

WASHINGTON ACADEMY OF FAMILY PHYSICIANS

Weekly Report

PREPARED BY: CAPITOL STRATEGIES

Wednesday, April 8, 2009

COMMITTEE WORK DONE - FINAL FLOOR ACTION AHEAD

The fiscal committees completed their work yesterday and will not meet again except to handle bills necessary to implement the budget. The House Ways and Means Committee passed out a general fund budget. They cut roughly four billion dollars and funded the remaining five million dollar deficit with federal stimulus money and money taken from dedicated state accounts. There will likely be further amendments on the floor. Discussions will take place between the House and the Senate regarding the Capital and Transportation budgets to iron out the differences. The House and Senate have until April 17 to pass bills that are not related to the budget. They have until April 26 to finish work on the budgets and bills necessary to implement the budget.

WAFP BILLS MOVING THROUGH SYSTEM

The primary care reimbursement study bill, SB 5891, is on the House floor calendar. SB 5892, the Governor's prescription drug bill, will likely pass despite opposition from several new groups. The budget assumes a certain level of savings from the bill. SB 5945 deals with health care reform. It is also controversial because it now asks the state to try to obtain a waiver on ERISA protected plans.

The budget will impact WAFP members with some reductions in reimbursement for providers and reductions in state funded health care. Many worthwhile programs to educate and evaluate health conditions are likely to be cut. Federal stimulus money has shored up Medicaid, which is the basic state health program for many Washington residents.

BILL TRACKING SUMMARY

HIGH PRIORITY BILLS

	<u>Sponsor</u>	<u>Position</u>	<u>Status</u>
1244 Making 2009-2011 operating appropriations.	Linville	Monitor	H, Exec Action
ES1694 Addressing fiscal matters for the 2007-2009 biennium. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Linville	Monitor	C 4 L 09
5600 Making 2009-2011 operating appropriations.	Prentice	Monitor	S, Ways & Means
S5891 Establishing a forum for testing primary care medical home reimbursement pilot projects. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Keiser	Support	H, 2nd Reading
2S5945 Creating the Washington health partnership plan. (DIGEST OF PROPOSED 2ND SUBSTITUTE)	Keiser	Monitor	H, Rules R +

MEDIUM PRIORITY BILLS

S1402 Restricting contact with medical providers after appeals have been filed under industrial insurance. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Williams	Oppose	S, 2nd Reading +
ES2128 Concerning health care coverage for children. (AS OF HOUSE 2ND READING 3/6/2009)	Seaquist	Monitor	S, Rules 2 +

2S5346	Concerning administrative procedures for payors and providers of health care services. (DIGEST OF PROPOSED 2ND SUBSTITUTE)	Keiser	Support	H, Rules R
S5501	Concerning the secure exchange of health information. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Keiser	Monitor	H, Rules R +
ES5889	Providing flexibility in the education system. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Hobbs	Monitor	H, Rules R +
ES5892	Concerning prescription drug use in state purchased health care programs. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Keiser	Neutral	H, Ways & Means +
8003	Requesting that Congress issue a date at which health information technology must comply with a uniform national standard of interoperability.	Pflug	Monitor	H, Passed 3rd +

LOW PRIORITY BILLS

1322	Repealing scoliosis screening in schools.	Green	Monitor	Del to Gov
ES1401	Concerning the standard health questionnaire. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Cody	Monitor	Del to Gov
1596	Protecting a woman's right to breastfeed in a place of public resort, accommodation, assemblage, or amusement.	Green	Monitor	S, Passed 3rd
ES1703	Concerning child immunization exemptions. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Cody	Monitor	S, 2nd Reading +
2S1899	Concerning physicians holding a retired active license. (DIGEST OF PROPOSED 2ND SUBSTITUTE)	Warnick	Monitor	S, 2nd Reading
2014	Requiring tamper-resistant prescription pads.	Kelley	Monitor	S, Rules 2G
2025	Sharing health care information.	Orwall	Monitor	S, Passed 3rd
ES2105	Concerning diagnostic imaging services. (AS OF HOUSE 2ND READING 3/10/2009)	Cody	Monitor	S, Rules 2G
2117	Modifying the basic health plan.	Cody	Monitor	S, Ways & Means +
S5056	Requiring health care professionals to report patient information in cases of violent injury. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Brandland	Monitor	H, Passed 3rd
S5360	Establishing a community health care collaborative grant program. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Keiser	Monitor	H, Rules R +
ES5406	Concerning the standard health questionnaire. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Keiser	Monitor	H, Rules R
S5436	Concerning direct patient-provider primary care practice arrangements. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Murray	Support	H, 2nd Reading +
S5480	Creating the Washington health care discount plan organization act. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Delvin	Monitor	H, Rules R +
2S5491	Requiring school districts or educational service districts to purchase employee health insurance coverage through the state health care authority. (DIGEST OF PROPOSED 2ND SUBSTITUTE)	Brandland	Monitor	H, Rules R +
S5588	Administering, suspending, and eliminating boards and commissions. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Pridemore	Monitor	S, Rules 2 +
ES5763	Requiring the adoption of policies for the management of concussion and head injury in youth sports. (AS OF SENATE 2ND READING 3/9/2009)	King	Monitor	H, Rules R +
S5994	Eliminating boards and commissions on June 30, 2010. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Pridemore	Monitor	S, Rules 2G +
S5995	Eliminating certain boards, committees, and commissions and the consolidation and transfer of certain duties effective June 30, 2009. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Pridemore	Monitor	S, 2nd Reading +

