
HOUSE BILL 2485

State of Washington

64th Legislature

2016 Regular Session

By Representatives Cody, Harris, Jenkins, and Ormsby

Read first time 01/14/16. Referred to Committee on Health Care & Wellness.

1 AN ACT Relating to hospital privileges for advanced registered
2 nurse practitioners; and amending RCW 70.41.230.

3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

4 **Sec. 1.** RCW 70.41.230 and 2015 c 23 s 6 are each amended to read
5 as follows:

6 (1) Except as provided in subsection (3) of this section, prior
7 to granting or renewing clinical privileges or association of any
8 physician or advanced registered nurse practitioner or hiring a
9 physician or advanced registered nurse practitioner, a hospital or
10 facility approved pursuant to this chapter shall request from the
11 physician or advanced registered nurse practitioner and the physician
12 or advanced registered nurse practitioner shall provide the following
13 information:

14 (a) The name of any hospital or facility with or at which the
15 physician or advanced registered nurse practitioner had or has any
16 association, employment, privileges, or practice during the prior
17 five years: PROVIDED, That the hospital may request additional
18 information going back further than five years, and the physician or
19 advanced registered nurse practitioner shall use his or her best
20 efforts to comply with such a request for additional information;

1 (b) Whether the physician or advanced registered nurse
2 practitioner has ever been or is in the process of being denied,
3 revoked, terminated, suspended, restricted, reduced, limited,
4 sanctioned, placed on probation, monitored, or not renewed for any
5 professional activity listed in (b)(i) through (x) of this
6 subsection, or has ever voluntarily or involuntarily relinquished,
7 withdrawn, or failed to proceed with an application for any
8 professional activity listed in (b)(i) through (x) of this subsection
9 in order to avoid an adverse action or to preclude an investigation
10 or while under investigation relating to professional competence or
11 conduct:

12 (i) License to practice any profession in any jurisdiction;

13 (ii) Other professional registration or certification in any
14 jurisdiction;

15 (iii) Specialty or subspecialty board certification;

16 (iv) Membership on any hospital medical staff;

17 (v) Clinical privileges at any facility, including hospitals,
18 ambulatory surgical centers, or skilled nursing facilities;

19 (vi) Medicare, medicaid, the food and drug administration, the
20 national institute of health (office of human research protection),
21 governmental, national, or international regulatory agency, or any
22 public program;

23 (vii) Professional society membership or fellowship;

24 (viii) Participation or membership in a health maintenance
25 organization, preferred provider organization, independent practice
26 association, physician-hospital organization, or other entity;

27 (ix) Academic appointment;

28 (x) Authority to prescribe controlled substances (drug
29 enforcement agency or other authority);

30 (c) Any pending professional medical misconduct proceedings or
31 any pending medical malpractice actions in this state or another
32 state, the substance of the allegations in the proceedings or
33 actions, and any additional information concerning the proceedings or
34 actions as the physician or advanced registered nurse practitioner
35 deems appropriate;

36 (d) The substance of the findings in the actions or proceedings
37 and any additional information concerning the actions or proceedings
38 as the physician or advanced registered nurse practitioner deems
39 appropriate;

1 (e) A waiver by the physician or advanced registered nurse
2 practitioner of any confidentiality provisions concerning the
3 information required to be provided to hospitals pursuant to this
4 subsection; and

5 (f) A verification by the physician or advanced registered nurse
6 practitioner that the information provided by the physician or
7 advanced registered nurse practitioner is accurate and complete.

8 (2) Except as provided in subsection (3) of this section, prior
9 to granting privileges or association to any physician or advanced
10 registered nurse practitioner or hiring a physician or advanced
11 registered nurse practitioner, a hospital or facility approved
12 pursuant to this chapter shall request from any hospital with or at
13 which the physician or advanced registered nurse practitioner had or
14 has privileges, was associated, or was employed, during the preceding
15 five years, the following information concerning the physician or
16 advanced registered nurse practitioner:

17 (a) Any pending professional medical misconduct proceedings or
18 any pending medical malpractice actions, in this state or another
19 state;

20 (b) Any judgment or settlement of a medical malpractice action
21 and any finding of professional misconduct in this state or another
22 state by a licensing or disciplinary board; and

23 (c) Any information required to be reported by hospitals pursuant
24 to RCW 18.71.0195.

