CODE REVISER USE ONLY



PREPROPOSAL STATEMENT OF INQUIRY

CR-101 (October 2017) (Implements RCW 34.05.310)

Do **NOT** use for expedited rule making

OFFICE OF THE CODE REVISER STATE OF WASHINGTON FILED

DATE: November 08, 2022

TIME: 9:35 AM

WSR 22-23-041

| • | _ | |
|--|--|---|
| Agency: Department of Social and Health Services (d | epartment), Aging and L | ong-Term Support Administration, RCS |
| Subject of possible rule making: The department is Minimum Licensing Requirements, to address a procest Family Homes and prescription medications for those may not be returned to the pharmacy and are subject to related rules as appropriate. | ss gap that occurs wher residents continue to be to diversion and misuse | residents transfer or discharge from Adult filled by pharmacies. These filled prescriptions by others. The department may amend other |
| Statutes authorizing the agency to adopt rules on t Negotiated rulemaking – Specialty license | t his subject: RCW 70.1 | 28.040, Adoption of rules and standards – |
| Reasons why rules on this subject may be needed Family Home providers clear requirements to address transfer or discharge from the Adult Family Home. It we they transition to a new location. | the transition or disposa | I of resident medications when residents |
| Identify other federal and state agencies that regulate agencies: No other federal or state agencies regulate | | e process coordinating the rule with these |
| Process for developing new rule (check all that app | olv): | |
| ☑ Negotiated rule making | P.J. | |
| ☐ Pilot rule making | | |
| ☐ Agency study | | |
| ☐ Other (describe) | | |
| Other (describe) | | |
| | | |
| | | |
| Interested parties can participate in the decision to | adont the new rule an | d formulation of the proposed rule before |
| publication by contacting: | adopt the front rate at | ia ioniiaianon oi mo propossa rais zoisis |
| , | (If necessary) | |
| Name: Coleen Jensen | Name: | |
| Address: P.O. Box 45600, Olympia, WA 98504 | Address: | |
| Phone: 564-999-3182 | Phone: | |
| Fax: 360-438-7903 | Fax: | |
| TTY: | TTY: | |
| Email: colleen.jensen1@dshs.wa.gov | Email: | |
| Web site: | Web site: | |
| Other: | Other: | |
| Additional comments: | Othor. | |
| Deter November 7, 2022 | Signature: | |
| Date: November 7, 2022 | | |
| Name: Katherine I. Vasquez | / Allen | e M. VAGEZ |
| Title: DSHS Rules Coordinator | 1401 | |