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**SENATE BILL 5648**

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**State of Washington**

**66th Legislature**

**2019 Regular Session**

**By** Senators Keiser, King, Conway, Takko, Nguyen, Hunt, Cleveland, McCoy, and Van De Wege

1 AN ACT Relating to hospital privileges for advanced registered  
2 nurse practitioners and physician assistants; and amending RCW  
3 70.41.230.

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

5 **Sec. 1.** RCW 70.41.230 and 2016 c 68 s 6 are each amended to read  
6 as follows:

7 (1) Except as provided in subsection (3) of this section, prior  
8 to granting or renewing clinical privileges or association of any  
9 physician, physician assistant, or advanced registered nurse  
10 practitioner or hiring a physician, physician assistant, or advanced  
11 registered nurse practitioner who will provide clinical care under  
12 his or her license, a hospital or facility approved pursuant to this  
13 chapter shall request from the physician, physician assistant, or  
14 advanced registered nurse practitioner and the physician, physician  
15 assistant, or advanced registered nurse practitioner shall provide  
16 the following information:

17 (a) The name of any hospital or facility with or at which the  
18 physician, physician assistant, or advanced registered nurse  
19 practitioner had or has any association, employment, privileges, or  
20 practice during the prior five years: PROVIDED, That the hospital may  
21 request additional information going back further than five years,

1 and the physician, physician assistant, or advanced registered nurse  
2 practitioner shall use his or her best efforts to comply with such a  
3 request for additional information;

4 (b) Whether the physician, physician assistant, or advanced  
5 registered nurse practitioner has ever been or is in the process of  
6 being denied, revoked, terminated, suspended, restricted, reduced,  
7 limited, sanctioned, placed on probation, monitored, or not renewed  
8 for any professional activity listed in (b)(i) through (x) of this  
9 subsection, or has ever voluntarily or involuntarily relinquished,  
10 withdrawn, or failed to proceed with an application for any  
11 professional activity listed in (b)(i) through (x) of this subsection  
12 in order to avoid an adverse action or to preclude an investigation  
13 or while under investigation relating to professional competence or  
14 conduct:

15 (i) License to practice any profession in any jurisdiction;

16 (ii) Other professional registration or certification in any  
17 jurisdiction;

18 (iii) Specialty or subspecialty board certification;

19 (iv) Membership on any hospital medical staff;

20 (v) Clinical privileges at any facility, including hospitals,  
21 ambulatory surgical centers, or skilled nursing facilities;

22 (vi) Medicare, medicaid, the food and drug administration, the  
23 national institute of health (office of human research protection),  
24 governmental, national, or international regulatory agency, or any  
25 public program;

26 (vii) Professional society membership or fellowship;

27 (viii) Participation or membership in a health maintenance  
28 organization, preferred provider organization, independent practice  
29 association, physician-hospital organization, or other entity;

30 (ix) Academic appointment;

31 (x) Authority to prescribe controlled substances (drug  
32 enforcement agency or other authority);

33 (c) Any pending professional medical misconduct proceedings or  
34 any pending medical malpractice actions in this state or another  
35 state, the substance of the allegations in the proceedings or  
36 actions, and any additional information concerning the proceedings or  
37 actions as the physician, physician assistant, or advanced registered  
38 nurse practitioner deems appropriate;

39 (d) The substance of the findings in the actions or proceedings  
40 and any additional information concerning the actions or proceedings

1 as the physician, physician assistant, or advanced registered nurse  
2 practitioner deems appropriate;

3 (e) A waiver by the physician, physician assistant, or advanced  
4 registered nurse practitioner of any confidentiality provisions  
5 concerning the information required to be provided to hospitals  
6 pursuant to this subsection; and

7 (f) A verification by the physician, physician assistant, or  
8 advanced registered nurse practitioner that the information provided  
9 by the physician, physician assistant, or advanced registered nurse  
10 practitioner is accurate and complete.

11 (2) Except as provided in subsection (3) of this section, prior  
12 to granting privileges or association to any physician, physician  
13 assistant, or advanced registered nurse practitioner or hiring a  
14 physician, physician assistant, or advanced registered nurse  
15 practitioner who will provide clinical care under his or her license,  
16 a hospital or facility approved pursuant to this chapter shall  
17 request from any hospital with or at which the physician, physician  
18 assistant, or advanced registered nurse practitioner had or has  
19 privileges, was associated, or was employed, during the preceding  
20 five years, the following information concerning the physician,  
21 physician assistant, or advanced registered nurse practitioner:

22 (a) Any pending professional medical misconduct proceedings or  
23 any pending medical malpractice actions, in this state or another  
24 state;

25 (b) Any judgment or settlement of a medical malpractice action  
26 and any finding of professional misconduct in this state or another  
27 state by a licensing or disciplinary board; and

28 (c) Any information required to be reported by hospitals pursuant  
29 to RCW 18.71.0195.

