SENATE BILL REPORT SHB 2431

As Reported By Senate Committee On: Health & Long-Term Care, February 23, 2006

Title: An act relating to health professions background checks.

Brief Description: Requiring background checks on persons licensed as health care professionals.

Sponsors: House Committee on Appropriations (originally sponsored by Representatives Campbell, Morrell, Ericks, Moeller, Springer, B. Sullivan, Simpson, Green, Sells, O'Brien and Lantz).

Brief History: Passed House: 2/14/06, 83-13.

Committee Activity: Health & Long-Term Care: 2/20/06, 2/23/06 [DPA].

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: Do pass as amended.

Signed by Senators Keiser, Chair; Thibaudeau, Vice Chair; Deccio, Ranking Minority Member; Benson, Brandland, Franklin, Kastama, Kline, Parlette and Poulsen.

Staff: Sharon Swanson (786-7447)

Background: In 2000, the Department of Health (Department) and the Department of Social and Health Services released a report on the issue of using criminal background checks as a requirement for obtaining a credential to practice as a health care provider. The report recommended that the Department conduct in-state background checks on new applicants for health care credentials. The Department began conducting background checks on new applicants and during the 2001-03 biennium, it conducted 85,028 background checks. Four percent of these had criminal convictions in Washington.

In 2004, the Legislature enacted ESHB 2556 which created the Joint Task Force on Criminal Background Check Processes (Task Force). Last session, the duration of the Task Force was extended through December 2005. Among the preliminary recommendations considered by the Task Force were to require all school employees to have background checks as well as supporting fingerprint-based checks on all child care workers and foster parents.

The federal government maintains two data banks that track information related to actions against health care providers. The Healthcare Integrity and Protection Data Bank (HIPDB) collects information on final adverse actions against health care practitioners including civil judgments, criminal convictions, and licensing actions by state agencies. The National Practitioner Data Bank (NPDB) collects information on adverse actions (actions against a license, clinical privileges, professional society membership, participation in Medicaid or Medicare) against health care practitioners by licensing agencies, health care facilities, professional societies, and medical malpractice payers.

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Summary of Amended Bill: The Joint Task Force on Criminal Background Check Processes is extended for an additional year to December 31, 2006.

A person representing the Washington Association of Criminal Defense Lawyers is added to the task force.

The Secretary of the Department of Health or the secretary's designee is added to the task force.

Added to the list of considerations the task force must address is the feasibility of requiring the Department of Health to conduct background checks on all applicants for initial licenses to practice a health profession in Washington.

In addition, the task force must address the feasibility of requiring the Department of Health to review federal health care provider data banks for any actions taken against health care providers licensed in Washington.

Amended Bill Compared to Original Bill: The amended bill extends the Joint Task Force on Criminal Background Check Processes to December 31, 2006.

The amended bill adds two new members to the task force, including the Secretary of the Department of Health or the secretary's designee.

The requirement that the Department of Health conduct background checks on all initial licensees seeking to practice a medical profession in Washington State is removed. The requirement that the Department of Health review national data banks for health care providers currently licensed in Washington State is removed.

The task force must consider the feasibility of requiring the Department of Health to conduct background checks on initial licensees to practice a medical profession in Washington and the feasibility of requiring the Department of Health to review national data banks for health care providers currently licensed in Washington state.

Appropriation: None.

Fiscal Note: Available.

Committee/Commission/Task Force Created: No.

Effective Date: Ninety days after adjournment of session in which bill is passed, except for section 1, relating to background checks which takes effect July 1, 2007, and section 2, relating to federal data bank reviews which takes effect January 1, 2008.

Testimony For: Currently, persons requesting a health care license in Washington are required to have an in-state background check only. This does not prevent a person with criminal history in another state from coming to Washington to practice. It in not an unreasonable request to check criminal history nationwide. Passage of this bill will increase patient safety. Patient safety is of vital importance but there is a concern that this bill may create barriers for some aspects of the medical professions such as substance abuse counselors. Addiction can often lead to criminal behavior. Many addiction specialists are

former addicts. It is important to remember that and not create a chilling effect on any one specialty.

Testimony Against: None.

Who Testified: PRO: Laurie Jinkins, Department of Health; Sharon Case, Association of Alcoholism and Addictions Programs.