# HOUSE BILL REPORT SHB 2079

### **As Passed House:**

March 10, 2009

**Title**: An act relating to the office of financial management's access to health professional licensing information.

**Brief Description**: Concerning the office of financial management's access to health professional licensing information.

**Sponsors**: House Committee on Health Care & Wellness (originally sponsored by Representatives Cody, Ericksen and Morrell).

# **Brief History:**

## **Committee Activity:**

Health Care & Wellness: 2/17/09, 2/19/09 [DPS];

Health & Human Services Appropriations: 2/25/09 [DPS(HCW)].

## Floor Activity

Passed House: 3/10/09, 96-0.

# **Brief Summary of Substitute Bill**

- Allows the Office of Financial Management (OFM) to have access to health professional and health facility licensing information.
- Removes the requirement that the OFM maintain access to de-identified data collected and stored by public and private organizations to support its health planning responsibilities.

#### HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

**Majority Report**: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 13 members: Representatives Cody, Chair; Driscoll, Vice Chair; Ericksen, Ranking Minority Member; Bailey, Campbell, Clibborn, Green, Herrera, Hinkle, Kelley, Moeller, Morrell and Pedersen.

Staff: Jim Morishima (786-7191)

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

House Bill Report - 1 - SHB 2079

## HOUSE COMMITTEE ON HEALTH & HUMAN SERVICES APPROPRIATIONS

**Majority Report**: The substitute bill by Committee on Health Care & Wellness be substituted therefor and the substitute bill do pass. Signed by 15 members: Representatives Pettigrew, Chair; Seaquist, Vice Chair; Schmick, Ranking Minority Member; Alexander, Assistant Ranking Minority Member; Appleton, Cody, Dickerson, Ericksen, Johnson, Miloscia, Morrell, O'Brien, Roberts, Walsh and Wood.

**Staff**: Chris Blake (786-7392)

## Background:

In 2007 legislation was enacted to implement the recommendations of the Blue Ribbon Commission on Health Care Costs and Access. As part of this legislation, the Office of Financial Management (OFM) is required to coordinate a state health planning process and develop a statewide health resources strategy, which must include:

- a health system assessment and objectives component;
- a health care facilities and services plan that assesses the demand for health care facilities and services;
- a health care data resource plan;
- an assessment of emerging trends in health care delivery and technology; and
- a rural health resource plan.

The initial strategy is due to the Governor and the Legislature by January 1, 2010, and must be updated every two years thereafter. The Department of Health (DOH) must use the statewide health resources strategy to direct its certificate of need activities.

To support its planning activities, the OFM is required to maintain access to de-identified data collected and stored by any public or private organization, including state-purchased health care program data, hospital discharge data, private efforts to collect utilization and claims-related data, and any database established pursuant to the recommendations of the Health Information Infrastructure Advisory Board. The OFM may store limited data sets as necessary to support its activities. Unless specifically authorized, the OFM may not collect data directly from the records of health care providers and facilities, but must make use of databases that have already collected the information.

## **Summary of Substitute Bill:**

The Office of Financial Management (OFM) must have access to:

- information submitted as part of the health professional licensing and renewal process, excluding Social Security number and background check information; and
- information submitted as part of the medical or health facility licensing process.

Access to, and use of, the data must comply with state and federal confidentiality laws and ethical guidelines. The OFM must maintain the data with the same degree of confidentiality as the Department of Health (DOH). When providing information to the OFM, the DOH must replace any Social Security number with an alternative identifier capable of linking all licensing records of an individual.

The requirement that the OFM maintain access to de-identified data collected and stored by any public or private organization is eliminated. The authority for the OFM to store limited data sets and the prohibition against the OFM collecting data directly from the records of health care providers and facilities are also eliminated.

**Appropriation**: None.

**Fiscal Note**: Preliminary fiscal note available.

**Effective Date**: The bill takes effect 90 days after adjournment of the session in which the bill is passed.

**Staff Summary of Public Testimony** (Health Care & Wellness):

(In support) None.

(Neutral) In 2007 the Office of Financial Management (OFM) was required to develop a state resources plan. It was assumed that the OFM would have access to health care system data, including data on the health care workforce. The information in the current statutes, however, is confusing and has been interpreted as restricting the OFM's access to the data, rather than allowing it. This bill makes explicit the OFM's ability to obtain this information, which is consistent with the Legislature's intent.

(Opposed) It is unclear why the OFM would need to use identified data as opposed to general information. The OFM should be able to obtain the information it needs to fulfill its responsibilities, but this bill goes beyond that.

**Staff Summary of Public Testimony** (Health & Human Services Appropriations):

(In Support) None.

(Neutral) The existing statutory language has made implementation of the State Health Planning Office (Office) difficult by limiting access to data. This bill will help the Office move forward with its work.

(Opposed) None.

**Persons Testifying** (Health Care & Wellness): (In support) None.

(Neutral) Jonathan Seib, Governor's Policy Office.

(Opposed) Brad Tower, Optometric Physicians of Washington.

**Persons Testifying** (Health & Human Services Appropriations): Jonathan Seib, Office of Financial Management.

**Persons Signed In To Testify But Not Testifying** (Health Care & Wellness): None.

House Bill Report - 3 - SHB 2079

**Persons Signed In To Testify But Not Testifying** (Health & Human Services Appropriations): None.