# Chapter 246-812 WAC
# BOARD OF DENTURISTS

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**WAC**


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**DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER**

246-812-020 Continuing competency requirements. [Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-020, filed 11/24/14, effective 12/25/14. Statutory Authority: RCW 18.30.065. WSR 05-23-101, § 246-812-020, filed 11/17/05, effective 1/1/06.] Repealed by WSR 20-04-028, filed 1/28/20, effective 2/28/20. Statutory Authority: RCW 18.30.065.

246-812-101 Purpose. [Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-101, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-101, filed

10/30/95, effective 11/30/95.] Repealed by WSR 20-04-028, filed 1/28/20, effective 2/28/20. Statutory Authority: RCW 18.30.065.

246-812-130 Denturist licensure—Training course approval. [Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-130, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-130, filed 10/30/95, effective 11/30/95.] Repealed by WSR 03-12-061, filed 6/2/03, effective 7/3/03. Statutory Authority: RCW 18.30.065.

246-812-140 Application for licensure—AIDS education requirements. [Statutory Authority: RCW 18.30.070(3). WSR 95-22-062, § 246-812-140, filed 10/30/95, effective 11/30/95.] Repealed by WSR 98-05-060, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 43.70.280.

246-812-170 License renewal form. [Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-170, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-170, filed 10/30/95, effective 11/30/95.] Repealed by WSR 14-24-033, filed 11/24/14, effective 12/25/14. Statutory Authority: Chapter 18.30 RCW and 2013 c 171.

246-812-301 Purpose. [Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-301, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-301, filed 10/30/95, effective 11/30/95.] Repealed by WSR 20-04-028, filed 1/28/20, effective 2/28/20. Statutory Authority: RCW 18.30.065.

246-812-400 Denturist associations or societies. [Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-400, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-400, filed 10/30/95, effective 11/30/95.] Repealed by WSR 14-24-033, filed 11/24/14, effective 12/25/14. Statutory Authority: Chapter 18.30 RCW and 2013 c 171.

246-812-410 Insurance carriers. [Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-410, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-410, filed 10/30/95, effective 11/30/95.] Repealed by WSR 14-24-033, filed 11/24/14, effective 12/25/14. Statutory Authority: Chapter 18.30 RCW and 2013 c 171.

246-812-420 Professional liability carriers. [Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-420, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-420, filed 10/30/95, effective 11/30/95.] Repealed by WSR 14-24-033, filed 11/24/14, effective 12/25/14. Statutory Authority: Chapter 18.30 RCW and 2013 c 171.

246-812-430 Courts. [Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-430, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-430, filed 10/30/95, effective 11/30/95.] Repealed by WSR 14-24-033, filed 11/24/14, effective 12/25/14. Statutory Authority: Chapter 18.30 RCW and 2013 c 171.

246-812-440 State and federal agencies. [Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-440, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-440, filed 10/30/95, effective 11/30/95.] Repealed by WSR 14-24-033, filed 11/24/14, effective 12/25/14. Statutory Authority: Chapter 18.30 RCW and 2013 c 171.

246-812-450 Professional standards review organizations. [Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-450, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-450, filed 10/30/95, effective 11/30/95.] Repealed by WSR 14-24-033, filed 11/24/14, effective 12/25/14. Statutory Authority: Chapter 18.30 RCW and 2013 c 171.

246-812-995 Conversion to a birthday renewal cycle. [Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-995, filed 10/2/98, effective 11/2/98. Statutory Authority: RCW 43.70.280. WSR 98-05-060, § 246-812-995, filed 2/13/98, effective 3/16/98.] Repealed by WSR 05-12-012, filed 5/20/05, effective 7/1/05. Statutory Authority: RCW 43.70.250, [43.70.]280 and 43.70.110.

## DENTURISTS

**WAC 246-812-001 Purpose.** The purpose of these rules is to further clarify and define chapter 18.30 RCW, Denturists.

[Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-001, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-001, filed 10/30/95, effective 11/30/95.]

**WAC 246-812-010 Definitions.** The definitions in this section apply throughout this chapter unless the context clearly requires otherwise:

(1) "Approval" and "accreditation" are used interchangeably with reference to sanctioning of courses.

(2) "Bruxism" means the excessive grinding of the teeth or excessive clenching of the jaw.

[Statutory Authority: RCW 18.30.065 and 2020 c 76. WSR 21-02-050, § 246-812-010, filed 1/4/21, effective 2/4/21. Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-010, filed 1/28/20, effective

2/28/20. Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-010, filed 11/24/14, effective 12/25/14. Statutory Authority: RCW 18.30.065. WSR 03-12-061, § 246-812-010, filed 6/2/03, effective 7/3/03. Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-010, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-010, filed 10/30/95, effective 11/30/95.]

**WAC 246-812-015 Adjudicative proceedings—Procedural rules.** The board adopts the model procedural rules for adjudicative proceedings as contained in chapter 246-11 WAC.

[Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-015, filed 11/24/14, effective 12/25/14. Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-015, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-015, filed 10/30/95, effective 11/30/95.]

## LICENSURE—APPLICATION AND ELIGIBILITY REQUIREMENTS

**WAC 246-812-120 Denturist licensure—Eligibility and application requirements.** An applicant for a denturist license shall submit to the board:

(1) A completed application;

(2) The application fee required under WAC 246-812-990;

(3) Verification of passing both a board-approved written examination and a practical examination which includes a practical demonstration of skills;

(4) Verification of having passed the online jurisprudence examination; and

(5) An official transcript from an educational institution approved by the board.

[Statutory Authority: RCW 18.30.065 and 2020 c 76. WSR 21-02-050, § 246-812-120, filed 1/4/21, effective 2/4/21. Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-120, filed 1/28/20, effective 2/28/20. Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-120, filed 11/24/14, effective 12/25/14. Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-120, filed 10/2/98, effective 11/2/98. Statutory Authority: RCW 43.70.280. WSR 98-05-060, § 246-812-120, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 18.30.070(3). WSR 95-22-062, § 246-812-120, filed 10/30/95, effective 11/30/95.]

**WAC 246-812-125 Denturist licensure—Endorsement.** An applicant for licensure who is currently licensed to practice denturism in another state, territory of the United States, District of Columbia, or Puerto Rico, that the board has determined has substantially equivalent licensing standards including written and clinical examinations, shall submit to the board:

(1) A completed application;

(2) The application fee required in WAC 246-812-990;

(3) An official transcript from an educational program approved by the board;

(4) Verification of successful completion of board-approved examinations that include:

(a) A written examination that contains the topics listed in RCW 18.30.100(4);

(b) A practical examination that includes a practical demonstration of skills; and

(c) The online jurisprudence examination.

(5) Current licensure in a jurisdiction approved by the board under RCW 18.30.090(1).

[Statutory Authority: RCW 18.30.065 and 2020 c 76. WSR 21-02-050, § 246-812-125, filed 1/4/21, effective 2/4/21. Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-125, filed 1/28/20, effective 2/28/20. Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-125, filed 11/24/14, effective 12/25/14. Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-125, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-125, filed 10/30/95, effective 11/30/95.]

**WAC 246-812-131 Temporary practice permit—Military spouse.** A military spouse or state registered domestic partner of a military person may receive a temporary practice permit while completing any specific additional requirements that are not related to training or practice standards for the profession. The board adopts the procedural rules as adopted by the department of health in WAC 246-12-051.

[Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-131, filed 11/24/14, effective 12/25/14.]

**WAC 246-812-135 Temporary practice permit—Background check.** The board conducts background checks on all applicants to ensure safe patient care. Since completion of a national criminal background check may require additional time, the board may issue a temporary practice permit when the applicant has met all other licensure requirements. The applicant must not be subject to denial of a license or issuance of a conditional license under this chapter.

(1) A temporary practice permit may be issued to an applicant who:

(a) Holds an unrestricted, active denturist license in another state, territory of the United States, District of Columbia, or Puerto Rico that has substantially equivalent licensing standards to those in Washington state;

(b) Is not subject to denial of a license or issuance of a conditional or restricted license; and

(c) Does not have a criminal record in Washington.

(2) A temporary practice permit grants the individual the full denturist scope of practice.

