Letters from the Legislature



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It is a new year and since the number is odd (as opposed to even) we are in a long, 105-day session in Olympia. Bills are introduced in several methods, but prior to the start of session, bills may be pre-filed through the month of December. Those pre-filed bills, in combination with the near frantic rate of bill introductions up to this point, sets the stage for a taxing session from the standpoint of labor expended. We all look forward to the first cutoff dates which makes most of the bills we track effectively dead in the process. This allows us to focus on those bills that have a higher chance of passing, for better or worse.

Your Washington Medical Commission (WMC) is hard at work watching introductions, analyzing bills and working with stakeholders and policy makers. We also offer opinions or positions based on WMC adopted policies, guidelines, and rules. For those bills that are not addressed by existing WMC policies, we work with a committee of Commissioners to understand how the

WMC would view a bill should it pass. In those situations, the WMC prioritizes responses if patient safety would be compromised,

if it would impact the practice environment for our licensees, and the ability to implement the bill should it become law. Legislators introduce and sometimes pass bills that are impossible for state agencies to implement more often than you would think.

Some of the bills we are watching range from scope expansion of naturopaths to eye exam technology through telemedicine to making female genital mutilation a crime and unprofessional conduct.

Some bills of note this year:

- HB 1198 would require those practitioners disciplined for sexual misconduct violations under WMC rule to notify their patients prior to being seen after the discipline is imposed.
- HB 1049 would expand whistleblower protections under Washington law for complaints about healthcare services.
- Balanced billing has four bills working to outlaw the practice. The WMC is publically neutral but has ongoing concerns about the potential for practitioners being subject to potential discipline over billing issues.

- HB 1630 expands the scope of naturopaths and would require them to have a collaboration agreement with MDs and DOs in order to prescribe controlled substances..
- <u>HB 1331</u> is the Governor's omnibus opioid treatment and prevention bill.
- Senate Bills <u>5386</u>, <u>5387</u>, and <u>5389</u> attempt to provide clarity and incentives for use of telemedicine.
- <u>SB 5846</u> creates a workgroup to recommend a pathway for international medical graduates to match with a residency in Washington.
- HB 1638/SB 5841 would limit personal and religious exemptions to the MMR vaccine. The WMC is publically supportive of both of these efforts. You may have seen WMC's Dr. April Jaeger on the news after the HB 1638 hearing during a press conference with Health Secretary Weisman.

The WMC is active in supporting several bills this year:

• SB 5411 makes changes to the physician assistant regulations through deregulation of the review, changing terms for delegation agreements and supervising physicians, and moving the 117 osteopathic PAs under the WMC. This administrative simplification should reduce regulatory burden on PAs, MDs, and their practices. The WMC worked over the past year with WSMA and WAPA to arrive at agreeable language.

 SB 5764/HB 1548 changes the name in law from Medical Quality Assurance Commission to Washington Medical Commission, which is our request. This is based on feedback from stakeholders, national interest groups, licensees, and patients over the past three years. The feedback shows that patients will better understand services available and stakeholders who should be working with WMC will recognize the need to engage with us.

This is all just a snapshot in time and there are more steps to passing a bill than I have space for in this column. If you want to read about the details of the process, here is a good starting point.