SENATE BILL REPORT
ESHB 1430

As of March 31, 2025

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

Brief Description: Concerning advanced practice registered nurse and physician assistant reimbursement.

Sponsors: House Committee on Health Care & Wellness (originally sponsored by Representatives Simmons, Leavitt, Macri, Thai, Tharinger, Parshley, Reeves, Alvarado, Pollet, Rule, Stonier, Berg, Street, Goodman, Ormsby, Mena, Farivar, Entenman, Fosse, Callan, Davis, Ramel, Taylor, Lekanoff, Berry, Reed, Shavers, Cortes, Fey, Salahuddin and Hill).

Brief History: Passed House: 3/3/25, 60-36.
Committee Activity: Health & Long-Term Care: 3/25/25, 3/27/25 [DP-WM, DNP, w/oRec].
Ways & Means: 4/04/25.

Brief Summary of Bill

- Requires health carriers offering private health plans to reimburse advanced practice registered nurses (APRNs) and physician assistants (PAs) at the same rate as physicians when an APRN or PA is providing primary care and behavioral health services.

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: Do pass and be referred to Committee on Ways & Means.
Signed by Senators Cleveland, Chair; Orwall, Vice Chair; Bateman, Harris, Holy, Riccelli, Robinson and Slatter.

Minority Report: Do not pass.

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.

Signed by Senators Muzzall, Ranking Member; Christian.

Minority Report: That it be referred without recommendation.
Signed by Senator Chapman.

Staff: Greg Attanasio (786-7410)

SENATE COMMITTEE ON WAYS & MEANS

Staff: Amanda Cecil (786-7460)

Background: The term "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.

An ARNP's scope of practice is defined by the Washington State Board of Nursing 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.

In 2024, the title for ARNPs was changed to advanced practice registered nurses (APRNs), but the title change is not in effect until June 30, 2027.

A physician assistant (PA) is a person who is licensed by the Washington Medical Commission to practice medicine under the terms of one or more collaboration agreements. A collaboration agreement is a written agreement that describes the manner in which a PA is supervised by or collaborates with at least one physician, which must be signed by the PA and one or more physicians or the PA's employer. PAs may practice in any area of medicine or surgery as long as the practice is not beyond the scope of expertise and clinical practice of the participating physician or physicians within the department or specialty areas in which the PA practices. The participating physician or the PA's employer and the PA must determine which procedures may be performed and the degree of autonomy under which the procedure is performed.

Summary of Bill: For health plans, other than health plans offered to public employees,

issued or renewed on or after January 1, 2026, a health carrier may not reimburse a contracted APRN or PA in an amount less than the 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 when an APRN or PA is providing primary care services or behavioral health care services, including medication management and therapy.

A carrier may not pay a contracted physician more by making nonclaims-based payments to physicians that are not also made available to APRNs or PAs for the same service in the same service area. A health carrier may not reduce the reimbursement amount paid to physicians and osteopathic physicians to comply with this requirement.

The Office of the Insurance Commissioner (OIC) must collect data from on the implementation of this requirement beginning January 1, 2026, from health carriers or from other available sources including the all-payer claims database. By July 1, 2027, the OIC must report to the relevant committees of the Legislature on the number of insurers that have changed their reimbursement policy because of these requirements, the number of APRNs or PAs whose reimbursement increased, the number of physicians whose reimbursement decreased, and the cost to insurers to implement these requirements. These requirements do not apply to APRNs or PAs who are employees of a health maintenance organization.

Service area means the geographic location area or areas where a specific product is issued and rated, accepts members and enrollees, and covers provided services. A service area must be defined by the county or counties included, unless the commissioner permits limitation of a service area by zip code in rule or an applicable payment methodology uses an alternative service area designation.

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: Beginning in 2013 most health plans reduced the reimbursement rates for APRNs to 85 percent of what physicians were paid, despite lots of evidence showing APRNs practice safely. This bill restores reimbursement to prior levels. These reductions make it difficult for practices to remain financially solvent . Decreased reimbursement limits ability to accept new patients.

CON: Due to physicians' training and education, they are able to provide more advanced services. These professionals have chosen a different profession than a physician, which comes with different education levels and costs. If this bill passes there is no financial

incentive to pursue the additional training to become a physician. This change will increase health insurance premiums.

OTHER: Labor and Industries completed a three-year pilot project that allowed APRNs to fill the role of attending provider in the Worker's Compensation System. When comparing APRNs to physicians, the pilot found that they did not differ on cost or disability measures after one year and that APRNs provided more care in rural areas.

Persons Testifying (Health & Long-Term Care): PRO: Representative Tarra Simmons, Prime Sponsor; Justin Gill, President, Washington State Nurses Association ; Jennifer Malone, Tumwater Family Practice Clinic; David Wood, MBA, PA-C, Washington Academy of Physician Assistants (WAPA); Kristine Highlander, PHMNP, Association of Advanced Practice Psychiatric Nurses (AAPPN); Kathleen Johnson, ARNP, DNP, PHMNP, Association of Advanced Practice Psychiatric Nurses (AAPPN).

CON: Patrick Connor, NFIB; Tobias Dang, MD; Dr. Ramaswamy Viswanathan, President, American Psychiatric Association; Annie McGrath, Washington State Psychiatric Association (WSPA); Dr. Robin Berger, Washington State Psychiatric Association (WSPA); Jennifer Ziegler, Association of Washington Health Care Plans.

OTHER: Gary Franklin, MD, MPH, Department of Labor & Industries.

Persons Signed In To Testify But Not Testifying (Health & Long-Term Care): PRO: Andrea Phillips; Madison Hultquist; Gabriella Romero; Melissa Mossar; Paul Surette; Natalie Paul, Lavender Spectrum Health; Kathleen King; Linda van Hoff, ARNP, ARNPs United of Washington State (AUWS); Maddy Wiley, MSN, ARNP, FAANP, ARNPs United of Washington State (AUWS); Shannon Fitzgerald, ARNP, ARNPs United of Washington State (AUWS); Dan Richer; Karen Rogers.

CON: Claire Brutocao; Kevin McLean; Neeru Bakshi; ALISSA Hemke, Washington State Psychiatric Association; Phillip[Shaffer, PHYSICIANS FOR PATIENT PROTECTION; Hannah Burns; Spencer Steadman; Breck Lebegue; Nancy L. Belcher, King County Medical Society - Seattle, WA; TaraLyn Fray; Tanya Keeble; Rebecca Allen; Katherine Jong; Whitney Allar; Jennifer Muhm, Regence BlueShield.

OTHER: Angela Ross, ND, Washington Association of Naturopathic Physicians.