# HOUSE BILL REPORT HB 2449

## As Reported by House Committee On:

Health Care

**Title:** An act relating to health professions' scope of practice.

**Brief Description:** Concerning increasing a health profession's scope of practice.

**Sponsors:** Representatives Cody, Morrell and Schual-Berke.

**Brief History:** 

**Committee Activity:** 

Health Care: 1/21/04, 2/4/04 [DPS].

## **Brief Summary of Substitute Bill**

- · Establishes standards and criteria for evaluating proposals to expand the scope of practice of health professions.
- Establishes additional procedures for the Department of Health to follow when reviewing proposals to expand the scope of practice of health professions.

### **HOUSE COMMITTEE ON HEALTH CARE**

**Majority Report:** The substitute bill be substituted therefor and the substitute bill do pass. Signed by 8 members: Representatives Cody, Chair; Morrell, Vice Chair; Benson, Campbell, Clibborn, Darneille, Edwards and Moeller.

**Minority Report:** Do not pass. Signed by 5 members: Representatives Bailey, Ranking Minority Member; Alexander, Rodne, Schual-Berke and Skinner.

**Staff:** Chris Blake (786-7392).

#### **Background:**

Proposals to the Legislature either to regulate a new health profession or increase the scope of practice of an existing health profession may be sent to the Department of Health (Department) to be reviewed under the "sunrise" review process. The sunrise review process is initiated by either the chair of the House Health Care Committee or the Senate Health and Long-Term Care Committee by sending the proposal to the

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Department for a review.

The first step in the sunrise review process is that the group proposing the new health profession or the increase in a profession's scope of practice must submit to the Department an application explaining several factors regarding the proposal. These factors address several issues including:

- · A definition of the problem and the necessity of regulation;
- · Efforts made to address the problem;
- · Alternatives considered;
- · The potential benefit and harm to the public if regulation is granted;
- · The maintenance of standards; and
- · The expected costs of regulation.

The Department distributes the proposal and application to interested parties and holds a hearing to discuss the merits of the proposal. The hearing is presided over by a review panel. Upon consideration of the oral and written testimony and review of relevant research, the Department reports its recommendations to the Legislature. The recommendations address the merits of the proposal, summaries of testimony, findings of fact, and other considerations raised by the proposal.

### **Summary of Substitute Bill:**

Standards for evaluating "sunrise" review proposals to increase the scope of practice of a health profession are established. The standards state that the scope of practice for a health profession should only be increased when there is adequate training and education; the service provides a health benefit to the patient; and adequate public access to health services is maintained.

Additional criteria for consideration when a health profession applies for an increased scope of practice are established. These criteria include: the extent to which a profession is not able to use skills that it is trained to perform; the potential for increasing access to health care services or meeting public health goals including access to health services in rural or underserved areas; the cost impact to state programs that provide publicly-funded health care services; the potential harm created by incompetent performance of the health care services; the prevalence of the health care services in educational programs for the profession; and the impact to the cost of programs providing publicly-funded health care services.

Scope of practice is defined as the range of activities that may be provided by a particular health profession.

The Department must convene a review committee for every sunrise review application.

The review committee is to be composed of the state health officer and up to four other people with experience in health care delivery models, health care education, health care policy, health care economics, or other relevant experience. The committee must determine the appropriate questions for evaluating the proposal, review the proposal, and comment and make recommendations to the Department. The Department must evaluate the proposal and prepare an initial report considering the review committee's findings. The Department is to hold a hearing to accept testimony regarding the proposal and the initial report and revise the initial report as warranted.

### **Substitute Bill Compared to Original Bill:**

Criteria are removed regarding whether the increase in the scope of practice creates (1) an excess demand for services and (2) an excessive duplication of services. Criteria are added regarding whether the increase in the scope of practice (1) maintains public access to health care services, (2) promotes access to health care services in rural or underserved areas, (3) relates to a profession that has a shortage of providers, and (4) may impact costs to state programs providing publicly-funded health care services.

The requirement that modifications of the initial report be supported by evidence is removed and changed to information received. The requirement that the review committee develop a methodology is changed to determining the appropriate questions for the study.

**Appropriation:** None.

Fiscal Note: Available.

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

**Testimony For:** This makes the review process more scientific and brings in more knowledgeable people.

**Testimony Against:** The current system works well. Some of the criteria make the process too hard. Some of the terms need more clarification.

**Persons Testifying:** (Neutral) Steve Boruchowitz, Department of Health.

(Concerns) Gail McGaffick, Washington State Psychological Association and Acupuncture Association of Washington; Brad Tower, Optometric Physicians of Washington; and Lonnie Johns-Brown, Washington State Society for Clinical Social Work.

(Pro with concerns) Carl Nelson, Washington State Medical Association.

Persons Signed In To Testify But Not Testifying: None.

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