30 (3) In lieu of the requirements of subsections (1) and (2) of  
31 this section, when granting or renewing privileges or association of  
32 any physician, physician assistant, or advanced registered nurse  
33 practitioner providing telemedicine or store and forward services, an  
34 originating site hospital may rely on a distant site hospital's  
35 decision to grant or renew clinical privileges or association of the  
36 physician, physician assistant, or advanced registered nurse  
37 practitioner if the originating site hospital obtains reasonable  
38 assurances, through a written agreement with the distant site  
39 hospital, that all of the following provisions are met:

1 (a) The distant site hospital providing the telemedicine or store  
2 and forward services is a medicare participating hospital;

3 (b) Any physician, physician assistant, or advanced registered  
4 nurse practitioner providing telemedicine or store and forward  
5 services at the distant site hospital will be fully privileged to  
6 provide such services by the distant site hospital;

7 (c) Any physician, physician assistant, or advanced registered  
8 nurse practitioner providing telemedicine or store and forward  
9 services will hold and maintain a valid license to perform such  
10 services issued or recognized by the state of Washington; and

11 (d) With respect to any distant site physician, physician  
12 assistant, or advanced registered nurse practitioner who holds  
13 current privileges at the originating site hospital whose patients  
14 are receiving the telemedicine or store and forward services, the  
15 originating site hospital has evidence of an internal review of the  
16 distant site physician's, physician assistant's, or advanced  
17 registered nurse practitioner's performance of these privileges and  
18 sends the distant site hospital such performance information for use  
19 in the periodic appraisal of the distant site physician, physician  
20 assistant, or advanced registered nurse practitioner. At a minimum,  
21 this information must include all adverse events, as defined in RCW  
22 70.56.010, that result from the telemedicine or store and forward  
23 services provided by the distant site physician, physician assistant,  
24 or advanced registered nurse practitioner to the originating site  
25 hospital's patients and all complaints the originating site hospital  
26 has received about the distant site physician, physician assistant,  
27 or advanced registered nurse practitioner.

28 (4) (a) The medical quality assurance commission or the board of  
29 osteopathic medicine and surgery shall be advised within thirty days  
30 of the name of any physician or physician assistant denied staff  
31 privileges, association, or employment on the basis of adverse  
32 findings under subsection (1) of this section.

33 (b) The nursing care quality assurance commission shall be  
34 advised within thirty days of the name of any advanced registered  
35 nurse practitioner denied staff privileges, association, or  
36 employment on the basis of adverse findings under subsection (1) of  
37 this section.

38 (5) A hospital or facility that receives a request for  
39 information from another hospital or facility pursuant to subsections  
40 (1) through (3) of this section shall provide such information

1 concerning the physician, physician assistant, or advanced registered  
2 nurse practitioner in question to the extent such information is  
3 known to the hospital or facility receiving such a request, including  
4 the reasons for suspension, termination, or curtailment of employment  
5 or privileges at the hospital or facility. A hospital, facility, or  
6 other person providing such information in good faith is not liable  
7 in any civil action for the release of such information.

8 (6) Information and documents, including complaints and incident  
9 reports, created specifically for, and collected, and maintained by a  
10 quality improvement committee are not subject to discovery or  
11 introduction into evidence in any civil action, and no person who was  
12 in attendance at a meeting of such committee or who participated in  
13 the creation, collection, or maintenance of information or documents  
14 specifically for the committee shall be permitted or required to  
15 testify in any civil action as to the content of such proceedings or  
16 the documents and information prepared specifically for the  
17 committee. This subsection does not preclude: (a) In any civil  
18 action, the discovery of the identity of persons involved in the  
19 medical care that is the basis of the civil action whose involvement  
20 was independent of any quality improvement activity; (b) in any civil  
21 action, the testimony of any person concerning the facts which form  
22 the basis for the institution of such proceedings of which the person  
23 had personal knowledge acquired independently of such proceedings;  
24 (c) in any civil action by a health care provider regarding the  
25 restriction or revocation of that individual's clinical or staff  
26 privileges, introduction into evidence information collected and  
27 maintained by quality improvement committees regarding such health  
28 care provider; (d) in any civil action, disclosure of the fact that  
29 staff privileges were terminated or restricted, including the  
30 specific restrictions imposed, if any and the reasons for the  
31 restrictions; or (e) in any civil action, discovery and introduction  
32 into evidence of the patient's medical records required by regulation  
33 of the department of health to be made regarding the care and  
34 treatment received.

35 (7) Hospitals shall be granted access to information held by the  
36 medical quality assurance commission (~~and~~), the board of  
37 osteopathic medicine and surgery, and the nursing care quality  
38 assurance commission pertinent to decisions of the hospital regarding  
39 credentialing and recredentialing of practitioners.

1           (8) Violation of this section shall not be considered negligence  
2 per se.

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