER THAN LEGISLATIVE ACTION</p> <p>Apr 22 Delivered to Governor.</p> <p>May 1 Governor signed.</p> <p>Chapter 157, 2015 Laws. (View</p>

Bill # Sponsor	Bill Title	Brief Description	Status
			Session Law) Effective date 7/24/2015.
+HB 1671 Rep Walkinshaw, etc	Relating to increasing access to opioid antagonists to prevent opioid-related overdose deaths	<p>Amending RCS 69.41.040 and 69.50.315; adding a new section to chapter RCW 69.41; creating a new section; and repealing RCW 18.130.345.</p> <p>The legislature intends to increase access to opioid antagonists by permitting health care practitioners to administer, prescribe, and dispense, directly or by collaborative drug therapy agreement or standing order to any person who may be present at an overdose and to permit those individuals to possess and administer it...</p> <p>Will allow non-medical personnel to obtain and use narcotic antagonists (like Narcan). Unknown if state Medical, MPDs or Public Health supports but I know it has been discussed. MPD opinion?</p> <p>1st substitute Requires a prescription for opioid overdose medication to be labeled with a warning that the person receiving medication must be evaluated by a health care professional. Permits any person or entity to possess, store, deliver, distribute, and administer opioids.</p> <p>Amendment-striker Establishes a task force with membership from the legislature, DSHS, UW, OSPI and the public. Task force must study issues relating to addiction, including causes of addiction, education efforts, and ways to increase opioid antagonists to prevent opioid related overdose deaths throughout the state. Removes requirement that instructions on opioid overdose medication be affixed to the medication's container and instead provides for these instructions to be provided in writing.</p> <p>Senate amendment striker DSHS shall convene the first meeting of the task force. The chair or co</p>	<p>Jan 26 – First reading, referred to Health Care & Wellness Feb 10 – Scheduled for public hearing in House Cmte on Health Care & Wellness at 8:00am Feb 13 – Executive action taken in House Cmte on Health Care & Wellness, Majority; 1st substitute, do pass Feb 17 – Referred to Rules 2 Review Feb 27 – Placed on second reading by Rules Committee Mar 2 – 1st substitute bill , floor amendment adopted Rules suspended. Placed on Third Reading, passed yeas, 96, nays, 1 excused, 1</p> <p>In Senate: Mar 4 – First reading, referred to Health Care Mar 17 – Public hearing in Senate Cmte on Health Care at 10:00am Mar 31- Executive action taken in Senate Cmte on Health Care at 10:00am Apr 1- HLTH-Majority; do pass with amendment; Passed to Rules Committee for second reading Apr 7 – Placed on second reading by Rules Committee Apr 8 – Committee amendment adopted. Rules suspended. Placed on</p>

Bill # Sponsor	Bill Title	Brief Description	Status
		<p>chair shall be from the legislative membership. The expenses of the task force will be paid jointly by the senate and house of representatives. Task force ends on August 1, 2017</p>	<p>Third Reading, Third Reading passed yeas, 47; nays, 0; absent, 0; excused, 2. (View Roll Calls) IN THE HOUSE Apr 16 House refuses to concur in Senate amendments. Asks Senate to recede from amendments. IN THE SENATE Apr 21 Senate receded from amendments. Rules suspended. Returned to second reading for amendment. Floor amendment(s) adopted. Rules suspended. Placed on Third Reading. Third reading, passed; yeas, 48; nays, 0; absent, 0; excused, 1. (View Roll Calls) IN THE HOUSE Apr 23 House concurred in Senate amendments. Passed final passage; yeas, 97; nays, 1; absent, 0; excused, 0. (View Roll Calls) Apr 24 Speaker signed. IN THE SENATE President signed. OTHER THAN LEGISLATIVE ACTION May 1 Governor signed. Chapter 157, 2015 Laws. Effective date 7/24/2015. Delivered to Governor.</p>