DEAD BILLS

1047	Establishing the Family Medicine residency training program.	Hasegawa	Neutral	H, HC/Wellness
2S1165	Providing for the safe collection and disposal of unwanted drugs from residential sources through a producer provided and funded product stewardship program. (DIGEST OF PROPOSED 2ND SUBSTITUTE)	Morrell	Monitor	H, Rules C +
1237	Changing the implementation date and benefit design of nonsubsidized state health coverage for children.	Hinkle	Concerns	H, HC/Wellness
1255	Eliminating the business and occupation tax deduction for initiation fees and dues.	Moeller	Monitor	H, Finance
S1282	Creating a school-based influenza vaccination pilot program. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	White	Monitor	H, HHS Apps +
1307	Concerning public health financing.	Moeller	Monitor	H, HC/Wellness
1337	Concerning developmental screenings through medicaid.	Green	Monitor	H, HC/Wellness
1342	Creating a pilot program to screen children for lead poisoning.	Hudgins	Monitor	H, Env Health
1345	Regarding lead blood level assessments.	Hudgins	Monitor	H, Env Health
1396	Concerning referral procedures for medical eye care.	Green	Monitor	H, HC/Wellness
1400	Enacting the uniform emergency volunteer health practitioners act.	Cody	Monitor	H, Pub Safety
S1412	Concerning health benefit plan coverage of neurodevelopmental therapies. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Kagi	Monitor	H, Ways & Means
1424	Concerning health professions discipline.	Appleton	Monitor	H, HC/Wellness
1459	Concerning direct patient-provider primary care practice arrangements.	Green	Support	H, HC/Wellness
S1493	Marketing prescription drugs. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Pedersen	Support	H, Rules R +
1519	Requiring language access services for persons with limited English proficiency in health care and insurance matters.	Hasegawa	Monitor	H, HC/Wellness
1611	Concerning online access to the University of Washington health sciences library by certain health care providers.	Morrell	Monitor	H, HC/Wellness
1620	Establishing a community health care collaborative grant program.	Kenney	Monitor	H, HC/Wellness
S1647	Concerning administrative procedures for payors and providers of health care services. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Driscoll	Monitor	S, Hea/L-T Care
1861	Concerning alternative health care practitioners.	Chase	Monitor	H, HC/Wellness
1892	Concerning health care financing.	Appleton	Monitor	H, HC/Wellness
1918	Concerning physical therapists.	Liias	Monitor	H, HC/Wellness
2S1985	Concerning public health financing. (DIGEST OF PROPOSED 2ND SUBSTITUTE)	Moeller	Monitor	S, Ways & Means +
2073	Consenting to medical care by a minor.	Wallace	Monitor	H, Judiciary
2087	Eliminating certain boards, committees, and commissions and the transfer of certain duties effective June 30, 2009.	Springer	Monitor	H, SGTribalAff
2S2114	Establishing a forum for testing primary care medical home reimbursement pilot projects. (DIGEST OF PROPOSED 2ND SUBSTITUTE)	Seaquist	Monitor	S, Hea/L-T Care
2121	Establishing the guaranteed health benefit program act.	Morrell	Monitor	H, HC/Wellness
2127	Concerning health care coverage for children.	Seaquist	Monitor	H, HC/Wellness
2151	Eliminating boards and commissions on June 30, 2010.	Springer	Monitor	H, SGTribalAff
2155	Concerning children's health care coverage.	Seaquist	Monitor	H, HC/Wellness
S2160	Concerning health carrier payment of wellness incentives. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Driscoll	Monitor	S, Passed 3rd
2161	Concerning support services provided under the maternity care access program.	Cody	Monitor	H, HC/Wellness

