CERTIFICATION OF ENROLLMENT

SUBSTITUTE HOUSE BILL 2079

Chapter 343, Laws of 2009

61st Legislature 2009 Regular Session

HEALTH PROFESSIONAL LICENSING INFORMATION -- ACCESS

EFFECTIVE DATE: 07/26/09

Passed by the House April 20, 2009 Yeas 95 Nays 0

FRANK CHOPP

Speaker of the House of Representatives

Passed by the Senate April 14, 2009 Yeas 45 Nays 0

CERTIFICATE

I, Barbara Baker, Chief Clerk of the House of Representatives of the State of Washington, do hereby certify that the attached is **SUBSTITUTE HOUSE BILL 2079** as passed by the House of Representatives and the Senate on the dates hereon set forth.

BARBARA BAKER

BRAD OWEN Chief Clerk

President of the Senate

Approved May 5, 2009, 2:27 p.m.

FILED

May 8, 2009

CHRISTINE GREGOIRE

Governor of the State of Washington

Secretary of State State of Washington

SUBSTITUTE HOUSE BILL 2079

AS AMENDED BY THE SENATE

Passed Legislature - 2009 Regular Session

State of Washington 61st Legislature 2009 Regular Session

By House Health Care & Wellness (originally sponsored by Representatives Cody, Ericksen, and Morrell)

READ FIRST TIME 02/20/09.

- 1 AN ACT Relating to the office of financial management's access to
- 2 health professional licensing information; and amending RCW 43.370.020
- 3 and 43.70.050.

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- 4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 5 **Sec. 1.** RCW 43.370.020 and 2007 c 259 s 51 are each amended to 6 read as follows:
 - (1) The office shall serve as a coordinating body for public and private efforts to improve quality in health care, promote cost-effectiveness in health care, and plan health facility and health service availability. In addition, the office shall facilitate access to health care data collected by public and private organizations as needed to conduct its planning responsibilities.
 - (2) The office shall:
- 14 (a) Conduct strategic health planning activities related to the 15 preparation of the strategy, as specified in this chapter;
- 16 (b) Develop a computerized system for accessing, analyzing, and 17 disseminating data relevant to strategic health planning 18 responsibilities. The office may contract with an organization to

create the computerized system capable of meeting the needs of the office;

- (c) ((Maintain access to deidentified data collected and stored by any-public-and-private-organizations-as-necessary-to-support-its planning - responsibilities, - including - state - purchased - health - care program data, hospital discharge data, and private efforts to collect utilization and claims related data. The office is authorized to enter into any data sharing agreements and contractual arrangements necessary to - obtain - data - or - to - distribute - data. Among - the - sources - of deidentified - data - that - the - office - may - access - are - any - databases established pursuant to the recommendations of the health information infrastructure advisory board established by chapter 261, Laws of 2005. The-office-may-store-limited-data-sets-as-necessary-to-support-its activities. Unless-specifically-authorized,-the-office-shall-not collect data directly from the records of health care providers and health-care-facilities,-but-shall-make-use-of-databases-that-have already-collected-such-information)) Have access to the information submitted as part of the health professional licensing application and renewal process, excluding social security number and background check information, whether the license is issued by the secretary of the department of health or a board or commission. The office shall also have access to information submitted to the department of health as part of the medical or health facility licensing process. Access to and use of all data shall be in accordance with state and federal confidentiality laws and ethical guidelines, and the office shall maintain the same degree of confidentiality as the department of health. For professional licensing information provided to the office, the department of health shall replace any social security number with an alternative identifier capable of linking all licensing records of an individual; and
 - (d) Conduct research and analysis or arrange for research and analysis projects to be conducted by public or private organizations to further the purposes of the strategy.
 - (3) The office shall establish a technical advisory committee to assist in the development of the strategy. Members of the committee shall include health economists, health planners, representatives of government and nongovernment health care purchasers, representatives of state agencies that use or regulate entities with an interest in health

