

**SENATE BILL REPORT**

**SB 5859**

**AS OF MARCH 4, 1991**

**Brief Description:** Changing authority of boards that regulate health care professionals.

**SPONSORS:** Senators L. Kreidler, Niemi, Vognild and Murray.

**SENATE COMMITTEE ON HEALTH & LONG-TERM CARE**

**Staff:** Scott Plack (786-7409)

**Hearing Dates:** March 6, 1991

**BACKGROUND:**

The state's regulated health care professions have one of two types of regulatory authorities. The first type are the professions regulated by independent practice and disciplinary boards. Currently 19 professions are regulated by independent boards who have sole regulatory authority over the profession. The practice and disciplinary board are primarily comprised of practitioners of the profession. Most boards also have at least one public member and some have members who are practitioners of other professions. Three professions (medicine, dentistry and chiropractic) have separate boards for examining and discipline. In addition, the Examining Board of Psychology has a separate committee conduct the disciplinary functions.

The second type of regulatory authority are those professions regulated by the Secretary of Health. Currently 18 professions are regulated by the Secretary of Health who has sole regulatory authority over these professions. Fifteen of these 18 professions also have advisory committees to assist the secretary in regulating the profession.

In the cases where an independent board regulates a profession the board has the authority to determine minimum education qualifications, application requirements, standards of practice and has responsibility to discipline the members of the professions under the state's Uniform Disciplinary Act (Chapter 18.130 RCW). Some have expressed concerns that when a board governs a profession there may be some bias because they are primarily composed of members of the profession.

Credentialing by endorsement is the practice of waiving certain requirements (usually the examination requirement) for health care professionals from other state's who seek credentialing in Washington. This is done if the state of origin has credentialing standards substantially similar to this state. Many, though not all, regulated health care professions have some type of statutory authorization of

credentialing by endorsement. The licensing authority (e.g., the practice board or the Secretary of Health) is usually authorized in statute to define the specific requirements for credentialing by endorsement.

**SUMMARY:**

Most of the health care professions having independent practice or disciplinary boards are subject to review of the Secretary of Health. The boards not affected are hearing aid dispensers, funeral directors and nursing home administrators. The secretary may approve or disapprove all actions or failure to act on the part of the board. The matters in which the secretary may intervene include, but are not limited to, matters relating to: applications for credentialing, disciplinary actions, non-response to a request for disciplinary action, the issuance of a credential, administration of the competency examination, investigation and rule making.

The department shall invalidate an action by a board, or institute a decision when a board has not acted, by filing an emergency ruling through the Administrative Procedure Act (APA). Following such an action the department shall hold hearings as provided under the APA.

The boards and the secretary for most of the health care professions are directed to establish in rule criteria for credentialing by endorsement. The professions not affected are registered nursing, licensed practical nursing, nursing home administrators, emergency medical care personnel and funeral directors.

**Appropriation:** none

**Revenue:** none

**Fiscal Note:** requested February 27, 1991