Bill # Sponsor	Bill Title	Brief Description	Status
			<p>May 8 Governor signed. Chapter 205, 2015 Laws. (View Session Law) Effective date 7/24/2015.</p>
<p>+SSB 5591 Sen Liias etc</p>	<p>Relating to allowing emergency medical services to develop community assistance referral and education services programs</p>	<p>Amending RCW 35.21.930, 18.71.200, and 18.71.205. Any EMS provider may develop a CARES program, and seek grants and private gifts to support the program. EMTs may provide services under a CARES program. The permissible scope of practice for EMTs is amended to include actions taken as part of a CARES program. Allows for the development of local CARES programs and places under local MPD guidance.</p> <p>1st Substitute Federally recognized Indian tribes may develop CARES programs. EMT's, advanced EMT's, paramedics, and medical directors are immune from liability for good faith acts or omissions as part of participation in a CARES program.</p>	<p>Jan 26 – First reading, referred to Government Operations & State Security Feb 3 – Public hearing in Senate Cmte on Government Operations & Security at 10:00 am Feb 10 – Executive action taken in the Senate Cmte on Government Operations & Security; Majority; 1st substitute, do pass Feb 11 – Passed to Rule committee for second reading Feb 23- Made eligible to be placed on second reading Feb 26 – Placed on second reading by Rules Committee Mar 3 – 1st substitute bill, Rules suspended. Placed on Third Reading, passed yeas, 37; nays, 11; excused, 1 Notice given to reconsider vote on final passage Mar 11 – No action on notice to reconsider vote on third reading.</p> <p>In House: Mar 13 – First reading, referred to Health Care & Wellness Mar 25 – Public hearing in House Cmte on Health Care & Wellness at</p>

Bill # Sponsor	Bill Title	Brief Description	Status
			<p>1:30pm Mar 26– Executive action taken session in House Cmte on Health Care & Wellness at 10:00am; HCW, Majority, do pass; Minority, do not pass Mar 31 – Referred to Rules 2 Review Apr 8 – Placed on second reading by Rules Committee Apr 9 – Rules suspended. Placed on Third Reading. Third reading, passed yeas, 65; nays, 31; absent, 0; excused, 2. (View Roll Calls) IN THE SENATE Apr 13 President signed. IN THE HOUSE Apr 16 Speaker signed. OTHER THAN LEGISLATIVE ACTION Apr 20 Delivered to Governor. Apr 24 Governor signed. Chapter 93, 2015 Laws. Effective date 7/24/2015.</p>
+HB 1625 Rep Schmick and Wylie	Relating to the provision of drugs to ambulance and aid services	Adding a new section to RCW 18.64 A pharmacy licensed and operated by a hospital that is licensed under RCW 70.41.090 may provide minimal quantities of drugs to ambulance or aid services that are licensed under RCW 18.73.130 for use associated with providing emergency medical services to patients if specific conditions are met. Allows local hospitals to provide pharmaceuticals to local ambulance services. 1st substitute	<p>Jan 23 – First reading, referred to Health Care & Wellness Feb 10 –Public hearing in the House Cmte on Health care & Wellness at 8:00am Feb 17 – Executive action taken session in House Cmte on Health Care & Wellness at 8:00am;Majority, 1st substitute, do pass Feb 19 – Referred to Rules 2 Review</p>

Bill # Sponsor	Bill Title	Brief Description	Status
		<p>Adds a new chapter to 70.168 and providing an expiration date. The Pharmacy Quality Assurance Commission must collaborate with the EMS and Trauma Steering Committee to develop guidelines for hospitals, ambulance and aid services, and medical program directors for the provision of medications in accordance with state and federal laws.</p> <p>Amendment-striker Removes requirement that Pharmacy Quality Assurance Commission adopt guidelines for the provision of drugs to ambulance or aid services. Ambulance or aid services may only request drugs that: are relevant to the level of service provided by the ambulance or aid service and the training of the emergency medical personnel and are approved as part of the ambulance or aid service pre-hospital patient care protocols in the county.</p>	<p>Feb 27 – Paced on second reading by Rules Committee Mar 2 – 1st substitute bill substituted, Rules suspended Placed on Third Reading, passed; yeas 97;excused 1</p> <p>In Senate: Mar 4 – First reading, referred to Health Care. Mar 16- Public hearing in Senate Cmte on Health Care at 10:00am Mar 30 – Executive action taken in Senate Cmte on Health Care at 10:00am HLTH; Majority; do pass with amendment Mar 31 – Passed to Rules Committee for second reading Apr 7 – Placed on second reading by Rules Committee. Apr 8 – Committee amendment adopted ; Rules suspended. Placed on Third Reading, passed. yeas, 47; nays, 0; absent, 0; excused, 2. (View Roll Calls) IN THE HOUSE Apr 16 House concurred in Senate amendments. Passed final passage; yeas, 96; nays, 0; absent, 0; excused, 2. (View Roll Calls) Apr 22 Speaker signed. IN THE SENATE Apr 23 President signed. OTHER THAN LEGISLATIVE</p>

