

HOUSE BILL REPORT

ESSB 6226

As Reported by House Committee On: Labor & Workplace Standards

Title: An act relating to improving health outcomes for injured workers by facilitating better access to medical records and telemedicine.

Brief Description: Improving health outcomes for injured workers by facilitating better access to medical records and telemedicine.

Sponsors: Senate Committee on Labor & Commerce (originally sponsored by Senators Keiser, Conway, Cleveland, Kuderer and Saldaña).

Brief History:

Committee Activity:

Labor & Workplace Standards: 2/19/18, 2/20/18, 2/22/18 [DPA].

Brief Summary of Engrossed Substitute Bill (As Amended by Committee)

- Requires self-insured employers to provide electronic copies of medical records to a physician conducting an independent medical examination, and, if not possible, provide paper copies at least 10 business days before the examination.
- Requires the Collaborative for the Advancement of Telemedicine study the feasibility of telemedicine for independent medical examinations.

HOUSE COMMITTEE ON LABOR & WORKPLACE STANDARDS

Majority Report: Do pass as amended. Signed by 6 members: Representatives Sells, Chair; Gregerson, Vice Chair; McCabe, Ranking Minority Member; Doglio, Frame and Manweller.

Minority Report: Do not pass. Signed by 1 member: Representative Pike, Assistant Ranking Minority Member.

Staff: Joan Elgee (786-7106).

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.

Background:

Independent Medical Examinations. Under the state's industrial insurance laws, employers must insure through the State Fund administered by the Department of Labor and Industries (Department) or may self-insure if qualified. Whenever the Director of the Department or the self-insured employer deems it necessary to resolve a medical issue, a worker must submit to an examination by a physician or physicians selected by the Director. This examination is referred to as an independent medical examination (IME). For example, an IME may be requested to rate a permanent impairment or determine a diagnosis.

For purposes of an IME, the Department or the self-insurer must provide the examining physician with all the relevant medical records from the workers' claim file. The Department's policy provides that records should be provided at least 10 days before the exam so that the provider can prepare for the exam.

Telemedicine. Telemedicine is the delivery of health care services through the use of interactive audio and video technology for the purpose of diagnosis, consultation, or treatment, permitting real-time communication between the patient and the provider. In 2016 legislation established the Collaborative for the Advancement of Telemedicine (Collaborative) to enhance the understanding and use of health services provided through telemedicine and other similar models. The Collaborative is hosted by the University of Washington Telehealth Services and is comprised of one member from each of the two largest caucuses of the Senate and the House of Representatives, and representatives from the academic community, hospitals, clinics, and health care providers in primary care and specialty practices, carriers, and other interested parties. The Collaborative was directed to develop recommendations on improving access to services, identify telemedicine best practices, and explore whether to recommend a technical assistance center. The legislation directed the Collaborative to submit reports to the health care committees of the Legislature and other entities. The Collaborative terminates December 31, 2018.

Summary of Amended Bill:

A self-insured employer must ensure that all relevant medical records of an injured worker scheduled for an IME are provided as electronic medical records. If electronic medical records are not possible, paper records must be delivered to the physician at least 10 business days before the IME. If the IME will occur before 10 business days or if a medical record only becomes available to the employer during the 10 days then the paper records must be delivered to the physician as soon as possible before the IME occurs.

The Collaborative, in consultation with the Department, must study the feasibility of telemedicine for IMEs. The Collaborative must submit a report on its findings and any recommendations to the appropriate committees of the Legislature by December 1, 2018.

Amended Bill Compared to Engrossed Substitute Bill:

The amended bill strikes requirements for the development of policies and physician training by the Collaborative relating to telemedicine for IMEs and instead requires a study.

Appropriation: None.

Fiscal Note: Available.

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

Staff Summary of Public Testimony:

(In support) This bill is aimed at two areas to improve outcomes and reduce stress for injured workers. Health records are often delivered late and the physician does not have time to review them. Telemedicine reduces costs, travel time, and stress. It is used elsewhere in health care and could be adaptable for injured workers. A worker could go to a local clinic rather than travel. Telemedicine would not be for the first visit. There was a technical error in the Senate and it should be clarified that the training does not supplant what is required for IME providers.

(Opposed) None.

(Other) Getting timely records is important. Doing IMEs through telemedicine is concerning. Independent Medical Examinations are complex, contentious exams, usually involving measurements such as range of motion. This part of the bill needs some work. There was a problem on the Senate floor and language making the IMEs at the option of the worker was stricken. Providers should go through the IME credentialing process. The training described in the bill does not exist yet. The telemedicine issue should instead be studied and a recommendation made.

Persons Testifying: (In support) Senator Keiser, prime sponsor.

(Other) Michael Temple, Washington State Association for Justice; Sean Graham, Washington State Medical Association; Ian Goodhew, University of Washington School of Medicine; and Carolyn Logue, Washington Independent Medical Exam Coalition.

Persons Signed In To Testify But Not Testifying: None.