FINAL BILL REPORT ESSB 5983

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Synopsis as Enacted

Brief Description: Implementing recommendations from the 2022 sexually transmitted infection and hepatitis B virus legislative advisory group for the treatment of syphilis.

Sponsors: Senate Committee on Health & Long Term Care (originally sponsored by Senators Liias, Rivers, Dhingra, Nobles, Pedersen, Robinson and Van De Wege).

Senate Committee on Health & Long Term Care House Committee on Health Care & Wellness

Background: Sexually Transmitted Infections and Hepatitis B Virus Legislative Advisory Group. The Legislature directed the Department of Health (DOH) in 2021 to convene the STI & Hepatitis B Virus (HBV) Legislative Advisory Group (workgroup) to make recommendations concerning funding and policy initiatives to address the spread of sexually transmitted infections (STIs) in Washington. The workgroup made a series of recommendations including increasing access to and clarifying the legal status of expedited partner therapy and allowing medical assistants (MAs) with telehealth access to a supervising clinician to provide intramuscular injections in the field.

As described in the workgroup's report, expedited partner therapy is the clinical practice of treating the sex partners of patients diagnosed with chlamydia or gonorrhea without requiring the partners' prior evaluation by a medical provider. The practice of expedited partner therapy typically involves a medical provider giving the diagnosed patient medications or a prescription for each of their exposed partners.

<u>Public Health in Washington State.</u> STIs are the most commonly reported diseases in Washington State. Most people with STIs do not have obvious symptoms, but without treatment, they can spread disease and possibly develop serious complications. Between 2002 to 2021, Washington State reported a high increase in STIs including chlamydia, gonorrhea, and syphilis. The number of STI cases has generally increased across most populations in the state.

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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.

Syphilis is an infection caused by bacteria and can be sexually transmitted or acquired before birth. The rate of infection for syphilis has increased greatly since 1996 when nine cases were reported. Recently, over 1000 primary and secondary cases of syphilis have been reported annually. There were 1488 primary and secondary cases of syphilis reported in 2021.

<u>Medical Assistants.</u> The Department of Health (DOH) issues certifications for several different types of MAs such as certified medical assistants (MA-C), registered medical assistants (MA-R), MA-hemodialysis technicians, and MA-phlebotomists. A MA-C and a MA-R are permitted to administer certain medications.

Summary: Medical Assistants. A MA-C and a MA-R are authorized to administer intramuscular injections for treating known or suspected syphilis infection without immediate supervision, if a health care practitioner is providing supervision through interactive audio or video telemedicine technology.

<u>Expedited Partner Therapy.</u> A health care provider who diagnoses a case of sexually transmitted chlamydia, gonorrhea, trichomoniasis, or other STI in a patient may prescribe, dispense, or otherwise provide prescription antibiotic drugs to the patient's sexual partner or partners without examining the patient's partner or partners, or having an established relationship with the partner or partners. This practice of expedited partner therapy is permitted when:

- the patient has a confirmed lab test result or direct observation of clinical signs or assessment of clinical data by a health care provider confirming the person has, or is likely to have a STI;
- the patient indicates that the individual has a partner or partners with whom the patient has engaged in sexual activity within the 60-day period immediately before the STI diagnosis; and
- the patient indicates that the individual's partner or partners are unable or unlikely to seek clinical services in a timely manner.

When the above requirements are met, a health care provider may prescribe, dispense, or otherwise provide medication to the diagnosed patient for the patient to deliver to the exposed sexual partner or partners to prevent reinfection of the diagnosed patient. If the health care provider does not have the name of the patient's sexual partner or partners, the prescription must include the words, "expedited partner therapy" or "EPT."

A health care provider is not liable in a medical malpractice action or professional disciplinary action if the provider's use of expedited partner therapy is in compliance with applicable requirements, except in cases of intentional misconduct, gross negligence, or wanton or reckless activity.

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Votes on Final Passage:

Senate 49 0

House 95 0 (House amended)

Senate 49 0 (Senate concurred)

Effective: March 25, 2024

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