Bill # Sponsor	Bill Title	Brief Description	Status
			ACTION Delivered to Governor May 14 Governor signed. Chapter 255, 2015 Laws. Effective date 7/24/2015
+HB 1498 Rep Goodman, etc	Relating to adrenal insufficiency	Amending RCW 18.73.250 and adding a new section to chapter RCW 28A.210. All of the state’s ambulance and aid services shall make hydrocortisone sodium succinate or similar medication for the treatment of acute adrenal insufficiency available to their emergency medical technicians in their emergency care supplies. Unknown if supported by state MPD Committee or EMS/Trauma Steering Committee, will increase costs for: initial training, CE, supplies, equipment. MPD opinion?	Jan 21 – First reading, referred to Health Care & Wellness 2015 1ST SPECIAL SESSION Apr 29 By resolution, reintroduced and retained in present status. 2015 2ND SPECIAL SESSION May 29 By resolution, reintroduced and retained in present status.
+SB 5346 Sen Ranker, etc	Relating to providing first responders with contact information for subscribers of life alert services during an emergency	Requires employees of companies providing life alert services, when requested by first responders during an emergency, to provide to first responders the name, address, and other information necessary for first responders to contact their subscribers. Allows for emergency information sharing by companies providing medical alert/monitoring to EMS response agencies. I worked with Sen Ranker’s offices on this. 1st substitute Changes life alert services to personal emergency response services. First responders must destroy confidential information received during an emergency. Engrossed Substitute Information provided by first responders may only be used in responding to the emergency that prompted the request for the	Jan 20 – First reading, referred to Health Care Feb 16 – Public hearing in Senate Cmte on Health Care at 10:00 am Feb 19 –Executive action taken in Senate Cmte on Health care at 10:00am Feb 20- Majority; 1 st substitute bill, do pass Passed to Rules Committee for second reading Feb 26 – Placed on second reading by Rules Committee Mar 10 – 1 st substitute bill; floor amendment adopted Rules suspended. Placed on Third Reading; Third reading passed; yeas 49 for

Bill # Sponsor	Bill Title	Brief Description	Status
		information. The class 1 civil infraction for failure to destroy the information is removed.	<p>Engrossed Substitute</p> <p>In House Mar 12 – First reading, referred to Public Safety Mar 25 – Public hearing in House Cmte on Public Safety at 1:30pm Mar 26 – Executive action taken in House Cmte on Public Safety at 10:00am; PS-Majority; do pass Mar 31- Referred to Rules 2 Review Apr 8 – Placed on second reading by Rules Committee. Rules suspended, Placed on third reading, passed</p> <p>In Senate Apr 9 – President signed. IN THE HOUSE Apr 10 Speaker signed. OTHER THAN LEGISLATIVE ACTION Apr 14 Delivered to Governor. (View Bill as Passed Legislature) Apr 17 Governor signed. Chapter 30, 2015 Laws. (View Session Law) Effective date 7/24/2015.</p>
+ HB 1159 Rep Pike, etc	Relating to safety of new drivers	Establishes the teen driving safety act. Requires a person who is under nineteen years of age and operating a motor vehicle to affix a "new driver" decal to the inside of the motor vehicles rear window. Allows a person holding a driver's instruction permit to drive a motor vehicle upon the public highways if the "new driver" decal is displayed on the motor vehicle	<p>Jan 14 – First reading, referred to Transportation Jan 29 – Public hearing in House Cmte on Transportation Feb 16 – Executive action taken in House Cmte on Transportation;</p>

