

HOUSE BILL REPORT

SSB 5386

As Passed House:
April 4, 2019

Title: An act relating to training standards in providing telemedicine services.

Brief Description: Concerning training standards in providing telemedicine services.

Sponsors: Senate Committee on Health & Long Term Care (originally sponsored by Senators Becker, Cleveland, Rivers, O'Ban, Short, Braun, Wilson, L., Holy, Brown, Warnick, Bailey, Zeiger, Conway and Van De Wege).

Brief History:

Committee Activity:

Health Care & Wellness: 3/15/19, 3/20/19 [DP].

Floor Activity:

Passed House: 4/4/19, 93-0.

Brief Summary of Substitute Bill

- Directs the Collaborative for the Advancement of Telemedicine to develop training that may be taken by health care professionals who use telemedicine technology.

HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

Majority Report: Do pass. Signed by 15 members: Representatives Cody, Chair; Macri, Vice Chair; Schmick, Ranking Minority Member; Caldier, Assistant Ranking Minority Member; Chambers, Davis, DeBolt, Harris, Jinkins, Maycumber, Riccelli, Robinson, Stonier, Thai and Tharinger.

Staff: Chris Blake (786-7392).

Background:

The Collaborative for the Advancement of Telemedicine (Collaborative) was created in 2016 to enhance the understanding and use of health services through telemedicine. The Collaborative consists of representatives from the academic community, hospitals, clinics,

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health care providers, and carriers, as well as legislators. The University of Washington provides support to the Collaborative.

The Collaborative is required to develop recommendations on improving reimbursement and access to services; identify telemedicine best practices, guidelines, billing requirements, and fraud prevention, as developed by recognized medical and telemedicine organizations; and explore other priorities. In addition, the Collaborative must make recommendations on whether to create a technical assistance center to support providers implementing or expanding services through telehealth technologies. The Collaborative has issued three reports with its final report due shortly before its termination on December 31, 2021.

Summary of Bill:

By January 1, 2020, the Collaborative for the Advancement of Telemedicine (Collaborative) must make an online telemedicine training available to health care professionals who use telemedicine technology. The contents of the training must include information on state and federal law, liability, informed consent, and other criteria established by the Collaborative in consultation with the Department of Health and the Medical Quality Assurance Commission. The training must include a question and answer methodology for demonstrating knowledge.

Health care professionals may complete the training. Health care professionals who complete the training must sign and retain an attestation.

Legislative findings are made regarding the ability of telemedicine to increase access to health care services. Legislative intent is stated to be ensuring that health care professionals who provide services through telemedicine have current information.

Appropriation: None.

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:

(In support) More telemedicine services could be effectively delivered if more practitioners better understood the basics of delivering safe care through telemedicine. There is potential for growth in telemedicine services and delivery and this bill gets all practitioners on the same page with respect to best practices, laws, and requirements for safe and effective telemedicine delivery. This is training that is flexible for health care providers and does not put additional requirements on either the Department of Health or the Medical Commission. Telemedicine is important and benefits Washington's citizens.

There is a federal prohibition restricting states from imposing any criteria about telehealth on federal health care providers because it crosses state lines. Ninety percent of health care providers need this certification to be able to practice telehealth and it needs to be part of federal health care providers' licenses to practice. There should be reciprocity so that people

are not taking the same training twice. Telehealth should not be the primary means to deliver notice of a terminal condition to a patient. The federal telehealth and telemedicine guidelines should be used.

(Opposed) None.

Persons Testifying: Stephanie McManus, Washington Medical Commission; and Skip Dreps, Northwest Paralyzed Veterans of America.

Persons Signed In To Testify But Not Testifying: None.