2174	Concerning health care.	Eddy	Monitor	H, HC/Wellness
2197	Abolishing the department of social and health services and creating new departments to take over its functions.	Armstrong	Monitor	H, HHS Apps
2213	Concerning health care contracts.	Green	Support	H, HC/Wellness
5052	Concerning health insurance for young adults.	Parlette	Monitor	S, Hea/L-T Care
5140	Requiring language access services for persons with limited English proficiency in health care and insurance matters.	Shin	Monitor	S, Hea/L-T Care
5202	Changing the implementation date and benefit design of nonsubsidized state health coverage for children.	Franklin	Concerns	S, Hea/L-T Care
5203	Regarding insurance coverage for autism spectrum disorders.	Hobbs	Monitor	S, Hea/L-T Care
5230	Concerning physical therapists.	Fairley	Monitor	S, Hea/L-T Care
5279	Providing for the safe collection and disposal of unwanted drugs from residential sources through a producer provided and funded product stewardship program.	Kline	Monitor	S, Hea/L-T Care
5372	Creating a school-based influenza vaccination pilot program.	Jacobsen	Monitor	S, Hea/L-T Care
5457	Concerning vaccines.	Oemig	Oppose	S, Hea/L-T Care
2S5484	Concerning developmental screening. (DIGEST OF PROPOSED 2ND SUBSTITUTE)	Marr	Monitor	H, HC/Wellness +
S5497	Concerning telemedicine. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Marr	Monitor	S, Rules X
ES5502	Establishing the primary care physician conditional tuition waiver program. (AS OF SENATE 2ND READING 3/9/2009)	Keiser	Support	H, Hi Ed
5627	Restricting contact with medical providers after appeals have been filed under industrial insurance.	McDermott	Monitor	S, Lab/Comm/CP
5707	Concerning child immunization exemptions.	Keiser	Monitor	S, Hea/L-T Care
S5730	Enhancing federal financing of health coverage. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Keiser	Monitor	S, Ways & Means +
5755	Concerning alternative health care practitioners.	Oemig	Monitor	S, Hea/L-T Care
5756	Concerning hazardous substance information.	Oemig	Monitor	S, Env/Water/Ener
5772	Concerning the shortage of health care professionals.	Shin	Monitor	S, Hea/L-T Care
S5798	Concerning medical marijuana. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Kohl-Welles	Monitor	S, Rules X
S5826	Requiring tamper-resistant prescription pads. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Keiser	Monitor	H, HHS Apps
5841	Delaying the implementation of the health insurance partnership.	Keiser	Monitor	S, Ways & Means
5848	Increasing immunization.	Keiser	Monitor	S, Hea/L-T Care
ES5880	Providing flexibility in the education system. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	McAuliffe	Monitor	H, Education +
S5898	Creating a health care council. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Pflug	Monitor	S, Ways & Means +
5947	Reforming the health care system in Washington state.	Pflug	Monitor	S, Hea/L-T Care
5998	Concerning health carrier payment of wellness incentives.	Keiser	Monitor	S, Hea/L-T Care
2S6038	Concerning the basic health plan. (DIGEST OF PROPOSED 2ND SUBSTITUTE)	Keiser	Monitor	S, 2nd Reading +
6041	Creating a statewide immunization registry.	Pflug	Monitor	S, Hea/L-T Care
6094	Concerning health care financing.	Jacobsen	Monitor	S, Hea/L-T Care