Bill # Sponsor	Bill Title	Brief Description	Status
		<p>being operated. Prohibits an intermediate licensee from operating a motor vehicle unless a "new driver" decal is displayed on the motor vehicle. Expires December 31, 2021</p> <p>Intent is to warn other drivers of less experienced driver.</p> <p>1st substitute Establishes a pilot program in Clark County that requires a New Driver decal be displayed on any vehicle operated by a person under 18 years of age. Requires a person to perform community service if fails to properly display a New Driver decal</p>	<p>Majority, 1st substitute, do pass Feb 19 – Referred to Rules 2 Review Mar 4 – Placed on second reading by Rules Committee Mar 6 – 1st substitute. Rules suspended. Placed on Third Reading. Third reading, passed; yeas 53; nays, 44; excused 1</p> <p>In Senate Mar 10 – First reading, referred to Transportation Mar 16- Public hearing in Senate Cmte on Transportation at 3:30pm Apr 24 By resolution, returned to House Rules Committee for third reading. 2015 1ST SPECIAL SESSION IN THE HOUSE Apr 29 By resolution, reintroduced and retained in present status. 2015 2ND SPECIAL SESSION May 29 By resolution, reintroduced and retained in present status.</p>
+HB 1276 Rep Klippert, etc	Relating to impaired driving	HB 1276 enhances the present RCW for driving under the influence of alcohol, and other drugs by inserting marijuana use when addressing ignition interlock devices for sobriety monitoring, commercial drivers under the influence, implied consent procedures, describes the open container law for marijuana and storage of marijuana when driving, and penalties for alcohol, marijuana use and other drugs while driving under	<p>Jan 16 – First reading, referred to Public Safety Jan 23 – Public hearing in House Cmte on Public Safety Jan 30 – Executive action taken in House Cmte on Public Safety;</p>

Bill # Sponsor	Bill Title	Brief Description	Status
		<p>the influence.</p> <p>Substitute bill amends and clarifies many statutory provisions relating to DUI and Ignition interlock devices.</p> <p>1st substitute Substitute bill amends and clarifies many statutory provisions relating to DUI and Ignition interlock devices.</p> <p>2nd Substitute Removes addition of prior offenses from DUI sentencing standards, etc.</p> <p>Engrossed Second Substitute Traffic infraction for a person to have an open container of marijuana in the main compartment of a vehicle while on public highways. Requires the court to order a repeat DUI offender, as a condition of release to 1}have an ignition interlock installed; 2}file a sworn statement with the court, at arraignment, agreeing not to drive a vehicle without an ignition interlock; and 3} participate in alcohol monitoring.</p> <p>Amendment-striker Fourth DUI or PC offense is a class c felony. Additional \$50 fee is assessed for DUI conviction. Money goes to highway safety account to be used solely for funding WTSC grants to organizations combating driving under the influence. Blood can be drawn without a person's consent when professionals are directed by a law enforcement officer to do so under the provisions of a search warrant or exigent circumstances.</p>	<p>Majority 1st substitute bill, do pass Feb 4 – Referred to General Government & Information Technology Feb 23 – Public hearing and executive action taken in House Cmte on General Government & Information Technology at 9:00am Majority; 2nd substitute , do pass Feb 27 – Referred to Rules 2 Review Mar 4 – Placed on second reading by Rules Committee Mar 6 - 2nd substitute, floor amendment adopted, Rules suspended. Placed on Third Reading. Third reading, passed ; yeas, 94; nays 4 for Engrossed second substitute</p> <p>In Senate Mar 10 – First reading, referred to Law & Justice Mar 17 – Public hearing in Senate Cmte on Law & Justice at 8:00am Mar 31- Executive action taken in Senate Cmte on Law & Justice at 8:00am LAW; majority; do pass with amendment And refer to Ways & Means Apr 1- Referred to Ways & Means Apr 6 – Public hearing in Senate Cmte on Ways & Means at 10:00am Apr 7 – Executive action taken in Senate Cmte on Ways & Means at 10:00am; Majority, do pass with</p>

