

SENATE BILL REPORT

SB 6061

As Reported by Senate Committee On:
Health & Long Term Care, January 27, 2020

Title: An act relating to requiring training standards in providing telemedicine services.

Brief Description: Requiring training standards in providing telemedicine services.

Sponsors: Senators Becker and Conway.

Brief History:

Committee Activity: Health & Long Term Care: 1/15/20, 1/27/20 [DPS, DNP].

Brief Summary of First Substitute Bill

- Requires health care professionals who provide services through telemedicine, other than physicians and osteopathic physicians, to complete a telemedicine training.

SENATE COMMITTEE ON HEALTH & LONG TERM CARE

Majority Report: That Substitute Senate Bill No. 6061 be substituted therefor, and the substitute bill do pass.

Signed by Senators Cleveland, Chair; Randall, Vice Chair; O'Ban, Ranking Member; Conway, Dhingra, Keiser, Muzzall and Rivers.

Minority Report: Do not pass.

Signed by Senator Van De Wege.

Staff: Evan Klein (786-7483)

Background: In 2016, the Collaborative for the Advancement of Telemedicine (collaborative) was established. The collaborative is hosted by the University of Washington Telehealth Services and is comprised of one member from each of the two largest caucuses of the Senate and the House of Representatives, and representatives from the academic community, hospitals, clinics, and health care providers in primary care and specialty practices, carriers, and other interested parties. The collaborative must develop recommendations to improve reimbursement and access to services, including reviewing the

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originating site restrictions, provider to provider consultative models, and technologies and models of care not currently reimbursed. The collaborative must identify telemedicine best practices, guidelines, billing requirements, and fraud prevention developed by recognized medical and telemedicine organizations.

In 2018, the Legislature tasked the collaborative with reviewing the concept of telemedicine payment parity and developing recommendations on reimbursing for telemedicine at the same rate as if the provider provided services in person, for the treatment of certain conditions. The collaborative was also tasked with designing a training program to teach health care professionals about telemedicine and proper billing. Beginning January 1, 2020, health care professionals who provide services through telemedicine may complete the telemedicine training designed by the collaborative prior to providing services through telemedicine to patients in Washington State. If a health care professional completes training they must sign and retain an attestation.

Summary of Bill (First Substitute): Beginning January 1, 2021, health care professionals who provide clinical services through telemedicine, other than physicians and osteopathic physicians, must complete either:

- a telemedicine training made available by the telemedicine collaborative; or
- an alternative telemedicine training, which may include training offered by hospitals and other health care facilities, continuing education courses; or trainings developed by a health professional board or commission.

Health care professionals must sign and retain an attestation that they completed either the telemedicine collaborative or alternative telemedicine training.

EFFECT OF CHANGES MADE BY HEALTH & LONG TERM CARE COMMITTEE (First Substitute):

- Permits health care professionals to take an alternative training to meet the telemedicine training requirements.

Appropriation: None.

Fiscal Note: Available.

Creates Committee/Commission/Task Force that includes Legislative members: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony on Original Bill: *The committee recommended a different version of the bill than what was heard.* PRO: Last year this was a voluntary bill to get the training program started. This bill is designed to avoid lawsuits and ensure practitioners have the appropriate training to practice telemedicine. Doctors and osteopaths already have this training in their curriculums. This bill is not intended to create a barrier to a provider, but to give the providers the tools to bill under telemedicine. In the case of a lawsuit, providers will be able to point to the training they have accomplished. Providers

who have a training program available through their hospital or health center can take the training at those facilities.

CON: There are concerns that this is a requirement and that there is no exemption for providers with prior training or adequate experience.

OTHER: There are concerns that physicians who have been practicing for a long time are not up to date on training. All providers should be included in the bill, but an exemption should be designed for those providers that have received training recently. There is concern that a psychiatrist was not on the Collaborative when the training was provided, and that the training may have missed the nuances of practicing telemedicine for behavioral health. There was an agreement on the bill last year that the bill would be voluntary and it is not yet known whether the voluntary training that is to be implemented, will work and be effective.

Persons Testifying: PRO: Senator Randi Becker, Prime Sponsor.

CON: Devon Connor-Green, ARNPs United of Washington State.

OTHER: Lisa Thatcher, Washington State Hospital Association; Melissa Johnson, Washington State Nurses Association; Washington Association of Nurse Anesthetists; Physical Therapy Association of Washington; Melanie Smith, Washington State Psychological Association.

Persons Signed In To Testify But Not Testifying: No one.