(3) A temporary practice permit will not be renewed, reissued, or extended, unless related to a notice of decision as described in (b) of this subsection. A temporary practice permit expires when any one of the following occurs:

(a) The license is granted;

(b) A notice of decision on application is mailed to the applicant, unless the notice of decision specifically extends the duration of the temporary practice permit; or

(c) One hundred eighty days after the temporary practice permit is issued.

(4) To receive a temporary practice permit, the applicant shall:

(a) Submit the necessary application, fee(s), and documentation for the license as required in WAC 246-812-120;

(b) Meet all requirements and qualifications for the license, except the results from a fingerprint-based national background check, if required;

(c) Provide verification of having an active unrestricted denturist license from another state, territory of the United States, District of Columbia or Puerto Rico that has substantially equivalent licensing standards to those in Washington state; and

(d) Provide fingerprints, payment, and a written request for a temporary practice permit when the department notifies the applicant the national background check is required.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-135, filed 1/28/20, effective 2/28/20. Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-135, filed 11/24/14, effective 12/25/14.]

**WAC 246-812-150 Examination—Content and scores.** An applicant for licensure as a denturist by examination must successfully complete a written and practical examination as specified in RCW 18.30.100. In order to be licensed, an applicant is required to obtain an overall passing score of at least seventy percent on the written examination and practical examination.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-150, filed 1/28/20, effective 2/28/20. Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-150, filed 11/24/14, effective 12/25/14. Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-150, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-150, filed 10/30/95, effective 11/30/95.]

**WAC 246-812-155 Denturist examination retakes.** An applicant must pass both the written examination and the practical demonstration of skills within three attempts. The three attempts include any combination of board-approved exams. After three failures on either exam, the applicant must petition the board for permission to take any further examination. The board shall have complete discretion regarding such petition and the conditions under which further examination permission may be granted.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-155, filed 1/28/20, effective 2/28/20. Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-155, filed 11/24/14, effective 12/25/14. Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-155, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-155, filed 10/30/95, effective 11/30/95.]

**WAC 246-812-158 Examination review procedures.** This section only applies to the written or practical examinations administered by the board.

(1) An applicant who fails to pass the written or clinical examination may request informal review of their examination results by the board of denturists.

(a) The request must be in writing and must be received by the department within thirty calendar days of the postmark date of the examination results letter;

(b) The board will not reverse its prior determination unless the applicant can demonstrate error in examination content or procedure, or bias, prejudice, or discrimination in the examination process; and

(c) The board will only consider any challenges to examination scores if the total revised score on any examination section would result in a passing score on that section of the examination.

(2) Procedure for filing an informal review:

(a) The applicant shall contact the denturist program at the department for an appointment to appear personally to review incorrect answers on the written portion of failed examination, and score sheets on the failed clinical portion of the examination;

(b) During the appointment, the applicant is provided a standardized form to defend their examination answers;

(c) The applicant shall specifically identify the challenged portion(s) of the examination and state the specific reason(s) as to why the applicant feels the results of the examination should be changed;

(d) The applicant is limited to two hours to complete the form for the written portion and two hours to complete the form for the clinical portion;

(e) The applicant may bring in notes, texts, or appropriate documentation to the appointment;

(f) The applicant must not bring any electronic or other equipment to the review appointment that records audio, records visual images, allows two-way communication, or otherwise retains or transmits information;

(g) The applicant may not be accompanied by another person;

(h) The applicant is not allowed to retain a copy of the examination, examination results, or the standardized form, nor take written notes or pictures from the appointment;

(i) Following the informal review, should the applicant decide not to challenge the examination results, the applicant must sign a statement on department forms indicating that the request for informal review is withdrawn. Withdrawal will not affect the right of the applicant to retake the examination at a later date.

(3) The board will only review and consider an applicant's standardized form in open session at the board's next regularly scheduled meeting. The board will notify the applicant in writing, within thirty working days of the meeting, of its decision.

(4) An applicant's failure to follow the informal review process may result in the loss of the right to formal hearing.

(5) Any applicant who has completed the informal review process and is not satisfied with the result may submit a request for a formal hearing to be held before the board of denturists.

(a) The request must be made in writing and must be received by the department within thirty calendar days of the postmark date of the results of the board's informal examination review.

(b) The written request must specifically identify the challenged portion(s) of the examination and must state the specific reason(s)

why the candidate feels the results of the examination should be changed.

(c) The board will only reverse its prior determination if the applicant shows error in examination content or procedure, or bias, prejudice, or discrimination in the examination process.

(d) The board will only consider any challenges to the written examination score if the total revised score would result in a passing score.

(6) The formal hearing will be held pursuant to the Administrative Procedure Act, chapter 34.05 RCW, and the model procedural rules for adjudicative proceeding of the department, chapter 246-11 WAC.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-158, filed 1/28/20, effective 2/28/20. Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-158, filed 11/24/14, effective 12/25/14.]

**WAC 246-812-159 Continuing competency requirements.** The goal of continuing competency is to encourage the lifetime professional development of the licensed denturist, and to enhance the clinical and overall skills needed to protect the health and safety of all patients.

(1) A licensed denturist shall:

(a) Complete and attest to the completion of a minimum of 15 clock hours of continuing competency every year as a part of their annual license renewal requirement; and

(b) Complete the Washington state jurisprudence examination annually. Two hours of continuing competency will be granted toward the requirement every three years.

(c) Comply with the requirements of WAC 246-12-170 through 246-12-240.

(2) The board:

(a) May randomly audit up to 25 percent of licensed denturists annually for compliance.

(b) Does not authorize or approve specific continuing competency courses.

(3) Continuing competency must contribute to the professional knowledge and development of the licensed denturist or enhance services provided to patients.

(4) A denturist shall complete continuing competency in one or more of the following categories:

(a) Education courses relating to the practice of denturism;

(b) Emergency management or advanced cardiac life support (ACLS);

(c) Health care provider basic life support (BLS);

(d) Infection control and federal and state safety standards;

(e) Ethics;

(f) Patient care education including risk management, methods of health delivery, multicultural, and suicide prevention education;

(g) Patient communication;

(h) Implantology (restoring implants);

(i) Partial denture construction and design;

(j) Practice management and billing practices, for a maximum of five hours yearly.

(5) A denturist shall use the following activities to complete continuing competency hours:

(a) Attendance at a local, state, national, or international continuing competency courses, live interactive webinar and denturist study clubs, for a maximum of eight hours yearly;

(b) Self-study by various means, relevant to denturism, without an instructor present:

(i) Self-study can be continuing education provided online or through the mail provided by a continuing competency provider, up to a maximum of five hours yearly;

(ii) Self-study can be reading a book that contributes to the professional knowledge and development of the licensed denturist, or enhance services provided to patients. A two-page synopsis of what was learned written by the licensed denturist is required to be granted two hours of continuing competency for each book and synopsis, up to a maximum of four hours yearly.

(c) Teaching, presenting, or lecturing in a course, only if the presentation or lecture is created or authored by the denturist claiming the continuing competency hours, up to a maximum of five hours yearly;

(d) Direct clinical supervision of denturist students up to a maximum of five hours yearly;

(e) Denturist licensure examinations, examination standardization and calibration workshops, clinical examination administration, or serving on a denturist professional board or association up to a maximum of 10 hours yearly;

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

(g) Provision of clinical denturist patient care services in a documented volunteer capacity, up to a maximum of five hours yearly.

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

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

(a) Date of attendance or completion;

(b) Name of licensed denturist;

(c) Hours earned; and

(d) Course title or subject.

(8) Upon showing good cause by the denturist in writing, the board may waive the denturist from any, all, or part of the continuing competency requirements in this chapter or may grant additional time for the denturist 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.

[Statutory Authority: RCW 18.30.065, 18.30.130, and 18.130.077. WSR 25-23-009, s 246-812-159, filed 11/6/25, effective 12/7/25. Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-159, filed 1/28/20, effective 2/28/20.]

**WAC 246-812-159001 Denturist health equity continuing competency training requirements.** (1) A licensed denturist must complete two hours in health equity continuing competency training every four years as described in WAC 246-12-800 through 246-12-830.

