

Rulemaking Efforts



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In Progress

Establishing the use of nitrous oxide in office based surgical settings, WAC 246-919-601

The WMC is considering amending [WAC 246-919-601](#) to exempt the use of nitrous oxide in office-based surgical settings under certain circumstances. Additionally, the WMC is considering adding a new subsection to further address the use of nitrous oxide in such settings. The CR-101, Preproposal Statement of Inquiry, for this rulemaking was filed on May 17, 2024, as [WSR #24-11-104](#).

Between July 2024 and January 2025, the WMC held three workshops, collaborating with the public, associations, and other interested parties to develop the draft language. At the final workshop held on January 27, 2025, the panel approved the draft language for presentation to the WMC at its March 14, 2025, Business Meeting. During that meeting, the Commissioners authorized moving forward with the next step in the rulemaking process, the CR-102, or Proposed Rules. The CR-102 was filed June 30, 2025, under [WSR #25-14-080](#). On August 22, 2025, a hearing was held, and based on the testimony presented, the Commissioners voted to return to the CR-101 phase of rulemaking. Workshops will be scheduled soon. Please visit our [Rules in Progress](#) page for more information.

Opioid Prescribing for Physician Assistants (PA) and Allopathic Physicians (MD)

A CR-101, Preproposal Statement of Inquiry, was filed on April 30, 2025, as [WSR #25-10-039](#). The WMC is considering amending the following opioid prescribing rules to modernize the language, add clarity, and bring the rules more in line with current practice: MD, WAC 246-919-850 through 246-919-985; and PA, WAC 246-918-800 through 246-918-935. Workshops are ongoing. Please visit our [Rules in Progress](#) page for the current schedule.

Chapter 246-919 WAC, Allopathic Physicians (MD)

A CR-101, Preproposal Statement of Inquiry, was filed on rulemaking on May 22, 2025, under [WSR #25-12-014](#). The WMC is considering amending [WAC 246-919-010](#) through [WAC 246-919-520](#) and [WAC 246-919-602](#) through [WAC 246-919-700](#) to modernize language, add clarity, and bring the rules more in line with current practice. Workshops will be scheduled soon. Please visit our [Rules in Progress](#) page for the current schedule.

Collaborative Drug Therapy Agreements

The [CR-101](#) for creating rules related to Collaborative Drug Therapy Agreements was filed with the Office of the Code Reviser on July 22, 2020 as [WSR #20-16-008](#).

One aspect of the practice of medicine is working with pharmacists to deliver drug therapy to patients. This coordination can take many forms, but the WMC's concern involves treating patients under a collaborative drug therapy agreement (CDTA). These arrangements occur pursuant to a written agreement entered into by an individual physician or physician assistant and an individual pharmacist.

The Pharmacy Quality Assurance Commission has adopted a rule that governs CDTAs from the pharmacy perspective, however there are no statutes or rules that govern a physician's responsibilities under a CDTA. A rule is needed to define the roles and responsibilities of the physician or physician assistant who enters into a CDTA, any defined limit to the number of pharmacists who may have a CDTA with any one physician or physician assistant, and how the physician or physician assistant and pharmacist can best collaborate under these agreements.

Regulating the use of CDTAs would place the WMC in an active patient safety role. Rulemaking would provide clarity around this issue to help avoid potential discipline and increase patient safety. The new sections being considered will potentially benefit the public's health by ensuring participating providers are informed and regulated by current national industry and best practice standards.

Workshops for this rulemaking are on hold pending the outcome of the Department of Health's ongoing Sunrise Review of the [Pharmacist Scope of Practice](#). Please visit our [Rules in Progress](#) page for the current schedule and draft language.

Recently Completed

New Profession: Anesthesiologist Assistants, SB 5184

The CR-103, Permanent Rules, was filed June 26, 2025, under [WSR #25-14-053](#). The WMC has developed a new chapter of rules under Title 246 WAC which establishes licensing regulations for anesthesiologist assistants, in accordance with SB 5184. The effective date for these rules was July 27, 2025.

The Secretary of the Department of Health has the authority to establish fees for healthcare professions. As such, the rulemaking process for establishing fees for this new profession is being handled by that office. A CR-102, Proposed Rules, was filed July 22, 2025, under [WSR #25-15-148](#). The hearing for the fees was held on August 26, 2025. The CR-103, Permanent Rules, is in progress.

General Provisions for Opioid Prescribing for Physician Assistants (PA) and Allopathic Physicians (MD)

The WMC has adopted amendments to their opioid prescribing rules to exclude patients with sickle cell disease, to clarify tapering considerations, and to clarify the use of biological specimen testing. The rules amend [WAC 246-918-801](#) Exclusions, [WAC 246-918-870](#) Periodic Review—Chronic pain, and [WAC 246-918-900](#) Tapering considerations—Chronic pain for physician assistants, as well as [WAC 246-919-851](#) Exclusions, [WAC 246-919-920](#) Periodic Review—Chronic pain, and [WAC 246-919-950](#) Tapering considerations—Chronic pain for allopathic physicians.

The rules add sickle cell disease to the list of exemptions from opioid prescribing limits. To prevent harm from abrupt opioid discontinuation, the rules clarify that not all chronic pain patients need tapering. The rules also state that a single abnormal biological test result should not be the sole basis for discontinuing opioid treatment. The CR-103 for Permanent Rulemaking was filed on February 18, 2025, as [WSR #25-05-091](#). The WSR document contains the adopted rule language, which took effect on March 21, 2025.

Cancelled Rulemaking

Regarding [SSB 5389](#) – define “qualified physician”

At their October 20, 2023, Business meeting, the Commissioners approved initiating rulemaking related to SSB 5389. However, a CR-101, Preproposal Statement of Inquiry, was never filed. On May 14, 2025, an interpretive statement titled “‘Qualified Physician’ Under Optometry Law” was filed under [WSR #25-11-037](#) which relates to this rulemaking request. The WMC routinely incorporates their interpretive statements into WAC. Since multiple sections of chapter 246-919 WAC (physicians/MDs) are already open for rulemaking, the WMC plans to incorporate the interpretive statement into those rules. As such, at their August 22, 2025, Business Meeting, the Commissioners voted to rescind their earlier approval of this rulemaking.

More Information

Please visit [our rulemaking site](#) and for continued updates on rule development, interested parties are encouraged to join the [WMC's rules GovDelivery](#). WMC rulemaking comments or questions may be emailed to medical.rules@wmc.wa.gov.

All Upcoming hearings, stakeholder meetings and other events can be found on the [WMC Event Page](#)