
Health Care & Wellness Committee

HB 2485

Brief Description: Requiring hospitals to request information on advanced registered nurse practitioners granted privileges.

Sponsors: Representatives Cody, Harris, Jenkins and Ormsby.

Brief Summary of Bill

- Requires hospitals or facilities to request specified employment and professional discipline information from Advanced Registered Nurse Practitioners (ARNPs) before granting or renewing clinical privileges or association.
- Requires hospitals to notify the Nursing Care Quality Assurance Commission (NCQAC) when an ARNP is denied privileges, association, or employment on the basis of collected information.

Hearing Date: 1/22/16

Staff: Ariele Landstrom (786-7190).

Background:

ARNPs.

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 as recognized by the medical and nursing professions. ARNPs are authorized to perform all activities that registered nurses perform, perform specialized and advanced levels of nursing, and prescribe legend drugs and certain controlled substances. The NCQAC regulates the nursing profession in Washington and establishes, monitors, and enforces licensing, standards of practice, and discipline.

There are currently no provisions in statute that require a hospital to request certain information from ARNPs, or ARNPs to provide certain information to hospitals, before granting clinical privileges or association.

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.

Physician Privileging.

Before granting or renewing clinical privileges or association of any physician or hiring a physician, a hospital or facility must request from the physician and the physician must provide the following information:

- the name of any facility at which the physician had or has any association, employment, privileges, or practice during the prior five years;
- whether the physician has ever been or is in the process of being denied, revoked, terminated, suspended, or other adverse action for specified professional activities or has ever relinquished, withdrawn, or failed to proceed with an application in order to avoid an adverse action or to preclude an investigation or while under investigation relating to professional competence or conduct;
- any pending professional misconduct proceedings in this or any state;
- the substance of the findings in any actions or proceedings;
- a waiver of confidentiality; and
- verification that the information provided is accurate and complete.

During this process, a hospital or facility must also request the following information from any hospital or facility at which the physician has or had privileges:

- any pending professional misconduct proceedings or malpractice actions in this or any state;
- any judgment or settlement of a medical malpractice action and any finding of professional misconduct in this or another state by a licensing or disciplinary board; and
- any information required to be reported by hospitals to the Medical Quality Assurance Commission (MQAC).

The MQAC or Board of Osteopathic Medicine and Surgery (BOMS) must be advised within 30 days of the name of any physician denied staff privileges, association, or employment on the basis of adverse findings.

A hospital or facility that receives a request for information concerning a physician must provide the information to the extent the information is known to the hospital or facility, including the reasons for suspension, termination, or curtailment of employment or privileges.

Hospitals must be granted access to information held by the MQAC or BOMS pertinent to decisions of the hospital regarding credentialing and recredentialing of practitioners.

Telemedicine.

Telemedicine is the delivery of health care services through the use of interactive audio and video technology, permitting real-time communication between the patient at the originating site and the provider, for the purpose of diagnosis, consultation, or treatment.

When granting or renewing privileges or association of any physician providing telemedicine services an originating site hospital may rely on a distant site hospital's decision to grant or renew clinical privileges or association of the physician if the originating site hospital obtains reasonable assurances, through a written agreement with the distant site hospital, that:

- the distant site hospital providing the telemedicine services is a Medicare participating hospital;

- any physician providing telemedicine services at the distant site hospital is fully privileged to provide the services by the distant site hospital;
- any physician providing telemedicine services holds and maintains a valid license to perform the services issued or recognized by Washington; and
- the originating site hospital has evidence of an internal review of the distant site physician's performance and sends the distant site hospital performance information for use in the periodic appraisal of the distant site hospital. The information must include all adverse events that result from the telemedicine services and all complaints the originating site hospital has received about the physician.

Summary of Bill:

Before granting or renewing clinical privileges or association of any ARNP or hiring an ARNP, a hospital or facility must request from the ARNP and the ARNP must provide the same information as is requested from a physician.

During this process, a hospital or facility must also request from any hospital or facility at which the ARNP has or had privileges the same information that is requested from a physician.

The NCQAC must be advised within 30 days of the name of any ARNP denied staff privileges, association, or employment on the basis of adverse findings.

A hospital or facility that receives a request for information concerning an ARNP must provide the information to the extent the information is known to the hospital or facility, including the reasons for suspension, termination or curtailment of employment or privileges.

Hospitals must be granted access to information held by the NCQAC pertinent to decisions of the hospital regarding credentialing and recredentialing of practitioners.

When granting or renewing privileges or association of any ARNP providing telemedicine services, the provisions that apply to physicians apply to ARNPs.

Appropriation: None.

Fiscal Note: Requested on January 18, 2016.

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