(2) The two hours of health equity continuing competency a licensed denturist completes counts toward meeting the applicable continuing competency requirements under WAC 246-812-159.

[Statutory Authority: RCW 18.30.065, 43.70.040, 43.70.613, and 18.130.040. WSR 23-16-143, § 246-812-159001, filed 8/2/23, effective 9/2/23.]

**WAC 246-812-160 Expired license.** If a denturist's license is expired, to return to active status the denturist shall meet the requirements in chapter 246-12 WAC, Part 2 and comply with the following:

(1) If a denturist's license is expired for one year or less, the denturist shall:

(a) Pay the late renewal penalty fee;

(b) Pay the current renewal fee; and

(c) Comply with the current continuing competency requirements.

(2) If a denturist's license is expired for more than one year but less than three years, the denturist shall:

(a) Complete an abbreviated application form;

(b) Pay the late renewal penalty fee;

(c) Pay the current renewal fee;

(d) Pay the expired credential reissuance fee;

(e) Provide a written declaration that no action has been taken by a state or federal jurisdiction that would prevent or restrict the licensed denturist's practice of denturism;

(f) Provide a written declaration that the denturist has not voluntarily given up any credential or privilege or has not been restricted in the practice of denturism in lieu of or to avoid formal action; and

(g) Provide a written declaration that the continuing competency requirements for the two most recent years have been met.

(3) If a denturist's license is expired for three years or more and the denturist has been actively practicing in a board-approved state, territory of the United States, District of Columbia, or Puerto Rico, the denturist shall:

(a) Complete an abbreviated application form;

(b) Pay the late renewal penalty fee;

(c) Pay the current renewal fee;

(d) Pay the expired credential reissuance fee;

(e) Provide to the board primary source verification of the active denturist license submitted directly from another licensing entity that includes:

(i) License number;

(ii) Issue date;

(iii) Expiration date; and

(iv) Whether the denturist is or has been the subject of final or pending disciplinary action.

(f) Provide to the board verification of active practice from a board-approved state, territory of the United States, District of Columbia, or Puerto Rico for the last three years; and

(g) Provide a written declaration that the continuing competency requirements for the two most recent years have been met according to WAC 246-812-159.

(4) If a denturist's license is expired for three years or more and the denturist has not been actively practicing in a board-approved state, territory of the United States, District of Columbia, or Puerto Rico, the denturist shall:

(a) Complete an abbreviated application form;

(b) Pay the late renewal penalty fee;

(c) Pay the current renewal fee;

(d) Pay the expired credential reissuance fee;

(e) Provide to the board primary source verification of the denturist license submitted directly from another licensing entity that includes:

(i) License number;

(ii) Issue date;

(iii) Expiration date; and

(iv) Whether the denturist is or has been the subject of final or pending disciplinary action.

(f) Provide a written declaration that continuing competency requirements for the two most recent years have been met according to WAC 246-812-159;

(g) Provide proof of successful completion of the approved online jurisprudence examination within the past year;

(h) Pay the examination fee; and

(i) Successfully pass the board administered examinations as provided in RCW 18.30.100.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-160, filed 1/28/20, effective 2/28/20. Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-160, filed 11/24/14, effective 12/25/14. Statutory Authority: RCW 18.30.065. WSR 03-12-061, § 246-812-160, filed 6/2/03, effective 7/3/03. Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-160, filed 10/2/98, effective 11/2/98. Statutory Authority: RCW 43.70.280. WSR 98-05-060, § 246-812-160, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 18.30.070(3). WSR 95-22-062, § 246-812-160, filed 10/30/95, effective 11/30/95.]

**WAC 246-812-161 Inactive license.** (1) A licensed denturist 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 denturist's birthday according to WAC 246-12-100 and pay the applicable fees according to WAC 246-812-990.

(3) A denturist with an inactive license may return to active status.

(a) If a license is inactive for three years or less, to return to active status the denturist shall meet the requirements of WAC 246-12-110 and pay the applicable fees in WAC 246-812-990;

(b) If a license is inactive for more than three years and the denturist has been actively practicing in a board-approved state, territory of the United States, District of Columbia, or Puerto Rico the denturist shall:

(i) Provide to the board primary source verification of the active denturist license, submitted directly from another licensing entity that includes:

(A) License number;

(B) Issue date;

(C) Expiration date; and

(D) Whether the denturist is or has been the subject of final or pending disciplinary action.

(ii) Provide to the board verification of current active practice in a board-approved state, territory of the United States, District of Columbia, or Puerto Rico for the last three years; and

(iii) Meet the requirements of WAC 246-12-110 and pay the applicable fees in WAC 246-812-990.

(c) If a license is inactive for more than three years, and the denturist has not been actively practicing in a board-approved state, territory of the United States, District of Columbia, or Puerto Rico the denturist shall provide to the board:

(i) A written request to change inactive licensure status to active status;

(ii) The applicable fees according to WAC 246-812-990;

(iii) Documentation of successful completion of the examinations as required in RCW 18.30.100;

(iv) Primary source verification of all denturist or health care licenses held, submitted directly from the licensing agency that includes:

(A) License number;

(B) Issue date;

(C) Expiration date; and

(D) Whether the practitioner is or has been the subject of final or pending disciplinary action.

(v) Written declaration that continuing competency requirements for the two most recent years have been met according to WAC 246-812-159; and

(vi) Proof of successful completion of the approved written jurisprudence examination within the past year.

[Statutory Authority: RCW 18.30.065 and 2020 c 76. WSR 21-02-050, § 246-812-161, filed 1/4/21, effective 2/4/21. Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-161, filed 1/28/20, effective 2/28/20. Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-161, filed 11/24/14, effective 12/25/14. Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-161, filed 10/2/98, effective 11/2/98. Statutory Authority: RCW 43.70.280. WSR 98-05-060, § 246-812-161, filed 2/13/98, effective 3/16/98.]

**WAC 246-812-165 Retired active license.** (1) A licensed denturist may place their credential in "retired active" status by meeting the requirements of this section.

(2) A licensed denturist who holds a retired active license may only practice in intermittent or emergent circumstances. As defined for this purpose:

(a) "Intermittent" means the licensed denturist will practice no more than ninety days a year; and

(b) "Emergent" means the licensed denturist will practice only in emergency circumstances such as earthquakes, floods, times of declared war, or other states of emergency.

(3) To obtain a retired active license a licensed denturist shall:

(a) Meet the requirements of WAC 246-12-120; and

(b) Pay the appropriate fee in WAC 246-812-990.

(4) To renew a retired active license the licensed denturist shall:

(a) Meet the requirements in WAC 246-12-130;

(b) Pay the appropriate fee in WAC 246-812-990;

(c) Have completed fifteen hours of continuing competency every year in compliance with WAC 246-812-159; and

(d) Renew their retired active license every year on their birthday.

(5) To return to active status, the licensed denturist shall:

(a) Meet the requirements in WAC 246-12-140;

(b) Pay the renewal fee according to WAC 246-812-990; and

(c) Meet the continuing competency requirements in WAC 246-812-159.

(6) A licensed denturist who holds a retired active license is subject to a continuing competency audit.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-165, filed 1/28/20, effective 2/28/20. Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-165, filed 11/24/14, effective 12/25/14.]

**WAC 246-812-175 Professional title.** (1) A person may not represent themselves as a licensed denturist or use any title or description of services without being licensed by the board.

(2) A person represents themselves as a denturist when they adopt or use a title or description of services that incorporates one or more of the terms or designations:

(a) Denturist;

(b) Licensed denturist;

(c) LD; or

(d) DD.

(3) It is false or misleading for a denturist to use the title "doctor" or "Dr."

(4) A licensed denturist shall not engage in false, deceptive, or misleading advertising including, but not limited to:

(a) Advertising that misrepresents the potential of denturism; and

(b) Advertising of any service, technique, or procedure that is outside the scope of practice for a licensed denturist.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-175, filed 1/28/20, effective 2/28/20.]

