

**2SHB 1426 - H AMD 207**

By Representative Robinson

ADOPTED 03/03/2017

1 On page 2, line 16, after "clients" insert "for the purposes of  
2 quality improvement, patient safety, and care coordination. The  
3 information may not be used for contracting or value-based purchasing  
4 decisions"

5  
6 On page 3, line 34, after "medical association," insert "a  
7 statewide association representing advanced registered nurse  
8 practitioners,"

9  
10 On page 3, line 37, after "(a)" strike "The" and insert "Subject  
11 to funds appropriated for this specific purpose, the"

12  
13 On page 4, line 18, after "(c)" strike "The" and insert "Subject  
14 to funds appropriated for this specific purpose, the"

15  
16 On page 5, beginning on line 10, strike all of sections 2 and 3  
17 and insert the following:

18  
19 "NEW SECTION. Sec. 2. A new section is added to chapter 70.225  
20 RCW to read as follows:

21 Beginning November 15, 2017, the department shall annually report  
22 to the governor and the appropriate committees of the legislature on  
23 the number of facilities, entities, or provider groups identified in  
24 RCW 70.225.040(3)(l) and (m) that have integrated their federally  
25 certified electronic health records with the prescription monitoring  
26 program utilizing the state health information exchange."

27

1 Correct the title.

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EFFECT: Limits the purposes for which the director of the Health Care Authority (HCA) may access Prescription Monitoring Program (PMP) data to quality improvement, patient safety, and care coordination. Prohibits the director of the HCA from using PMP data for contracting or value-based purchasing decisions. Adds a statewide association representing advanced registered nurse practitioners to the list of groups with whom the Department of Health (DOH) must consult when determining the content and format of notices of overdose events. Removes the requirement for certain facilities, entities, and provider groups to fully integrate their electronic health records with the PMP. Requires the DOH to annually report the number of facilities, entities, and provider groups that have integrated their electronic health records with the PMP. Removes the null and void clause. Makes the requirement that the DOH provide PMP information quarterly to certain health care facilities, entities, and provider groups subject to appropriation.

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