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- planning, representatives of acute care facilities, representatives of long-term care facilities, representatives of community-based long-term care providers, representatives of health care providers, a representative of one or more federally recognized Indian tribes, and representatives of health care consumers. The committee shall include members with experience in the provision of health services to rural communities.
- 8 **Sec. 2.** RCW 43.70.050 and 2005 c 274 s 301 are each amended to 9 read as follows:

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- (1) The legislature intends that the department and board promote and assess the quality, cost, and accessibility of health care throughout the state as their roles are specified in chapter 9, Laws of 1989 1st ex. sess. in accordance with the provisions of this chapter. In furtherance of this goal, the secretary shall create an ongoing program of data collection, storage, assessability, and review. The legislature does not intend that the department conduct or contract for the conduct of basic research activity. The secretary may request appropriations for studies according to this section from the legislature, the federal government, or private sources.
- (2) All state agencies which collect or have access to populationbased, health-related data are directed to allow the secretary access to such data. This includes, but is not limited to, data on needed health services, facilities, and personnel; future health issues; emerging bioethical issues; health promotion; recommendations from state and national organizations and associations; and programmatic and statutory changes needed to address emerging health needs. Private entities, such insurance companies, health as maintenance organizations, and private purchasers are also encouraged to give the secretary access to such data in their possession. The secretary's access to and use of all data shall be in accordance with state and federal confidentiality laws and ethical guidelines. Such data in any form where the patient or provider of health care can be identified shall not be disclosed, subject to disclosure according to chapter 42.56 RCW, discoverable or admissible in judicial or administrative proceedings. Such data can be used in proceedings in which the use of the data is clearly relevant and necessary and both the department and the patient or provider are parties.

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- 1 (3) The department shall serve as the clearinghouse for information 2 concerning innovations in the delivery of health care services, the 3 enhancement of competition in the health care marketplace, and federal 4 and state information affecting health care costs.
 - (4) The secretary shall review any data collected, pursuant to this chapter, to:
 - (a) Identify high-priority health issues that require study or evaluation. Such issues may include, but are not limited to:
 - (i) Identification of variations of health practice which indicate a lack of consensus of appropriateness;
- 11 (ii) Evaluation of outcomes of health care interventions to assess 12 their benefit to the people of the state;
- 13 (iii) Evaluation of specific population groups to identify needed 14 changes in health practices and services;
 - (iv) Evaluation of the risks and benefits of various incentives aimed at individuals and providers for both preventing illnesses and improving health services;
 - (v) Identification and evaluation of bioethical issues affecting the people of the state; and
 - (vi) Other such objectives as may be appropriate;
 - (b) Further identify a list of high-priority health study issues for consideration by the board, within their authority, for inclusion in the state health report required by RCW 43.20.050. The list shall specify the objectives of each study, a study timeline, the specific improvements in the health status of the citizens expected as a result of the study, and the estimated cost of the study; and
 - (c) Provide background for the state health report required by RCW 43.20.050.
 - (5) Any data, research, or findings may also be made available to the general public, including health professions, health associations, the governor, professional boards and regulatory agencies and any person or group who has allowed the secretary access to data.
- 33 (6) <u>Information submitted as part of the health professional</u>
 34 <u>licensing application and renewal process, excluding social security</u>
 35 <u>number and background check information, shall be available to the</u>
 36 <u>office of financial management consistent with RCW 43.370.020, whether</u>
 37 <u>the license is issued by the secretary of the department of health or</u>
 38 <u>a board or commission. The department shall replace any social</u>

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security number with an alternative identifier capable of linking all licensing records of an individual. The office of financial management shall also have access to information submitted to the department of health as part of the medical or health facility licensing process.

(7) The secretary may charge a fee to persons requesting copies of any data, research, or findings. The fee shall be no more than necessary to cover the cost to the department of providing the copy.

Passed by the House April 20, 2009. Passed by the Senate April 14, 2009. Approved by the Governor May 5, 2009. Filed in Office of Secretary of State May 8, 2009.

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