## EDUCATION AND PROGRAM APPROVAL

**WAC 246-812-200 Approval of a denturist program.** At the board's discretion, the board may accept proof of a national professional as-

sociation's approval of a program based on standards and requirements that are substantially equivalent to those identified in this chapter, in lieu of the requirements contained in this chapter. Approval in this manner must be on a form provided by the board. The board will consider for approval any program that meets the requirements as outlined in this chapter.

(1) To request board approval of a denturist education program, the authorized representative shall submit to the board a completed application provided by the board.

(2) The authorized representative may request approval of the program as of the date of the application or retroactively to a specified date. The board approval is valid for five years. The approved program must reapply for renewed approval not less than one hundred eighty calendar days prior to the expiration date.

(3) The application for approval of a program must include, but is not limited to, the standards identified in WAC 246-812-220.

(4) The board may conduct a site inspection of the program prior to granting approval.

(5) After completing the evaluation of the application, the board may grant or deny approval, or grant approval conditioned upon appropriate modification to the application.

(6) If the board denies an application or grants conditional approval, the authorized representative of the applicant program may request a review within ninety calendar days of the board's decision. After ninety calendar days, the applicant program may only obtain review by submitting a new application.

(7) The authorized representative must notify the board within thirty calendar days of any significant changes including, but not limited to, educational administration, instructor qualifications, facilities, financial solvency, or content of training.

(8) The board may inspect an approved program at reasonable intervals for compliance. Approval may be withdrawn if the board finds failure to comply with the requirements of law, this chapter, or representations in the program's application under this chapter.

(9) The authorized representative must correct deficiencies that result in withdrawal of the board's approval, and present its correction plan and evidence of actions taken to the board for approval, within timelines specified by the board.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-200, filed 1/28/20, effective 2/28/20. Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-200, filed 11/24/14, effective 12/25/14.]

**WAC 246-812-220 Standards required for approval of schools or programs of denturism.** The following standards are used by the board in considering a denturism program application for approval:

(1) Curriculum. The curriculum must consist of a list of courses offered and the number of course hours or credits. Courses offered must include:

(a) Head and oral anatomy and physiology;

(b) Oral pathology;

(c) Partial denture construction and design;

(d) Microbiology;

(e) Dental laboratory technology;

(f) Clinical jurisprudence;

(g) Asepsis;
(h) Medical emergencies;
(i) Dental implantology; and
(j) Cardiopulmonary resuscitation.

(2) Academic standards. The program must have policies and procedures on:
(a) Minimum standards for measuring student progress;
(b) Admission;
(c) Progression;
(d) Graduation;
(e) Withdrawal;
(f) Dismissal; and
(g) Transfer of credits, both in and out of the program.

(3) Faculty. Faculty members shall be qualified by training and experience to give effective instruction in the subjects taught. The program must have:
(a) A policy on minimum competency standards for instructors;
(b) A statement or policy on faculty members' participation in curriculum development and evaluation; and
(c) Professional resumes for each instructor or trainer.

(4) Clinical and laboratory instruction. The program must have the following policies and forms:
(a) Policies pertaining to clinical and laboratory instruction, including:
(i) Supervision of students; and
(ii) Treatment decision making.
(b) Disclosure statement to provide to clients;
(c) Client intake and screen form; and
(d) Client feedback form.

(5) Facilities. The facilities must effectively accommodate the number of students, faculty, and staff and include appropriate provisions for safety. The program must have:
(a) A floor plan of the facility, including classrooms, clinic, and laboratory;
(b) A list of equipment in each classroom;
(c) A list of the equipment in the clinic;
(d) A list of the equipment in the laboratory; and
(e) A list of contents of the library.

(6) Records. The program shall maintain a system of records for each student beginning with application credentials through the entire period of attendance including:
(a) A transcript;
(b) A completion certificate; and
(c) A policy on release of student records.

(7) Other information about the program as required by the board.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-220, filed 1/28/20, effective 2/28/20. Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-220, filed 11/24/14, effective 12/25/14.]

**WAC 246-812-225 Standards required for approval of online schools or programs of denturism.** (1) An online school or program must meet the requirements of WAC 246-812-220 (1) through (4), (6), and (7).

(2) Supervision of students. Students enrolled in a board-approved online program may perform denturism duties in the course of their training under supervision.

(a) A denturist student must be supervised by a denturist licensed and in good standing in Oregon or Washington, depending upon where the clinical training is taking place.

(b) Students shall only perform those duties within the scope of practice for which they are adequately trained.

(c) The student shall at all times wear an identification badge readily visible to the public that identifies them as a student.

(d) The licensed denturist who is supervising denturist students shall cosign all treatment records.

(e) A supervising denturist may only supervise up to three students at any one time.

(f) The licensed denturist who is supervising denturist students shall submit written reports, summaries, or other information as is required by the approved online school or program.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-225, filed 1/28/20, effective 2/28/20.]

**WAC 246-812-230 Site review procedures for approval of programs of denturism.** (1) The board, at its discretion, may send a representative or evaluation committee to inspect any program requesting approval or renewed approval as an approved denturist program.

(2) Such inspections may be at any reasonable time during the normal operating hours of the program.

(3) The report of the representative or evaluation committee and the program's response shall be submitted as part of the documentation necessary for the board's action on the program's application for approval.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-230, filed 1/28/20, effective 2/28/20. Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-230, filed 11/24/14, effective 12/25/14.]

**WAC 246-812-232 Denial or withdrawal of a denturist program.** (1) When the board determines that a denturist program fails to meet the standards for training as contained in this chapter, the board shall:

(a) Deny approval to a new program; or

(b) Withdraw approval from an existing program.

(2) The board may conduct a review or a site visit to investigate any allegation that a program has not met, or has failed to maintain, the standards set forth in this chapter including, but not limited to:

(a) Requiring students to attend the classes listed on the transcript;

(b) Requiring students to complete the hours listed on the transcript;

(c) Not violating or attempting to violate, directly or indirectly, or assisting in or abetting the violation of any rule for the denturist program;

(d) Creating or maintaining accurate records including, but not limited to, student attendance records and student transcripts;

(e) Being found by a state or local agency, or a private certifying, permitting, or accreditation agency related to denturism, that a denturist program has engaged in any of the conduct identified in this subsection;

(f) Notifying the board of any changes in the overall curriculum, plan or major content changes prior to implementation; and

(g) Notifying the board of changes in the authorized representative or instructor.

(3) Board approval is automatically terminated if the program does not renew.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-232, filed 1/28/20, effective 2/28/20.]

**WAC 246-812-234 Reinstatement of approval for a denturist program.** The board may consider reinstatement of a denturist program upon submission of satisfactory evidence that the program meets the standards and requirements contained in this chapter.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-234, filed 1/28/20, effective 2/28/20.]

**WAC 246-812-236 Appeal right.** A denturist program that has been denied or had approval withdrawn shall have the right to a hearing to appeal the board's decision, according to the provisions of chapter 34.05 RCW, Administrative Procedure Act, Parts IV and V.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-236, filed 1/28/20, effective 2/28/20.]

**WAC 246-812-240 Nonorthodontic removable oral devices.** (1) A licensed denturist may provide nonorthodontic removable oral devices after receiving an endorsement to their denturist license. These devices must be accompanied by written encouragement to have regular dental checkups with a licensed dentist.

(2) Nonorthodontic removable oral devices are limited to:

(a) Bruxism devices also known as occlusal splints, occlusal bite guard, bruxism appliance, bite plate, and night guard;

(b) Sports mouth guards;

(c) Removable cosmetic appliances, regardless of whether the patient is missing teeth; and

(d) Snoring devices, but only after a physician has ruled out snoring associated with sleep breathing disorders to include obstructive sleep apnea.

(3) The practice of denturism does not include the making, placing, constructing, altering, reproducing, or repairing of nonorthodontic removable oral devices intended to treat obstructive sleep apnea or to treat temporomandibular joint dysfunction.

(4) To qualify for an endorsement, a denturist shall complete the following education and training in nonorthodontic removable oral devices:

(a) A minimum of four hours of instruction in snore guards and sleep apnea; and

(b) A minimum of two hours in bruxism devices, sports mouth guards, and removable cosmetic appliances.

