

HOUSE BILL REPORT

ESSB 5983

As Reported by House Committee On:
Health Care & Wellness

Title: An act relating to implementing recommendations from the 2022 sexually transmitted infection and hepatitis B virus legislative advisory group for the treatment of syphilis.

Brief Description: Implementing recommendations from the 2022 sexually transmitted infection and hepatitis B virus legislative advisory group for the treatment of syphilis.

Sponsors: Senate Committee on Health & Long Term Care (originally sponsored by Senators Lias, Rivers, Dhingra, Nobles, Pedersen, Robinson and Van De Wege).

Brief History:

Committee Activity:

Health Care & Wellness: 2/16/24, 2/20/24 [DPA].

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

- Authorizes the practice of expedited partner therapy, which allows a health care provider who diagnoses a sexually transmitted infection in a patient to provide prescription antibiotic drugs to the patient's sexual partner or partners without examination, if certain requirements are met.
- Allows certain types of medical assistants to administer intramuscular injections for syphilis treatment under telehealth supervision.

HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

Majority Report: Do pass as amended. Signed by 16 members: Representatives Riccelli, Chair; Bateman, Vice Chair; Schmick, Ranking Minority Member; Hutchins, Assistant Ranking Minority Member; Bronoske, Caldier, Davis, Graham, Harris, Macri, Maycumber, Mosbrucker, Orwall, Simmons, Stonier and Tharinger.

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

Staff: Emily Poole (786-7106).

Background:

Sexually Transmitted Infection and Hepatitis B Virus Legislative Advisory Group.

In the 2021 Operating Budget, the Legislature directed the Department of Health (DOH) to convene a work group to make recommendations concerning funding and policy initiatives to address the spread of sexually transmitted infections (STIs). The recommendations included in the December 2022 report of the STI and Hepatitis B Virus Legislative Advisory Group (Advisory Group) included increasing access to and clarifying the legal status of expedited partner therapy and allowing medical assistants (MAs) with telehealth access to a supervising clinician to provide intramuscular injections in the field.

As described in the Advisory Group's report, expedited partner therapy is the clinical practice of treating the sex partners of patients diagnosed with chlamydia or gonorrhea without requiring the partners' prior evaluation by a medical provider. The practice of expedited partner therapy typically involves a medical provider giving the diagnosed patient medications or a prescription for each of their exposed partners.

Medical Assistants.

The DOH issues certifications for several different types of MAs, including MA-certified, MA-registered, MA-hemodialysis technician, and MA-phlebotomist. The Secretary of Health (Secretary) adopts minimum qualifications and requirements for each type of MA. An MA-certified and an MA-registered are permitted to administer certain medications.

Summary of Amended Bill:

Expedited Partner Therapy.

A health care provider who diagnoses a case of sexually transmitted chlamydia, gonorrhea, trichomoniasis, or other STI in a patient may prescribe, dispense, or otherwise provide prescription antibiotic drugs to the patient's sexual partner or partners without examining the patient's partner or partners or having an established relationship with the partner or partners. This practice of expedited partner therapy is permitted when:

- the patient has a confirmed test result or direct observation of clinical signs or assessment of clinical data by a health care provider confirm the person has, or is likely to have, an STI;
- the patient indicates that the individual has a partner or partners with whom the patient has engaged in sexual activity within the 60-day period immediately before the diagnosis of an STI; and
- the patient indicates that the individual's sexual partner or partners are unable or unlikely to seek clinical services in a timely manner.

When the above requirements are met, a health care provider may prescribe, dispense, or

otherwise provide medication to the diagnosed patient for the patient to deliver to the exposed sexual partner or partners in order to prevent reinfection of the diagnosed patient. If the health care provider does not have the name of the patient's sexual partner or partners, the prescription must include the words, "expedited partner therapy" or "EPT."

A health care provider is not liable in a medical malpractice action or professional disciplinary action if the provider's use of expedited partner therapy is in compliance with applicable requirements, except in cases of intentional misconduct, gross negligence, or wanton or reckless activity.

Medical Assistant Authorized Duties.

An MA-certified and an MA-registered are authorized to administer intramuscular injections for the purposes of treating a known or suspected syphilis infection without immediate supervision, if a health care practitioner is providing supervision through interactive audio or video telemedicine technology.

Amended Bill Compared to Engrossed Substitute Bill:

The amended bill modifies the definition of "supervision" to establish that when administering intramuscular injections for the purpose of treating a syphilis infection, an MA-certified or MA-registered may be supervised through interactive audio or video telemedicine technology. The amended bill also allows supervision of an MA-certified or MA-registered who is administering an intramuscular injection for the purpose of treating a syphilis infection to occur through audio-only telemedicine technology.

Appropriation: None.

Fiscal Note: Available.

Effective Date of Amended Bill: The bill contains an emergency clause and takes effect immediately.

Staff Summary of Public Testimony:

(In support) Rates of STIs, including syphilis, have increased drastically in recent years. It is important to use all public health tools available to address the rise of STIs, especially in vulnerable populations. This bill will allow MAs to do injections in the field under telehealth supervision, which is important because it is better to be able to provide care to people where they are.

(Opposed) None.

Persons Testifying: Dennis Worsham, Snohomish County Health Department; and Frank

Velazquez, Spokane Regional Health District and Washington State Association of Local Public Health Officials.

Persons Signed In To Testify But Not Testifying: None.