Bill # Sponsor	Bill Title	Brief Description	Status
			<p>amendment, minority; do not pass; Minority without recommendation Passed to Rules Committee for second reading Apr 13 Placed on second reading by Rules Committee. Apr 15 Committee amendment not adopted. Floor amendment(s) adopted. Rules suspended. Placed on Third Reading. Third reading, passed; yeas, 39; nays, 9; absent, 0; excused, 1. (View Roll Calls) IN THE HOUSE Apr 24 On Concurrence Calendar. Referred to House Rules 3. 2015 1ST SPECIAL SESSION Apr 29 Rules Committee relieved of further consideration. Placed on third reading May 28 By resolution, returned to House Rules Committee for third reading.</p>
<p>+HB 1433 Rep, Scott, etc</p>	<p>Relating to conforming Washington State's school zones law to federal gun-free school zones law</p>	<p>Amending RCW 9.41.280 and 9.41.280; creating a new section; providing an effective date; and providing an expiration date. Brings our state's school zones law into closer conformity with the federal gun-free school zones act. Restricts guns on school grounds in alignment with federal requirements.</p>	<p>Jan 20 – First reading, referred to Judiciary 2015 1ST SPECIAL SESSION Apr 29 By resolution, reintroduced and retained in present status. 2015 2ND SPECIAL SESSION May 29 By resolution, reintroduced and retained in present</p>

Bill # Sponsor	Bill Title	Brief Description	Status
			status.
-SB 5198 Sen, Benton, etc	Relating to the use of motorcycle helmets	Amending RCW 46.37.530 The bill mandates use of motorcycle helmets only for people age 18 and under. Riders over age 18 would not have to wear a helmet. Removes helmet requirement for those over 18yoa.	Jan 15 – First reading, referred to Transportation Feb 9 – Public hearing in the Senate Cmte on Transportation at 3:30pm Feb 25 – Executive action scheduled, but the report on the motion to move the bill out of committee did not receive sufficient signatures. 2015 1ST SPECIAL SESSION Apr 29 By resolution, reintroduced and retained in present status. 2015 2ND SPECIAL SESSION May 29 By resolution, reintroduced and retained in present status.

Bill # Sponsor	Bill Title	Brief Description	Status
<p>+SB 5656 Sen, Rivers, etc.</p>	<p>Relating to enhancing public safety by reducing distracted driving incidents caused by use of personal wireless communications devices</p>	<p>Amending RCW 46.61.668, 46.20.055, 46.20.075, 46.25.010, and 46.20.130; creating a new section; repealing RCW 46.61.667; prescribing penalties; and providing an effective date.</p> <p>The bill updates the Washington State “Cell Phone Law” to further enhance public safety, and address the many new varieties of “personal wireless communication devices” (PWCDs). If enacted, Washington State will be eligible for additional federal traffic safety funding</p> <p>Increases restrictions for use of electronic devices while driving, exempts emergency personnel if used during course of emergency response or persons reporting an emergency.</p> <p>1st substitute Any person operating a motor vehicle while holding, reading from, or manually entering information into a personal wireless communications device is guilty of a traffic infraction. Questions on distracted driving must be included in the driver’s license examination</p> <p>Engrossed Substitute Prohibits the sharing of information about a first violation of the distracted driving law with insurance companies and employers, except in the case of a commercial driver’s license holder.</p>	<p>Jan 28 – First reading, referred to Transportation Feb 9 – Public hearing in the Senate Cmte on Transportation at 3:30pm Feb 25 – Executive action taken in Senate Cmte on Transportation at 1:30pm Feb 27 – Majority; 1st substitute bill’ do pass Passed to Rules Committee for second reading Mar 4 – Placed on second reading by Rules Committee Mar 10 – 1st substitute; floor amendment adopted; Rules suspended. Placed on Third reading, passed ; yeas, 35; nays, 14</p> <p>In House Mar 12 – First reading, referred to Transportation Mar 25 – Public hearing in House Cmte on Transportation at 3:30pm Apr 24 By resolution, returned to Senate Rules Committee for third reading. 2015 1ST SPECIAL SESSION IN THE SENATE Apr 29 By resolution, reintroduced and retained in present status 2015 2ND SPECIAL SESSION May 29 By resolution, reintroduced and retained in present</p>

