# SENATE BILL REPORT SB 5373

#### As of February 21, 2023

**Title:** An act relating to requiring health carriers to reimburse advanced registered nurse practitioners and physician assistants at the same rate as physicians for the same services.

**Brief Description:** Requiring equal reimbursement for advanced registered nurse practitioners, physician assistants, and physicians.

**Sponsors:** Senators Randall, Holy, Dhingra, Hunt, Cleveland, Wilson, C., Saldaña, Van De Wege, Conway, Frame, Hasegawa, Keiser, Kuderer, Liias, Lovelett, Nguyen, Nobles, Robinson and Valdez.

# **Brief History:**

Committee Activity: Health & Long Term Care: 1/31/23, 2/14/23 [DP-WM, w/oRec]. Ways & Means: 2/21/23.

## **Brief Summary of Bill**

• Requires health carriers to reimburse advanced registered nurse practitioners and physician assistants at the same rate as physicians for providing the same service in the same service area.

### SENATE COMMITTEE ON HEALTH & LONG TERM CARE

**Majority Report:** Do pass and be referred to Committee on Ways & Means.

Signed by Senators Cleveland, Chair; Robinson, Vice Chair; Conway, Dhingra, Holy, Randall and Van De Wege.

**Minority Report:** That it be referred without recommendation. Signed by Senators Muzzall, Assistant Ranking Member; Padden.

Staff: Greg Attanasio (786-7410)

#### SENATE COMMITTEE ON WAYS & MEANS

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not part of the legislation nor does it constitute a statement of legislative intent.

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Staff: Amanda Cecil (786-7460)

**Background:** "Advanced registered nursing practice" is defined as the performance of the acts of a registered nurse and the performance of an expanded role in providing health care services recognized by the medical and nursing professions. Advanced registered nurse practitioners (ARNPs) are authorized to perform all activities registered nurses perform, perform specialized and advanced levels of nursing, and prescribe legend drugs and certain controlled substances. ARNPs scope of practice is defined by the Nursing Care Quality Assurance Commission and includes:

- examining and diagnosing patients;
- admitting, managing, and discharging patients to and from health care facilities;
- ordering, collecting, performing, and interpreting diagnostic tests;
- managing health care by identifying, developing, implementing, and evaluating a plan of care and treatment for patients;
- prescribing therapies and medical equipment;
- prescribing medications when granted prescriptive authority; and
- referring patients to other health care practitioners, services, or facilities.

A physician assistant (PA) is a person who is licensed by the Washington Medical Commission to practice medicine according to a practice agreement signed by one or more participating physicians, with at least one of the physicians working in a supervisory capacity. Physician assistants may provide services they are competent to perform based on their education, training, and experience and that are consistent with their practice agreement.

**Summary of Bill:** For health plans, including plans offered the public employees, issued or renewed on or after January 1, 2024, a health carrier may not reimburse a contracted ARNP or PA in an amount less than the allowed amount that the health carrier would reimburse for the same service if provided by a contracted physician or osteopathic physician in the same service area.

A health carrier may not reduce the reimbursement amount paid to physicians and osteopathic physicians to comply with this act.

This act does not apply to ARNPs or PAs who are employees of a health maintenance organization.

By January 1, 2025, the Office of the Insurance Commissioner must report to the Legislature on the number of insurers who have changed their reimbursement policy because of this act, the number of ARNPs or PAs whose reimbursement increased, the number of physicians whose reimbursement decreased, and the cost to insurers to implement this act.

**Appropriation:** None.

Fiscal Note: Available.

**Creates Committee/Commission/Task Force that includes Legislative members:** No.

**Effective Date:** Ninety days after adjournment of session in which bill is passed.

**Staff Summary of Public Testimony** (**Health & Long Term Care**): PRO: Reimbursing ARNPs and PAs at the same rate as physicians will strengthen the network of care by allowing practices to stay open. The reimbursement will cover the increased cost of care. This would be a return to the way reimbursement worked in the past. The overhead, supplies, insurance is the same for these providers, but reimbursement is less.

CON: Physicians have unique training, which justifies a higher reimbursement rate. This bill could impact physician workforce in the future. Increased Medicaid reimbursement would be a better way to address financial difficulties of ARNPs and PAs. Carriers considered a number of factors when negotiating rates and this bill would limit their ability to do that.

**Persons Testifying (Health & Long Term Care):** PRO: Senator Emily Randall, Prime Sponsor; Linda Van Hoff, ARNP, ARNPs United of Washington State (AUWS); Jennifer Tyler, Tumwater Family Practice Clinic; Griffith Jones, PA, Washington Academy of Physician Assistants; Dana Doering, ARNP, Association of Advanced Practice Psychiatric Nurses (AAPPN); Maddy Wiley, ARNP, ARNPs United of Washington State (AUWS).

CON: Jennifer Ziegler, Association of Washington Health Care Plans; Sean Graham, Washington State Medical Association (WSMA); Michael Robinson.

Persons Signed In To Testify But Not Testifying (Health & Long Term Care): No one.

**Staff Summary of Public Testimony (Ways & Means):** PRO: This is not a pay raise. This bill redirects desperately needed revenue from the pockets of insurers back into practice settings of all types. This can help to address Washington's access to care issues and provider services.

CON: This bill's approach has potential for significant consequences that will increase health care costs for patients, payers, and the state, without increasing access to primary care. There are more effective ways to increase access to primary care for patients through cost neutral, patient centered approaches like investing more healthcare dollars in primary care and integrative behavioral health. This bill will have an impact on incentivizing the future physician workforce.

**Persons Testifying (Ways & Means):** PRO: Devon Connor-Green, ARNPs United, AAPPN, WAPA.

CON: Amy Brackenbury, Washington State Medical Assocation (WSMA); Sonal Patel,

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Washington Academy of Family Physicians.

Persons Signed In To Testify But Not Testifying (Ways & Means): No one.

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