HOUSE BILL REPORT SSB 6061

As Reported by House Committee On:

Health Care & Wellness

Title: An act relating to requiring training standards in providing telemedicine services.

Brief Description: Requiring training standards in providing telemedicine services.

Sponsors: Senate Committee on Health & Long Term Care (originally sponsored by Senators Becker and Conway).

Brief History:

Committee Activity:

Health Care & Wellness: 2/25/20, 2/26/20 [DP].

Brief Summary of Substitute Bill

• Requires health care providers who provide clinical services through telemedicine to complete training in telemedicine.

HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

Majority Report: Do pass. Signed by 15 members: Representatives Cody, Chair; Macri, Vice Chair; Schmick, Ranking Minority Member; Caldier, Assistant Ranking Minority Member; Chambers, Chopp, Davis, DeBolt, Harris, Maycumber, Riccelli, Robinson, Stonier, Thai and Tharinger.

Staff: Chris Blake (786-7392).

Background:

The Collaborative for the Advancement of Telemedicine (Collaborative) was created in 2016 to enhance the understanding and use of health services through telemedicine. The Collaborative consists of representatives from the academic community, hospitals, clinics, health care providers, and carriers, as well as legislators. The University of Washington provides support to the Collaborative.

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The Collaborative must develop recommendations on improving reimbursement and access to services; identify telemedicine best practices, guidelines, billing requirements, and fraud prevention, as developed by recognized medical and telemedicine organizations; and explore other priorities. In addition, the Collaborative must make recommendations on whether to create a technical assistance center to support providers implementing or expanding services through telehealth technologies.

In 2019 the Legislature directed the Collaborative to develop online telemedicine training that is optional for health care providers who provide clinical services through telemedicine. The training must include information on state and federal law, liability, informed consent, and other criteria established by the Collaborative. The Collaborative developed the training in 2019 and has made it available both as a free video and an online training course that may be eligible for continuing education credits.

Summary of Bill:

Beginning January 1, 2021, the optional telemedicine training developed by the Collaborative for the Advancement of Telemedicine (Collaborative) is mandatory for health care providers who provide clinical services through telemedicine. Physicians and osteopathic physicians are exempt from the requirement. Health care providers may be deemed to have met the training requirement if they complete an alternative telemedicine training requirement and sign and retain an attestation that they have completed the alternative telemedicine training.

The term "alternative telemedicine training" is defined as training that includes components that are substantially similar to the Collaborative's training. An alternative telemedicine training may be a training offered by hospitals and health care facilities to their employees, continuing education courses, and trainings developed by a health care professional board or commission.

Appropriation: None.

Fiscal Note: Available. New fiscal note requested on February 5, 2020.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.

Staff Summary of Public Testimony:

(In support) Legislation in 2019 created a voluntary telemedicine training program, but it should be mandatory from a risk management perspective. Telemedicine training can answer questions about what it takes to conduct a telemedicine visit, including documentation, consent, and treatment location. The uptake on the voluntary training is going to be too low, so it should be made mandatory. This bill has been agreed to by the stakeholders.

(Opposed) None.

Persons Testifying: Senator Becker, prime sponsor.

Persons Signed In To Testify But Not Testifying: None.