(5) Education and training in nonorthodontic removable oral devices must be obtained through a board-approved program or course.

(a) The program or course curriculum must include training on each subject listed under subsection (2)(a) through (d) of this section.

(b) A presenter shall submit the training curriculum to the board for review and approval prior to providing the training.

(c) The board may review previously approved curriculums as necessary or as determined by the board.

(6) To receive a nonorthodontic removable oral devices endorsement, the denturist must provide evidence of successfully completing the education and training requirements in this section by submitting to the board:

(a) A declaration on a form approved by the board that verifies proof of completion of education and training signed and dated by the presenter and the denturist; or

(b) A declaration on a form approved by the board that verifies the education and training was included in a board-approved educational program, signed and dated by the instructor and the student.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-240, filed 1/28/20, effective 2/28/20. Statutory Authority: Chapter 18.30 RCW, 2013 c 172. WSR 14-13-102, § 246-812-240, filed 6/17/14, effective 7/18/14.]

**WAC 246-812-245 Continuing education for nonorthodontic removable oral devices.** (1) A denturist who has an endorsement to provide nonorthodontic removable oral devices shall complete two hours of continuing competency in three years that:

(a) Must include the making, placing, constructing, altering, reproducing, or repairing of devices for bruxism and snoring; and

(b) May be used towards the continuing competency requirements in WAC 246-812-159 in order to renew the denturist license.

(2) The two hours of continuing competency in nonorthodontic removable oral devices will no longer be required once a denturist has maintained the endorsement for a total of six consecutive years.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-245, filed 1/28/20, effective 2/28/20.]

**WAC 246-812-250 Teeth whitening services.** (1) A licensed denturist may provide teeth whitening services after receiving an endorsement to their denturist license.

(2) Teeth whitening services include:

(a) Fabricating whitening trays;

(b) Providing nonprescription strength whitening solutions with over-the-counter equivalent concentrations; and

(c) Providing required follow-up care and instructions for use of the trays and solutions at home.

(3) To qualify for an endorsement, a denturist shall complete a minimum of two hours of instruction in teeth whitening services.

(4) Education and training in teeth whitening services must be obtained through a board-approved program or course curriculum.

(a) A presenter must submit the training curriculum to the board for review and approval prior to providing the training.

(b) The board may review previously approved curriculums as necessary or as determined by the board.

(5) To receive an endorsement for teeth whitening services, the denturist shall provide evidence of successfully completing the education and training requirement in this section by submitting to the board:

(a) A declaration on a form approved by the board that verifies proof of completion of education and training signed and dated by the presenter and the denturist; or

(b) A declaration on a form approved by the board that verifies the education and training was included in a board-approved educational program, signed and dated by the instructor and the student.

(6) A denturist providing teeth whitening services to patients shall provide the patient with written and verbal information and answer any questions related to teeth whitening trays and teeth whitening solutions including:

(a) Procedure;

(b) Alternatives; and

(c) Risks.

(7) The denturist shall obtain written patient consent on a form approved by the board for the procedure(s) and retain the signed form in the patient record.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-250, filed 1/28/20, effective 2/28/20. Statutory Authority: Chapter 18.30 RCW, 2013 c 172. WSR 14-13-102, § 246-812-250, filed 6/17/14, effective 7/18/14.]

## PRACTICE STANDARDS

**WAC 246-812-305 Definitions.** The following definitions apply to WAC 246-812-305 through 246-812-320 unless the context requires otherwise:

(1) "Clinical record" means the portion of the patient file that contains information regarding the patient exams, diagnosis, treatment discussion, treatment performed, patient progress notes, referrals, studies, tests, all imaging, and other information related to the diagnosis or treatment of the patient.

(2) "Notation" means the entire patient file maintained by a practitioner that includes all information related to the patient.

(3) "Patient record" means the portion of the record that contains information regarding the financial aspects of a patient's treatment including, but not limited to, billing, treatment plan costs, payment agreements, payments, insurance information; or payment discussions held with a patient, insurance company, or person responsible for account payments.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-305, filed 1/28/20, effective 2/28/20.]

**WAC 246-812-310 Patient record content.** (1) A licensed denturist who treats patients shall maintain legible, complete, and accurate patient records.

(2) The patient record must contain clinical records and financial records.

(3) Each clinical record entry must include at least the following information:

(a) Signature, initials, or electronic verification of the individual making the entry note;

(b) Identity of practitioner who provided treatment, if treatment was provided;

(c) Date of each patient record entry, document, radiograph, or model;

(d) Physical examination findings documented by subjective complaints, objective findings, an assessment or diagnosis of the patient's condition, and treatment plan;

(e) Treatment plan based on the assessment or diagnosis of the patient's condition;

(f) Up-to-date dental and medical history that may affect treatment;

(g) Any diagnostic aid used including, but not limited to, images, radiographs, and test results, which shall be retained as listed in WAC 246-812-320;

(h) Complete description of all treatment or procedures, or both, provided at each visit;

(i) Referrals and communication to and from health care providers;

(j) Notation of communication to or from patients or patient's parent or guardian, regarding:

(i) Notation of the informed consent discussion indicating potential risk(s) and benefit(s) of proposed treatment, recommended tests, and alternatives to treatment, including no treatment or tests;

(ii) Notation of post-treatment instructions or reference to an instruction pamphlet given to the patient;

(iii) Notation regarding patient complaints or concerns associated with treatment including complaints or concerns obtained in person or by phone, email, or text; and

(iv) Termination of the denturist-patient relationship.

(4) Clinical record entries must not be erased or deleted from the record.

(a) Mistaken handwritten entries must be corrected with a single line drawn through the incorrect information and must be initialed and dated. New or corrected information must be initialed and dated.

(b) If an electronic record, a record audit trail must be maintained that includes a time and date history of deletions, edits, or corrections, or all the above, to electronically signed records.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-310, filed 1/28/20, effective 2/28/20. Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-310, filed 11/24/14, effective 12/25/14.]

**WAC 246-812-320 Patient record retention and accessibility requirements.** A licensed denturist shall comply with state medical records and health care information access and disclosure requirements in chapter 70.02 RCW and the Health Insurance Portability and Account-

ability Act, 45 C.F.R. Sections 160, 162 and 164 destruction and privacy regulations.

A licensed denturist:

(1) Who treats patients eighteen years old and older shall keep readily accessible patient records for at least six years from the date of the last treatment;

(2) Who treats patients under the age of eighteen years old shall keep readily accessible patient records for at least six years after the patient reaches eighteen years old; and

(3) Shall respond to a written request from a patient to examine or copy that patient's record within fifteen working days after receipt of the request.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-320, filed 1/28/20, effective 2/28/20. Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-320, filed 11/24/14, effective 12/25/14. Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-320, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-320, filed 10/30/95, effective 11/30/95.]

**WAC 246-812-330 Privileged communications.** A denturist shall not, without the consent of the patient, reveal any information acquired in attending such patient, which was necessary to enable the denturist to treat the patient. This does not apply to the release of information in an official proceeding where the release of information may be compelled by law.

[Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-330, filed 11/24/14, effective 12/25/14. Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-330, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-330, filed 10/30/95, effective 11/30/95.]

**WAC 246-812-340 Patient abandonment.** (1) A denturist 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 denturist, without reasonable cause, shall not neglect, ignore, abandon, or refuse to complete the current procedure for a patient.

(3) If the denturist chooses to withdraw responsibility for a patient of record, the denturist shall:

(a) Advise the patient in writing that termination of treatment is contemplated and that another denturist should be sought to complete the current procedure and for future care; and

(b) Advise the patient that the denturist shall remain reasonably available under the circumstances, for up to fifteen calendar days from the date of such notice, to render emergency care related to that current procedure.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-340, filed 1/28/20, effective 2/28/20. Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-340, filed 11/24/14, effective 12/25/14. Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-340, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-340, filed 10/30/95, effective 11/30/95.]

