

HOUSE BILL REPORT

ESHB 1183

As Amended by the Senate

Title: An act relating to increasing the number of primary health care providers in Washington.

Brief Description: Regarding certain osteopathic or allopathic medical schools prohibiting hospitals or physicians from entering into agreements to provide clinical rotations to qualified osteopathic or allopathic medical students.

Sponsors: House Committee on Health Care & Wellness (originally sponsored by Representatives Johnson, Cody, Ross, Kenney, Warnick, Maxwell, Schmick, Taylor, Hope, Haler, Goodman, Hinkle, Dickerson, McCune, Rodne, Armstrong, Ryu, Seaquist, Pedersen, Lias, Eddy, Appleton, Klippert, Kretz, Hasegawa, Fagan, Asay, Chandler, Angel, Ahern and Stanford).

Brief History:

Committee Activity:

Health Care & Wellness: 1/24/11, 1/31/11 [DPS].

Floor Activity:

Passed House: 2/22/11, 94-0.

Senate Amended.

Passed Senate: 3/31/11, 44-1.

Brief Summary of Engrossed Substitute Bill

- Prohibits medical schools from entering into agreements with hospitals or physicians that would prevent them from allowing medical students to participate in clinical rotations.

HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 11 members: Representatives Cody, Chair; Jenkins, Vice Chair; Schmick, Ranking Minority Member; Hinkle, Assistant Ranking Minority Member; Bailey, Clibborn, Green, Harris, Kelley, Moeller and Van De Wege.

Staff: Chris Blake (786-7392).

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

Background:

The Medical Quality Assurance Commission (Commission) establishes standards for the issuance of licenses to physicians and surgeons, while the Board of Osteopathic Medicine and Surgery (Board) establishes standards for osteopathic physicians and surgeons. The general standards for both professions require: (1) graduation from an approved medical school; (2) completion of a residency or other postgraduate training program; (3) a work history since graduation; (4) a verification of all admitting or specialty hospital privileges granted within five years of application; and (5) a verification of all states where the applicant is credentialed.

To meet the Commission's postgraduate training requirement, the applicant for a physician or surgeon's license must have completed a two-year program accredited by either the Accreditation Council for Graduate Medical Education or the Royal College of Physicians and Surgeons of Canada. To meet the Board's postgraduate training requirement, the applicant for an osteopathic physician or surgeon's license must have completed either a nationally approved one-year internship program or the first year of a residency program approved by the American Osteopathic Association or the American Medical Association.

Summary of Engrossed Substitute Bill:

Osteopathic or allopathic medical schools that either receive state funds or are authorized by the Higher Education Coordinating Board may not prohibit a hospital or physician from entering into an agreement to allow qualified osteopathic and allopathic medical students to participate in clinical rotations.

EFFECT OF SENATE AMENDMENT(S):

The Senate amendment prohibits foreign osteopathic or allopathic medical schools from prohibiting a hospital or physician from entering into other agreements to provide clinical rotations to medical students.

Appropriation: None.

Fiscal Note: Not requested.

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

Staff Summary of Public Testimony:

(In support) There is a new medical school in Yakima that has begun to supply hospitals throughout the Pacific Northwest with medical students. The aging population requires that there be additional physicians to care for patients and replace retiring doctors. This bill promotes the collaborative development of training capacity in Washington which needs increased equity of access and improved patient care. This bill will allow medical students to train throughout the state. The Pacific Northwest needs to develop a structure to create the capacity to train physicians regionally. Exclusive contracts truncate training capacity.

Students are having trouble getting into clinical rotations in hospitals in certain parts of Washington.

(Neutral) A regional forum has been established to attempt to develop interest in creating new medical training opportunities. The University of Washington Medical School preceptorships do not have exclusivity clauses. Preceptors are unpaid volunteers who care about creating good training opportunities and it can be a challenge for them to continue to provide these services.

(Opposed) None.

Persons Testifying: (In support) Representative Johnson, prime sponsor; and Robyn Phillips Madson, Robert Sutton, and Bryan Nelson, Pacific Northwest University of Health Sciences.

(Neutral) Jackie Der, University of Washington School of Medicine.

Persons Signed In To Testify But Not Testifying: None.