25 (3) In lieu of the requirements of subsections (1) and (2) of
26 this section, when granting or renewing privileges or association of
27 any physician or advanced registered nurse practitioner providing
28 telemedicine services, an originating site hospital may rely on a
29 distant site hospital's decision to grant or renew clinical
30 privileges or association of the physician or advanced registered
31 nurse practitioner if the originating site hospital obtains
32 reasonable assurances, through a written agreement with the distant
33 site hospital, that all of the following provisions are met:

34 (a) The distant site hospital providing the telemedicine services
35 is a medicare participating hospital;

36 (b) Any physician or advanced registered nurse practitioner
37 providing telemedicine services at the distant site hospital will be
38 fully privileged to provide such services by the distant site
39 hospital;

1 (c) Any physician or advanced registered nurse practitioner
2 providing telemedicine services will hold and maintain a valid
3 license to perform such services issued or recognized by the state of
4 Washington; and

5 (d) With respect to any distant site physician or advanced
6 registered nurse practitioner who holds current privileges at the
7 originating site hospital whose patients are receiving the
8 telemedicine services, the originating site hospital has evidence of
9 an internal review of the distant site physician's or advanced
10 registered nurse practitioner's performance of these privileges and
11 sends the distant site hospital such performance information for use
12 in the periodic appraisal of the distant site physician or advanced
13 registered nurse practitioner. At a minimum, this information must
14 include all adverse events, as defined in RCW 70.56.010, that result
15 from the telemedicine services provided by the distant site physician
16 or advanced registered nurse practitioner to the originating site
17 hospital's patients and all complaints the originating site hospital
18 has received about the distant site physician or advanced registered
19 nurse practitioner.

20 (4)(a) The medical quality assurance commission or the board of
21 osteopathic medicine and surgery shall be advised within thirty days
22 of the name of any physician denied staff privileges, association, or
23 employment on the basis of adverse findings under subsection (1) of
24 this section.

25 (b) The nursing care quality assurance commission shall be
26 advised within thirty days of the name of any advanced registered
27 nurse practitioner denied staff privileges, association, or
28 employment on the basis of adverse findings under subsection (1) of
29 this section.

30 (5) A hospital or facility that receives a request for
31 information from another hospital or facility pursuant to subsections
32 (1) through (3) of this section shall provide such information
33 concerning the physician or advanced registered nurse practitioner in
34 question to the extent such information is known to the hospital or
35 facility receiving such a request, including the reasons for
36 suspension, termination, or curtailment of employment or privileges
37 at the hospital or facility. A hospital, facility, or other person
38 providing such information in good faith is not liable in any civil
39 action for the release of such information.

1 (6) Information and documents, including complaints and incident
2 reports, created specifically for, and collected, and maintained by a
3 quality improvement committee are not subject to discovery or
4 introduction into evidence in any civil action, and no person who was
5 in attendance at a meeting of such committee or who participated in
6 the creation, collection, or maintenance of information or documents
7 specifically for the committee shall be permitted or required to
8 testify in any civil action as to the content of such proceedings or
9 the documents and information prepared specifically for the
10 committee. This subsection does not preclude: (a) In any civil
11 action, the discovery of the identity of persons involved in the
12 medical care that is the basis of the civil action whose involvement
13 was independent of any quality improvement activity; (b) in any civil
14 action, the testimony of any person concerning the facts which form
15 the basis for the institution of such proceedings of which the person
16 had personal knowledge acquired independently of such proceedings;
17 (c) in any civil action by a health care provider regarding the
18 restriction or revocation of that individual's clinical or staff
19 privileges, introduction into evidence information collected and
20 maintained by quality improvement committees regarding such health
21 care provider; (d) in any civil action, disclosure of the fact that
22 staff privileges were terminated or restricted, including the
23 specific restrictions imposed, if any and the reasons for the
24 restrictions; or (e) in any civil action, discovery and introduction
25 into evidence of the patient's medical records required by regulation
26 of the department of health to be made regarding the care and
27 treatment received.

28 (7) Hospitals shall be granted access to information held by the
29 medical quality assurance commission ~~((and))~~, the board of
30 osteopathic medicine and surgery, and the nursing care quality
31 assurance commission pertinent to decisions of the hospital regarding
32 credentialing and recredentialing of practitioners.

33 (8) Violation of this section shall not be considered negligence
34 per se.

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