**WAC 246-812-350 License display—Notification of address.** A licensed denturist shall:

(1) Display their license, at all times, in a place plainly visible to individuals receiving services on the premises and be readily available for inspection by any designee of the board; and

(2) Notify the board of the physical business address or addresses, including changes, where the licensee shall engage in the practice of denturism.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-350, filed 1/28/20, effective 2/28/20. Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-350, filed 11/24/14, effective 12/25/14. Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-350, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-350, filed 10/30/95, effective 11/30/95.]

**WAC 246-812-360 Identification of new dentures.** (1) Each complete upper and lower denture and removable partial denture fabricated by a denturist licensed under the provisions of chapter 18.30 RCW, or fabricated pursuant to the denturist's work order or under the denturist's direction or supervision, must be marked with the name of the patient for whom the denture is intended.

(2) The markings must be done during fabrication and must be permanent, legible, and cosmetically acceptable.

(3) The exact location of the markings and the methods used to apply or implant them must be determined by the denturist fabricating the denture.

(4) If, in the professional judgment of the denturist, this identification is not practical, identification must be provided as follows:

(a) Only the initials of the patient may be used, if use of the patient's first and last name is impracticable; or

(b) The identification marks may be omitted in their entirety if none of the forms of identification specified in subsection (1) of this section is practicable, clinically safe, or the patient declines.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-360, filed 1/28/20, effective 2/28/20. Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-360, filed 11/24/14, effective 12/25/14. Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-360, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-360, filed 10/30/95, effective 11/30/95.]

**WAC 246-812-390 Improper billing practices.** The board may take disciplinary action for billing practices including, but not limited to:

(1) Rebating or offering to rebate to the insured any payment to the licensee by the third-party payor of the insured for services or treatments rendered under the insured's policy; and

(2) Submitting to any third-party payor a claim for a service or treatment at a greater or an inflated fee or charge other than the usual fee the licensee charges for that service or treatment when rendered without third-party reimbursement.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-390, filed 1/28/20, effective 2/28/20. Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-390, filed 11/24/14, effective 12/25/14. Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-390, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-390, filed 10/30/95, effective 11/30/95.]

**WAC 246-812-395 Mandatory reporting.** The board adopts the model rules for mandatory reporting as contained in chapter 246-16 WAC.

[Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-395, filed 11/24/14, effective 12/25/14.]

**WAC 246-812-460 Board conflict of interest.** Members of the board shall not participate in a disciplinary case where their participation presents a conflict of interest or creates an appearance of a conflict of interest.

[Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-460, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-460, filed 10/30/95, effective 11/30/95.]

**WAC 246-812-462 Prefabricated implant abutments.** A licensed denturist, prior to placing a prefabricated implant abutment on an implant for the purpose of fabricating, repairing, relining, or rebasing a denture, must have documented proof that a licensed dentist has examined the patient clinically. The documented proof from the licensed dentist must include a report that the implant is sufficiently osseointegrated, the surrounding soft tissues are stable and healthy, and provide a documented diagnosis that the implant is ready to restore. The prefabricated implant abutment seat shall be verified by radiographic assessment by a licensed dentist no more than 90 days prior to delivery of the denture.

[Statutory Authority: RCW 18.30.065 and 18.130.040. WSR 24-02-029, § 246-812-462, filed 12/22/23, effective 1/22/24.]

## SEXUAL MISCONDUCT

**WAC 246-812-470 Definitions.** The definitions in this section apply throughout this section and WAC 246-812-480, unless the context requires otherwise.

(1) "Denturist" means an individual applying for a credential or credentialed as defined in chapter 18.30 RCW.

(2) "Health care information" means any information, whether oral or recorded in any form or medium that identifies or can readily be associated with the identity of, and relates to, the health care of a patient.

(3) "Key party" means immediate family members and others who would be reasonably expected to play a significant role in the health care decisions of the patient and includes, but is not limited to, the

spouse, domestic partner, sibling, parent, child, guardian, and person authorized to make health care decisions of the patient.

(4) "Legitimate health care purpose" means activities for examination, diagnosis, treatment, and personal care of a patient, including palliative care, as consistent with community standards of practice for the denturist profession within the scope of practice of the denturist.

(5) "Patient" means an individual who receives health care services from a denturist. The determination of when a person is a patient is made on a case-by-case basis with consideration given to a number of factors including the nature, extent, and context of the professional relationship between the denturist and a person. A person that is not receiving treatment or professional services is not the sole determining factor.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-470, filed 1/28/20, effective 2/28/20. Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-470, filed 11/24/14, effective 12/25/14.]

**WAC 246-812-480 Sexual misconduct.** (1) A denturist shall not engage, or attempt to engage, in sexual misconduct with a current patient, or key party, inside or outside the health care setting. Sexual misconduct shall constitute grounds for disciplinary action. Sexual misconduct includes, but is not limited to:

(a) Sexual intercourse;

(b) Touching the breasts, genitals, anus, or any sexualized body part, except as consistent with accepted community standards of practice for examination, diagnosis, and treatment within a denturist's scope of practice;

(c) Rubbing against a patient or key party for sexual gratification;

(d) Kissing;

(e) Hugging, touching, fondling, or caressing of a romantic or sexual nature;

(f) Examination of or touching genitals without using gloves;

(g) Not allowing a patient privacy to dress or undress, except as may be necessary in emergencies or custodial situations;

(h) Not providing the patient a gown or draping except as may be necessary in emergencies;

(i) Dressing or undressing in the presence of the patient or key party;

(j) Removing patient's clothing, gown, or draping without consent, emergent medical necessity, or being in a custodial setting;

(k) Encouraging masturbation or other sex act in the presence of the denturist;

(l) Masturbation or other sex act by the denturist in the presence of the patient or key party;

(m) Suggesting or discussing the possibility of a dating, sexual, or romantic relationship after the professional relationship ends;

(n) Terminating a professional relationship for the purpose of dating or pursuing a romantic or sexual relationship;

(o) Soliciting a date with a patient or key party;

(p) Discussing the sexual history, preferences, or fantasies of the denturist;

(q) Any behavior, gestures, or expressions that may reasonably be interpreted as seductive or sexual;

(r) Making statements regarding the patient or key party's body, appearance, sexual history, or sexual orientation other than for legitimate health care purposes;

(s) Sexually demeaning behavior including any verbal or physical contact which may reasonably be interpreted as demeaning, humiliating, embarrassing, threatening, or harming a patient or key party;

(t) Photographing or filming the body or any body part or pose of a patient or key party, other than for legitimate health care purposes; or for the educational or marketing purposes with the consent of the patient or key party; and

(u) Showing a patient or key party sexually explicit photographs, other than for legitimate health care purposes.

(2) Sexual misconduct also includes sexual contact with any person involving force, intimidation, or lack of consent; or a conviction of a sex offense listed in RCW 9.94A.030.

(3) A denturist shall not:

(a) Offer to provide health care services in exchange for sexual favors;

(b) Use health care information to contact the patient or key party for the purpose of engaging in sexual misconduct; or

(c) Use health care information or access to health care information to meet or attempt to meet the health care provider's sexual needs.

(4) A denturist shall not engage or attempt to engage in the activities listed in subsection (1) of this section with a former patient or key party within two years after the provider-patient or provider-client relationship ends.

(5) After the two-year period of time described in subsection (3) of this section, a denturist shall not engage or attempt to engage in the activities listed in subsection (1) of this section if:

(a) There is a significant likelihood that the patient or key party will seek or require additional services from the denturist; or

(b) There is an imbalance of power, influence, opportunity, or special knowledge of the professional relationship.

(6) When evaluating whether a denturist has engaged or has attempted to engage in sexual misconduct, the board will consider factors including, but not limited to:

(a) Documentation of a formal termination and the circumstances of termination of the provider-patient relationship;

(b) Transfer of care to another denturist;

(c) Duration of the provider-patient relationship;

(d) Amount of time that has passed since the last health care services to the patient;

(e) Communication between the denturist and the patient between the last health care services rendered and commencement of the personal relationship;

(f) Extent to which the patient's personal or private information was shared with the denturist;

(g) Nature of the patient's health condition during and since the professional relationship;

(h) The patient's emotional dependence and vulnerability; and

(i) Normal revisit cycle for the profession and service.