Bill # Sponsor	Bill Title	Brief Description	Status
			status.
+ HB 2044 Rep Schmick, etc	Relating to emergency medical services	Amending RCW 35.21.930, 18.71.200, 18.71.205, and 18.71.210; and adding a new section to RCW chapter 18.73. Authorizes emergency medical services providers to establish community assistance referral and education services programs, allows advanced emergency medical technicians and paramedics to provide care in nonemergency situations if they are participating in a program and care does not exceed their training and certification. Also permits transport of patients to nonhospital facilities such as urgent care, mental health and chemical dependency facilities. Authorizes CARES program. <u>1st Substitute</u> Authorizes emergency medical systems and federally recognized Indian tribes to establish community assistance referral and education services	Feb 9 – First reading, referred to Health Care & Wellness Feb 18- Public hearing in House Cmte on Health Care & Wellness at 1:00pm Feb 20- Executive action taken in House Cmte on Health Care & Wellness at 10:00am ; Majority; 1 st substitute, do pass; Referred to Rules 2 Review 2015 1ST SPECIAL SESSION Apr 29 By resolution, reintroduced and retained in present status.

Bill # Sponsor	Bill Title	Brief Description	Status
		<p>programs. Allows emergency medical technicians, advanced emergency medical technicians, and paramedics to provide care in nonemergency situations if they are participating in a program and the care provided does not exceed their training and certification.</p>	<p>2015 2ND SPECIAL SESSION May 29 By resolution, reintroduced and retained in present status.</p>
<p>-HB 1425 Rep, Pollet</p>	<p>Relating to ensuring that entities performing government functions and advisory committees are subject to the open public meetings act and public records act</p>	<p>Subjects to the open public meetings act and the public records act, certain advisory boards, committees, and other entities performing government functions.; adding a new section to chapter 35.64 RCW; adding a new section to chapter 42.30 RCW; adding a new section to chapter 42.56 RCW; and creating a new section. Open public meeting act modification.</p>	<p>Jan 20 First reading, referred to State Government (Not Officially read and referred until adoption of Introduction report). Feb 5 Public hearing in the House Committee on State Government at 1:30 PM. (Committee Materials) Probably dead as no action by Feb 20 2015 1ST SPECIAL SESSION Apr 29 By resolution, reintroduced and retained in present status 2015 2ND SPECIAL SESSION May 29 By resolution, reintroduced and retained in present status.</p>
<p>+HB 1389 Rep Goodman / SB 5181 Sen</p>	<p>Relating to the scope of state fire service mobilization and ensuring compliance with existing state and federal disaster response policies;</p>	<p>Clarifies that state fire service mobilization be allowed in all incidents to which fire departments, fire districts, and regional fire protection authorities typically respond, as long as the mobilization meets the requirements identified in the state fire service mobilization plan. Amending RCW 43.43.960 and 43.43.961; and creating a new section. Expands Fire Mobilization</p>	<p>1389: Jan 19 First reading, referred to Public Safety (Not Officially read and referred until adoption of Introduction report). Jan 21 Public hearing and executive action taken in the House Committee on Public Safety at 1:30 PM. PS - Executive action taken by</p>

Bill # Sponsor	Bill Title	Brief Description	Status
			<p>committee. PS - Majority; do pass. (Majority Report) Jan 23 Referred to Appropriations. Feb 4 Public hearing in the House Committee on Appropriations at 3:30 PM. Feb 19 Scheduled for executive session in the House Committee on Appropriations at 3:30 PM. (Subject to change) APP-Majority do pass Feb 20 referred to Rules 2 Review. Mar 4 Placed on second reading by Rules Committee Mar 10 Rules suspended. Placed on Third Reading. Third reading, passed; yeas, 98; nays, 0; absent, 0; excused, 0 IN THE SENATE Mar 12 First reading, referred to Government Operations & Security. Mar 23 Public hearing in the Senate Committee on Government Operations & Security at 10:00 AM. (Committee Materials) Mar 24 Executive action taken in the Senate Committee on Government Operations & Security at 10:00 AM. (Committee Materials) Mar 25 GOS - Majority; do pass with amendment(s). (Majority Report) And refer to Ways & Means.</p>

