
SENATE BILL 5986

State of Washington

64th Legislature

2015 Regular Session

By Senators Becker, Keiser, Cleveland, Bailey, Jayapal, Dammeier, Frockt, Brown, Warnick, Parlette, and Conway

Read first time 02/16/15. Referred to Committee on Health Care.

1 AN ACT Relating to creating a board of telemedicine; amending RCW
2 43.70.010; adding new sections to chapter 43.70 RCW; and creating a
3 new section.

4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

5 NEW SECTION. **Sec. 1.** The legislature recognizes telemedicine
6 will play an increasing and important role in Washington state's
7 health care system. Telemedicine is a meaningful and efficient way to
8 treat patients and control costs and plays a critical role in
9 addressing identified access problems. The use of telemedicine should
10 be thoughtfully and systematically considered in Washington state in
11 order to maximize its application. Therefore, a board of telemedicine
12 is established to provide insight, guidance, research,
13 recommendations, long-term strategies, and other resources for the
14 benefit of professionals providing care.

15 NEW SECTION. **Sec. 2.** A new section is added to chapter 43.70
16 RCW to read as follows:

17 (1) The board of telemedicine is created with responsibility to
18 establish technology requirements and provide guidance on the means
19 of interaction between a provider in one location and a patient in
20 another location.

1 (2) The board of telemedicine must develop recommendations for
2 licensees.

3 (3) In developing guidelines, the board of telemedicine must
4 review nationally recognized telemedicine guidelines, and
5 periodically review other states' laws and experience and national
6 reports on telemedicine policies and practice standards. Guidelines
7 must include such areas as: Informed consent for a patient, the
8 process for out-of-state physicians to establish reciprocity
9 agreements and the rules for providing care across state lines, and
10 establishing a recognized standard that the practice of medicine is
11 tied to where the patient is located not where the provider is
12 located.

13 (4) The board of telemedicine must develop a ten-year strategic
14 plan to guide the use of telemedicine services and provide periodic
15 progress reports to the joint select committee on health care
16 oversight.

17 (5) The board of telemedicine may establish training requirements
18 consistent with section 4 of this act.

19 (6) Nominations for membership of the board of telemedicine must
20 be made to the secretary from the following organizations: The
21 medical quality assurance commission for a physician and physician
22 assistant, the board of osteopathic medicine and surgery for an
23 osteopathic physician and osteopathic physician assistant, the
24 nursing care quality assurance commission for an advance registered
25 nurse practitioner, the board of psychologists for a psychologist,
26 and the University of Washington telemedicine program. Each board or
27 commission shall consult with representatives of their stakeholder
28 groups to review the nominations. The secretary must identify an
29 appropriate technology representative familiar with the advancing
30 technology used in telemedicine. The secretary, or nominee, shall
31 serve on the board of telemedicine and coordinate board discussions.
32 Members of the board of telemedicine may nominate a chair.

33 **Sec. 3.** RCW 43.70.010 and 1995 c 269 s 2201 are each amended to
34 read as follows:

35 As used in this chapter, unless the context indicates otherwise:

36 (1) "Assessment" means the regular collection, analysis, and
37 sharing of information about health conditions, risks, and resources
38 in a community. Assessment activities identify trends in illness,
39 injury, and death and the factors that may cause these events. They

1 also identify environmental risk factors, community concerns,
2 community health resources, and the use of health services.
3 Assessment includes gathering statistical data as well as conducting
4 epidemiologic and other investigations and evaluations of health
5 emergencies and specific ongoing health problems;

6 (2) "Board" means the state board of health;

7 (3) "Department" means the department of health;

8 (4) "Information technologies" means technologies and devices
9 enabling secure electronic communications and information exchanges
10 between a licensee in one location and a patient in another location
11 with or without an intervening health care provider;

12 (5) "Licensee" means a medical physician or psychiatrist licensed
13 under chapter 18.71 RCW, physician assistant licensed under chapter
14 18.71A RCW, osteopathic physician licensed under chapter 18.57 RCW,
15 osteopathic physician assistant licensed under chapter 18.57A RCW,
16 advanced registered nurse practitioner licensed under chapter 18.79
17 RCW, psychologist licensed under chapter 18.83 RCW, hospital licensed
18 under chapter 70.41 RCW, and ambulatory surgical facility licensed
19 under chapter 70.230 RCW;

20 (6) "Policy development" means the establishment of social norms,
21 organizational guidelines, operational procedures, rules, ordinances,
22 or statutes that promote health or prevent injury, illness, or death;
23 ((and

24 (+5+)) (7) "Secretary" means the secretary of health; and

25 (8) "Telemedicine" means a licensee using electronic audio-visual
26 communications and information technologies or other means between a
27 licensee in one location and a patient in another location with or
28 without an intervening health care provider. Telemedicine does not
29 include the provision of medical services through an audio-only
30 telephone, email messages, facsimile transmission, United States mail
31 or other parcel service, or any combination thereof.

32 NEW SECTION. Sec. 4. A new section is added to chapter 43.70
33 RCW to read as follows:

34 (1) A licensee who uses telemedicine must be aware that
35 nationally recognized medical specialty organizations have
36 established comprehensive telemedicine practice guidelines which
37 address the clinical and technological aspects of telemedicine for
38 many medical specialties. A licensee who uses telemedicine shall
39 utilize evidence-based telemedicine practice guidelines, to the

1 degree they are available, to ensure patient safety, quality of care,
2 and positive outcomes.

3 (2) The board of telemedicine created in section 2 of this act
4 must develop training requirements as part of continuing education
5 requirements to assure licensee understanding of requirements
6 including, but not limited to, documentation, licensure requirements,
7 and other requirements established by the board of telemedicine and
8 reviewed by the legislature to ensure valid physician-patient
9 relationships and avoid errors in documentation and treatment that
10 may lead to an investigation into fraudulent activities.

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