(7) Patient or key party initiation or consent does not excuse or negate the denturist's responsibility.

(8) These rules do not prohibit:

(a) Providing health care services in case of emergency where the services cannot or will not be provided by another denturist;

(b) Contact that is necessary for a legitimate health care purpose and that meets the standard of care appropriate to the denturist profession; or

(c) Providing health care services for a legitimate health care purpose to a person who is in a preexisting, established personal relationship with the denturist, and where there is no evidence of, or potential for, exploiting the patient.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-480, filed 1/28/20, effective 2/28/20. Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-480, filed 11/24/14, effective 12/25/14.]

## INFECTION CONTROL

**WAC 246-812-501 Purpose.** The purpose of WAC 246-812-501 through 246-812-520 is to establish that a licensed denturist must have written policies, procedures, and requirements for infection prevention and control in denturist offices to protect the health and well-being of the people of the state of Washington. For purposes of infection control, all denturist staff members and all patients shall be considered potential carriers of communicable diseases. Infection control procedures are required to prevent disease transmission from patient to denturist and staff, denturist and staff to patient, and from patient to patient. Every denturist is required to comply with the applicable standard of care in effect at the time of treatment. At a minimum, the denturist must comply with the requirements defined in WAC 246-812-520.

[Statutory Authority: RCW 18.30.065 and 18.130.040. WSR 24-02-029, § 246-812-501, filed 12/22/23, effective 1/22/24. Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-501, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-501, filed 10/30/95, effective 11/30/95.]

**WAC 246-812-510 Definitions—Barriers and sterilization.** The definitions in this section apply throughout WAC 246-812-501 through 246-812-520, unless the context clearly requires otherwise.

(1) "Communicable disease" means an illness caused by an infectious agent that can be transmitted from one person, animal, or object to another person by direct or indirect means including transmission via an intermediate host, vector, food, water, or air.

(2) "Decontamination" means the use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use, or disposal.

(3) "Direct care staff" means denturist staff who directly provide denturist care to patients.

(4) "Disinfection" means the use of a chemical agent on inanimate objects to destroy recognized pathogenic microorganisms, but not necessarily all microbial forms.

(5) "Sterilization" means the use of a physical or chemical procedure to destroy all microorganisms including substantial numbers of resistant bacterial spores.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-510, filed 1/28/20, effective 2/28/20. Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-510, filed 11/24/14, effective 12/25/14. Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-510, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-510, filed 10/30/95, effective 11/30/95.]

**WAC 246-812-515 Hand hygiene.** (1) As used in this section, "hand hygiene" means the use of soap and water when hands are visibly soiled, otherwise an alcohol-based hand solution may be used.

(2) A licensed denturist shall perform hand hygiene:

(a) When hands are visibly soiled;

(b) After barehanded touching of instruments, equipment, materials, and other objects likely to be contaminated by blood, saliva, or respiratory secretions;

(c) Before and after treating each patient; and

(d) Before putting on and immediately after removing gloves.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-515, filed 1/28/20, effective 2/28/20.]

**WAC 246-812-517 Respiratory hygiene and cough etiquette.** (1) A licensed denturist shall post signs at entrances with instructions to patients with symptoms of respiratory infection to:

(a) Cover their mouth and nose when coughing or sneezing;

(b) Use and dispose of tissues; and

(c) Perform hand hygiene after hands have been in contact with respiratory secretions.

(2) A licensed denturist must provide tissues and no-touch receptacles for disposal of tissues.

(3) A licensed denturist must offer masks to coughing patients and accompanying individuals.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-517, filed 1/28/20, effective 2/28/20.]

**WAC 246-812-520 Use of barriers and sterilization techniques.** The use of barriers and sterilization techniques is the primary means of assuring the least possible chance of transmission of communicable diseases from denturist and staff to patients, from patient to patient, and from patient to denturist and staff. To prevent patient to patient cross contamination, instruments and supplies contaminated, or likely to be contaminated, with blood or saliva and touched during treatment must be sterilized between patients or discarded, except as otherwise listed in this section. Surfaces and equipment that are likely to be contaminated with blood or saliva and touched during treatment must be decontaminated or covered with a barrier that is

discarded and replaced between patients, except as otherwise set forth below:

(1) Denturists shall comply with the following barrier techniques:

(a) Gloves must be used by the denturist and direct care staff during treatment that involves intraoral procedures or contact with items potentially contaminated with the patient's bodily fluids. Fresh gloves must be used for every intraoral patient contact. Gloves must not be washed or reused for any purpose. The same pair of gloves must not be used, removed, washed, and reused for the same patient at the same visit or for any other denturist or nondenturist purpose.

(b) Masks must be worn by the denturist and direct care staff when splatter or aerosol is likely.

(c) Unless effective surface decontamination methods are used, protective barriers must be placed over areas that are likely to be touched during treatment, not removable for sterilization, and likely to be contaminated by blood or saliva. These procedures must be followed between each patient including, but not limited to:

(i) Delivery unit;

(ii) Chair controls (not including foot controls);

(iii) Light handles;

(iv) Head rests;

(v) Instrument trays;

(vi) Treatment areas and laboratory countertops and benches.

(d) Protective eyewear shields must be worn by the denturist and direct care staff and provided to all patients during times when splatter or aerosol is expected.

(2) Denturists shall comply with the following sterilization requirements:

(a) Each denturist office must have the capability to ultrasonically clean and sterilize contaminated items by autoclave, dry heat, unsaturated formaldehyde/alcohol vapor (such as MDT Chemiclave®) or ethylene oxide, where adequate ventilation is provided. Sterilizers must be tested with a biological spore test, on a minimum weekly basis. In the event of a positive biological spore test, the denturist shall take immediate remedial action to ensure the objectives of (a) of this subsection are accomplished. Documentation must be maintained either in the form of a log reflecting dates and person(s) conducting the testing or copies of reports from an independent testing entity. The documentation must be maintained for a period of a minimum of five years.

(b) The following items must be sterilized by an appropriate autoclave, dry heat, unsaturated formaldehyde/alcohol vapor (such as MDT Chemiclave®) or ethylene oxide sterilization method between patients:

(i) Hand instruments;

(ii) Air-water syringe tips;

(iii) High volume evacuator tips;

(iv) Nose cone sleeves;

(v) Metal impression trays.

(c) Gross debris must be removed from items prior to sterilization. Ultrasonic solution cleaning must be used whenever possible.

(d) Nondisposable items used in patient care that cannot be sterilized by autoclave, dry heat, unsaturated formaldehyde/alcohol vapor (such as MDT Chemiclave®) or ethylene oxide must be immersed in a chemical sterilant. If such a technique is used, the solution must be approved by the Environmental Protection Agency and used in accordance with the manufacturer's directions for sterilization.

(e) Items such as impressions contaminated with blood or saliva must be thoroughly rinsed, appropriately disinfected, and placed in and transported to a denturist laboratory in an appropriate case containment device that is properly sealed and separately labeled.

(f) In the laboratory:

(i) Ragwheels must be sterilized or disinfected;

(ii) Patient pumice must be discarded after each use; and

(iii) Patient burrs and stones must be sterilized or disinfected.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-520, filed 1/28/20, effective 2/28/20. Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-520, filed 11/24/14, effective 12/25/14. Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-520, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-520, filed 10/30/95, effective 11/30/95.]

## SUBSTANCE USE DISORDER MONITORING

**WAC 246-812-601 Purpose.** The board recognizes the need to establish a means of proactively providing early recognition and treatment options for denturists whose competency may be impaired due to drug or alcohol use. The board declares such denturists be treated and monitored so they can return to, or continue to, practice their profession in a way that safeguards the public. The Washington recovery and monitoring program (WRAMP) is the board's approved substance use disorder monitoring program under RCW 18.130.175. The board may refer denturists impaired by substance use disorder to WRAMP as an alternative to instituting, or in connection with, disciplinary proceedings as defined in RCW 18.130.160.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-601, filed 1/28/20, effective 2/28/20. Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-601, filed 11/24/14, effective 12/25/14. Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-601, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-601, filed 10/30/95, effective 11/30/95.]