Bill # Sponsor	Bill Title	Brief Description	Status
			<p>Referred to Ways & Means. Apr 7 Executive action taken in the Senate Committee on Ways & Means at 10:00 AM. (Committee Materials) WM - Majority; do pass with amendment(s). (Majority Report) Passed to Rules Committee for second reading. Apr 14 Placed on second reading by Rules Committee. Apr 15 Committee amendment adopted with no other amendments. Rules suspended. Placed on Third Reading. Third reading, passed; yeas, 49; nays, 0; absent, 0; excused, 0. (View Roll Calls) IN THE HOUSE Apr 23 House concurred in Senate amendments. Passed final passage; yeas, 97; nays, 1; absent, 0; excused, 0. (View Roll Calls) Apr 24 Speaker signed. IN THE SENATE President signed. OTHER THAN LEGISLATIVE ACTION Delivered to Governor. May 7 Governor signed. Chapter 181, 2015 Laws. (View Session Law) Effective date 7/24/2015.</p>

Bill # Sponsor	Bill Title	Brief Description	Status
			<p>5181: Jan 15 First reading, referred to Government Operations & State Security. Jan 22 Public hearing in the Senate Committee on Government Operations & Security at 10:00 AM. Jan 27 Executive action taken in the Senate Committee on Government Operations & Security at 10:00 AM. GOSS - Majority; do pass. (Majority Report) And refer to Ways & Means. Jan 28 Referred to Ways & Means. Feb 17 Public hearing in the Senate Committee on Ways & Means at 3:30 PM.</p>
+HB 1251 Rep VanDeWege	Relating to providing for increased funding for emergency medical services by adjusting the emergency medical services' levy cap;	Adjusts the emergency medical services' levy cap to increase funding for emergency medical services. Amending RCW 84.52.069.3	Jan 16 First reading, referred to Finance (Not Officially read and referred until adoption of Introduction report). Jan 23 Public hearing in the House Committee on Finance at 8:00 AM. Probably dead as no action by Feb 20 2015 1ST SPECIAL SESSION Apr 29 By resolution, reintroduced and retained in present status
+HB 2007 Rep Zeiger/ SB 5840 Sen	Relating to reimbursement to eligible providers	Requires an eligible provider to receive supplemental medicaid reimbursement in addition to the rate of payment that the provider would otherwise receive for medicaid ground	Feb 6 First reading, referred to Appropriations (Not Officially read and referred until adoption of

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Demmeier	for medicaid ground emergency medical transportation services;	emergency medical transportation services. Requires the state health care authority to design and implement, in consultation with eligible providers, an intergovernmental transfer program relating to medicaid managed care, ground emergency medical transport services including those services provided by emergency medical technicians at the basic, advanced, and paramedic levels in the prestabilization and preparation for transport in order to increase capitation payments for the purpose of increasing reimbursement to eligible providers.	Introduction report) Feb 24 Scheduled for public hearing in the House Committee on Appropriations at 1:30 PM. (Subject to change) Feb 27 Executive action taken in the House Committee on Appropriations at 9:00 AM. (Committee Materials) APP - Majority; do pass. (Majority Report) Minority; do not pass. (Minority Report) Referred to Rules 2 Review. Mar 3 Placed on second reading by Rules Committee. Mar 4 Rules suspended. Placed on Third Reading. Third reading, passed; yeas, 88; nays, 10; absent, 0; excused, 0. (View Roll Calls) IN THE SENATE Mar 6 First reading, referred to Ways & Means. Mar 24 Executive action taken in the Senate Committee on Ways & Means at 3:30 PM. (Committee Materials) Mar 25 WM - Majority; do pass. (Majority Report) Minority; without recommendation. (Minority Report) Mar 26 Passed to Rules Committee for second reading. Apr 8 Placed on second reading by Rules Committee.

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			<p>Apr 14 Rules suspended. Placed on Third Reading. Third reading, passed; yeas, 39; nays, 7; absent, 1; excused, 2. (View Roll Calls)</p> <p>IN THE HOUSE Apr 16 Speaker signed.</p> <p>IN THE SENATE Apr 17 President signed.</p> <p>OTHER THAN LEGISLATIVE ACTION</p> <p>Apr 22 Delivered to Governor.</p> <p>2015 1ST SPECIAL SESSION</p> <p>Apr 29 Governor signed.</p> <p>Chapter 147, 2015 Laws.</p> <p>Effective date 7/24/2015.</p>