

1 **SHB 1957 - H COMM AMD ADOPTED 3-11-93**

2 By Committee on Appropriations

3 On page 1, strike everything after the enacting clause and insert the following:

4 NEW SECTION. **Sec. 1.** The legislature finds that health care coverage providers
5 employ a variety of methods to determine whether a particular health care service or treatment
6 will be denied because such service or treatment is considered by the provider to be
7 experimental, investigative, or similarly questionable as to its efficacy. The denial of coverage
8 may prevent access to necessary health care services or treatment when the person seeking
9 coverage has no other method of affording such health care service or treatment.

10 The legislature further finds that similarly situated persons with the same health care need
11 but with different health care coverage providers face the possibility that one provider will deny
12 coverage while the other will permit coverage. This inconsistency in coverage determinations
13 requires an impartial body to provide technical guidance to health care coverage providers in
14 determining whether certain health care services or treatments should be covered under a
15 disability insurance policy, health care service contract or agreement, or under any other similar
16 health care benefit program.

17 NEW SECTION. **Sec. 2.** (1) Unless the context requires otherwise, the following
18 definitions apply throughout this chapter:

19 (a) "Committee" means the medical health coverage benefit determination committee
20 created in this chapter.

21 (b) "Health care coverage provider" or "provider" means:

22 (i) Every insurer, as defined in RCW 48.01.050, having a certificate or authority to
23 transact disability insurance as defined in RCW 48.11.030, in this state;

1 (ii) Every health care service contractor, as defined in RCW 48.44.010(3), registered to
2 transact business in this state;

3 (iii) Every health maintenance organization, as defined in RCW 48.46.020(1), registered
4 to transact business in this state;

5 (iv) The Washington basic health plan, as defined in RCW 70.47.020(1);

6 (v) The Washington state health care authority, as defined in chapter 41.05 RCW;

7 (vi) Every local government self-insured health and welfare benefit plan or program
8 regulated under chapter 48.62 RCW; or

9 (vii) The Washington State Health Insurance Pool as defined in chapter 48.41 RCW.

10 NEW SECTION. **Sec. 3.** (1) There is hereby created in the office of the insurance
11 commissioner, the medical health coverage benefit determination committee consisting of seven
12 members appointed by the commissioner on the basis of their knowledge and experience in
13 health care services. In appointing such members the commissioner shall seek to appoint
14 members from diverse health care professions that may include medical research, pharmacology,
15 oncology, internal medicine, gynecology, pediatrics, or any other health profession capable of
16 providing expertise for purposes of this act. The commissioner may not appoint members who
17 work for or with a provider in a capacity similar to the purposes of the committee and may not
18 appoint members who are advocates for groups, associations, or other organizations promoting
19 the use or coverage of a particular procedure, treatment, drug, or other health care service.

20 (2) Members of the committee shall be appointed for a term of four years and until their
21 successors are appointed. In the event of a vacancy, the commissioner shall appoint a person to
22 fill the unexpired portion of the term. The terms of the first four members of the committee shall
23 be staggered so that one member shall be appointed to serve until June 1, 1994, one member
24 until June 1, 1995, one member until June 1, 1996, and one member until June 1, 1997.

25 (3) The commissioner may remove a member of the committee only for inefficiency,
26 malfeasance, or misfeasance.

27 (4) The committee shall operate on a part-time basis. The committee shall meet at the

1 request of the commissioner and may meet at the request of a majority of members of the
2 committee to consider, develop, and recommend criteria to guide future actions of health care
3 coverage providers in determining whether a procedure, treatment, drug or other health care
4 service is experimental, investigative, or efficacious for purposes of extending coverage. The
5 committee shall also consider and make recommendations as to whether a procedure, treatment,
6 drug, or other health care service is experimental, investigative, or efficacious.

7 (5) The committee shall as soon as practicable after the initial appointment of the
8 members, meet and elect a chairperson and shall at least biennially thereafter meet and elect such
9 chairperson.

10 (6) Members of the committee shall receive reimbursement for travel expenses incurred
11 in the discharge of their duties in accordance with RCW 43.03.050 and 43.03.060.

12 (7) The insurance commissioner shall provide the committee with administrative,
13 material, and staff support necessary for the proper functioning of the committee and may adopt
14 all rules necessary to implement the provisions of this chapter.

15 NEW SECTION. Sec. 4. (1) In making a recommendation as to whether a procedure,
16 treatment, drug, or other health care service is experimental, investigative, or efficacious the
17 committee shall:

18 (a) Take into account findings, studies, or research conducted at qualified research
19 centers in this country and abroad;

20 (b) Consider whether treating physicians find the procedure, drug or treatment efficacious
21 or necessary for the health or survival of the patient, or whether there is a potential benefit to
22 the public as a whole, as for example, where a disease is rare and treatment for it may remain
23 experimental for the foreseeable future; and

24 (c) Consider other similar relevant information.

25 (2) After considering the facts and without reference to any particular dispute between
26 a provider and the person seeking coverage of a procedure, drug, treatment, or other health care
27 service, the committee shall issue a written recommendation to the commissioner detailing its

1 findings and conclusions.

2 (3) The commissioner shall publish at least once a year, and disseminate to the public and
3 providers, a summary of the committee's determinations and deliberations.

4 NEW SECTION. **Sec. 5.** This chapter shall expire on July 1, 1998.

5 NEW SECTION. **Sec. 6.** If any provision of this act or its application to any person or
6 circumstance is held invalid, the remainder of the act or the application of the provision to other
7 persons or circumstances is not affected.

8 NEW SECTION. **Sec. 7.** Sections 1 through 6 of this act shall constitute a new chapter
9 in title 48 RCW."

10 EFFECT: The adjudicatory board created in the substitute bill is replaced with a
11 committee to provide guidance to health care coverage providers in determining whether
12 a procedure, treatment, drug, or other health care service is experimental, investigative,
13 or questionable as to its efficacy. Members of the committee are appointed by the
14 commissioner for four year terms and may only be removed for cause. The committee
15 may not consider coverage disputes in particular cases. The commissioner's office must
16 supply the board with any needed staff or materials. Members of the committee are
17 reimbursed for travel expenses.