**WAC 246-812-610 Definitions.** The definitions in this section apply throughout WAC 246-812-601 through 246-812-630 unless the context clearly requires otherwise.

(1) "Aftercare" means a period of time after intensive treatment that provides the denturist and the denturist's family with group or individual counseling sessions, discussions with other families, ongoing contact and participation in self-help groups and ongoing continued support of treatment or monitoring program staff.

(2) "Approved treatment facility" means a facility certified by the department under chapter 246-341 WAC. Drug and alcohol treatment facilities located out-of-state must have substantially equivalent standards.

(3) "Health care professional" means an individual who is licensed, certified, or registered in Washington to engage in the delivery of health care to patients.

(4) "Monitoring contract" means a comprehensive, structured agreement between a recovering denturist and WRAMP that defines the requirements of a denturist's program participation.

(5) "Random drug screen" means laboratory tests to detect the presence of specific drugs in body fluids and other biologic specimens, which are performed at irregular intervals not known in advance by the person being tested.

(6) "Recovery-oriented group" means a group such as alcoholics anonymous, narcotics anonymous, and related organizations based on a philosophy of anonymity, belief in a power outside of oneself, a peer group association, and self-help.

(7) "Substance use disorder" means a chronic progressive illness that involves the use of alcohol or other drugs to a degree that it interferes with the functional life of the denturist, as manifested by health, family, job (professional services), legal, financial, or emotional problems, or all or any combination of the above.

(8) "Support group" means a group of health care professionals meeting regularly to support the recovery of its members. The group provides a confidential setting with a trained and experienced health care professional facilitator in which denturists may safely discuss drug diversion, licensure, return to work, and other professional issues related to recovery.

(9) "Washington recovery and monitoring program (WRAMP)" means the approved substance use disorder monitoring program as described in RCW 18.130.175 that meets criteria established by the board. WRAMP does not provide evaluation or treatment services.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-610, filed 1/28/20, effective 2/28/20. Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-610, filed 11/24/14, effective 12/25/14. Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-610, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-610, filed 10/30/95, effective 11/30/95.]

**WAC 246-812-620 Approval of substance use disorder monitoring programs.** (1) WRAMP is the board-approved monitoring program that employs staff with the qualifications and knowledge of both substance abuse and the practice of denturism as defined in this chapter to be able to evaluate:

(a) Clinical laboratories;

(b) Laboratory results;

(c) Providers of substance abuse treatment, both individuals and facilities;

(d) Support groups;

(e) The denturist work environment; and

(f) The ability of the denturist to practice with reasonable skill and safety.

(2) WRAMP shall enter into a monitoring contract with a denturist and the board to oversee a denturist's required recovery activities.

(3) WRAMP may make exceptions to individual components of the contract made on an individual basis, as needed.

(4) WRAMP determines, on an individual basis, whether a denturist must be prohibited from engaging in the practice of denturism for a period of time and restrictions, if any, on the denturist's access to controlled substances in the work place.

(5) WRAMP shall maintain records on participants.

(6) WRAMP must be responsible for providing feedback to the denturist as to whether treatment progress is acceptable.

(7) WRAMP shall report to the board any denturist who fails to comply with the requirements of the monitoring program.

(8) The board shall approve WRAMP's procedures on treatment, monitoring, and limitations on the practice of denturism for those participating in the program.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-620, filed 1/28/20, effective 2/28/20. Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-620, filed 11/24/14, effective 12/25/14. Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-620, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-620, filed 10/30/95, effective 11/30/95.]

**WAC 246-812-630 Participation in approved substance use disorder monitoring program.** (1) Any denturist participating in the approved substance use disorder monitoring program shall:

(a) Undergo a complete psychosocial evaluation by a health care professional(s) with expertise in substance use disorder before entering the approved monitoring program. The person(s) performing the evaluation must not be the provider of the recommended treatment.

(b) Enter into a contract with WRAMP that must include, but not be limited to, the following terms, which require denturists to:

(i) Undergo the recommended level of treatment in an approved treatment facility, including aftercare.

(ii) Abstain from all mind-altering substances including alcohol and cannabis, except for medications prescribed by an authorized prescriber, as defined in chapter 69.41 RCW, Legend drugs—Prescription drugs and chapter 69.50 RCW, Uniform Controlled Substances Act.

(iii) Complete any prescribed aftercare program of the intensive treatment facility, which may include individual or group psychotherapy.

(iv) Cause the treatment counselor(s) to provide reports to the approved monitoring program at specified intervals that include treatment, prognosis, and goals.

(v) Complete random or for cause drug screening as specified by WRAMP.

(vi) Attend support groups facilitated by a health care professional or recovery-oriented group meetings as specified by the monitoring contract.

(vii) Comply with specified employment conditions and restrictions as defined by the monitoring contract.

(viii) Agree in writing to allow WRAMP to release information to the board if the denturist does not comply with the requirements of the monitoring contract or is unable to practice with reasonable skill and safety.

(ix) Pay the costs of the substance use disorder evaluation, substance use treatment, and random drug screens.

(x) Sign a requested release of information authorization.

(2) When referred to WRAMP in lieu of discipline, the denturist shall enter into a referral contract with the board. The board may take disciplinary action against the license of the denturist under RCW 18.130.160, based on a denturist's violation of the referral contract.

(3) A denturist may voluntarily participate in WRAMP in accordance with RCW 18.130.175(2) without first being referred to WRAMP by the board.

[Statutory Authority: RCW 18.30.065. WSR 20-04-028, § 246-812-630, filed 1/28/20, effective 2/28/20. Statutory Authority: Chapter 18.30 RCW and 2013 c 171. WSR 14-24-033, § 246-812-630, filed 11/24/14, effective 12/25/14. Statutory Authority: RCW 18.30.070(3). Readopted by WSR 98-20-068, § 246-812-630, filed 10/2/98, effective 11/2/98; WSR 95-22-062, § 246-812-630, filed 10/30/95, effective 11/30/95.]

## FEES

**WAC 246-812-990 Denturist 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:

| Title of Fee | Fee Amount |
|---|---|
| **Original application** | |
| Application | $350.00 |
| Examination | 1,500.00 |
| Reexamination, written | 500.00 |
| Reexamination, practical | 500.00 |
| **Active license renewal** | |
| Renewal | 1,700.00 |
| Late renewal penalty | 300.00 |
| Expired license reissuance | 300.00 |
| **Inactive license renewal** | |
| Renewal | 750.00 |
| Expired license reissuance | 300.00 |
| **Retired active license renewal** | |
| Renewal | 850.00 |
| Late renewal penalty | 150.00 |
| **Duplicate license** | 10.00 |
| **Verification of license** | 25.00 |
| **Multiple location licenses** | 50.00 |

[Statutory Authority: RCW 43.70.250 and 43.70.280. WSR 17-20-063, § 246-812-990, filed 10/2/17, effective 2/1/18. Statutory Authority: RCW 18.130.250 and 43.70.250. WSR 15-07-004, § 246-812-990, filed 3/6/15, effective 4/6/15. Statutory Authority: RCW 43.70.110, 43.70.250, and 2010 c 37. WSR 10-19-071, § 246-812-990, filed 9/16/10, effective 10/15/10. Statutory Authority: RCW 43.70.110, 43.70.250, 2008 c 329. WSR 08-15-014, § 246-812-990, filed 7/7/08, effective 7/7/08. Statutory Authority: RCW 43.70.250, [43.70.]280 and 43.70.110. WSR 05-12-012, § 246-812-990, filed 5/20/05, effective 7/1/05. Statutory Authority: RCW 43.70.250 and chapter 18.30 RCW. WSR 00-07-050, § 246-812-990, filed 3/8/00, effective 4/8/00. Statutory Authority: RCW 18.30.070(3). WSR 98-20-068, § 246-812-990, filed 10/2/98, effective 11/2/98. Statutory Authority: RCW 43.70.280. WSR 98-05-060, § 246-812-990, filed

2/13/98, effective 3/16/98. Statutory Authority: RCW 18.30.070(3). WSR 95-22-062, § 246-812-990, filed 10/30/95, effective 11/30/95.]