BILL TRACKING SUMMARY

HIGH PRIORITY BILLS

		<u>Sponsor</u>	<u>Position</u>	<u>Status</u>
1244	Making 2009-2011 operating appropriations. Makes 2009-2011 operating appropriations. The Legislature will make adjustments to current programs and provider payments of interest to WAFP. Reductions or curtailments of planned expansions is highly likely.	Linville	Monitor	H, Exec Action
ES1694	Addressing fiscal matters for the 2007-2009 biennium. (DIGEST OF PROPOSED 1ST SUBSTITUTE) Addresses fiscal matters for the 2007-2009 biennium. Makes reductions in the current biennium.	Linville	Monitor	C 4 L 09
5600	Making 2009-2011 operating appropriations. Makes 2009-2011 operating appropriations. This is the Governor's budget	Prentice	Monitor	S, Ways & Means
S5891	Establishing a forum for testing primary care medical home reimbursement pilot projects. (DIGEST OF PROPOSED 1ST SUBSTITUTE) Requires the health care authority and the department of social and health services to design, oversee implementation of, and evaluate one or more primary care medical home reimbursement pilot projects in the state to include as participants public payors, private health carriers, third-party purchasers, and health care providers. Expires July 1, 2013.	Keiser	Support	H, 2nd Reading
2S5945	Creating the Washington health partnership plan. (DIGEST OF PROPOSED 2ND SUBSTITUTE) Creates the Washington health partnership to attain the following goals: (1) By 2012, every resident of this state shall have access to affordable, comprehensive health care services; (2) Services shall be provided through the private health care sector; (3) The health reform plan shall maintain and improve choice of health care providers and high quality health care services in this state; and (4) The health reform plan shall include cost-containment strategies that retain and assure affordable coverage for all Washingtonians. Requires the department of social and health services to: (1) Submit a request to the federal department of health and human services to expand and revise the medical assistance program as codified in Title XIX of the federal social security act; (2) Submit a Title XXI state plan amendment or waiver to the federal department of health and human services to allow Title XXI children to participate in the department's employer-sponsored program, as may be necessary; (3) Require families to enroll in available employer-sponsored coverage when it is cost-effective for the state to do so, to the extent allowable under federal law; (4) Continue to submit applications for the family planning waiver program; and (5) Submit a request to the federal department of health and human services to amend the current family planning waiver program. Requires the department of ecology, in collaboration with the department of social and health services, to maximize the use of federal funds, including section 317 of the federal public health services act direct assistance as well as federal funds that may become available under the American recovery and reinvestment act, in order to continue to provide immunizations for low-income, nonmedicaid eligible children up to three hundred percent of the federal poverty level in state-sponsored health programs.	Keiser	Monitor	H, Rules R +

MEDIUM PRIORITY BILLS

S1402	Restricting contact with medical providers after appeals have been filed under industrial insurance. (DIGEST OF PROPOSED 1ST SUBSTITUTE) Restricts contact with medical providers after appeals have been filed under industrial insurance. Provides that the act applies to orders entered on or after the effective date of the act.	Williams	Oppose	S, 2nd Reading +
ES2128	Concerning health care coverage for children. (AS OF HOUSE 2ND READING 3/6/2009) Requires the department of social and health services to manage its outreach, application, and renewal procedures with the goal of achieving year by year improvements in enrollment, enrollment rates, renewals, and renewal rates in order to qualify for enhanced federal funding. Delays the availability of children's health insurance until January 1, 2010, for children in families with household income over three hundred percent of the federal poverty level. Renames the children's health program as the apple health for kids program.	Seaquist	Monitor	S, Rules 2 +
2S5346	Concerning administrative procedures for payors and providers of health care services. (DIGEST OF PROPOSED 2ND SUBSTITUTE) Finds that: (1) The health care system in the nation and in Washington state costs nearly twice as much per capita as other industrialized nations; and (2) The fragmentation and variation in administrative processes prevalent in our health care system contribute to the high cost of health care, putting it increasingly beyond the reach of small businesses and individuals in Washington. Declares an intent to: (1) Establish streamlined and uniform procedures for payors and providers of health care services in the state; and (2) Foster a continuous quality improvement cycle to simplify health care	Keiser	Support	H, Rules R

administration.

Directs the department of social and health services, the department of labor and industries, and the health care authority to cooperate with the insurance commissioner and adopt the processes, guidelines, and standards to streamline health care administration pursuant to the act. Directs the insurance commissioner to designate one or more lead organizations to coordinate development of processes, guidelines, and standards to streamline health care administration and to be adopted by payors and providers of health care services operating in the state.

S5501	Concerning the secure exchange of health information. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Keiser	Monitor	H, Rules R +
	Requires the administrator of the state health care authority to designate one or more lead organizations to coordinate development of processes, guidelines, and standards to: (1) Improve patient access to and control of their own health care information, enabling their active participation in their own health care; and (2) Implement methods for the secure exchange of clinical data as a means to promote continuity of care, quality of care, patient safety, and efficiency in medical practices. Requires the office of financial management, within available funds, to contract with an independent research organization to evaluate implementation of the act.			
ES5889	Providing flexibility in the education system. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Hobbs	Monitor	H, Rules R +
	Provides flexibility in the education system to reduce costs. Keeps the requirement for school visual and hearing testing for all students and allows eye health providers to donate their time for that purpose.			
ES5892	Concerning prescription drug use in state purchased health care programs. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Keiser	Neutral	H, Ways & Means +
	This is the Governor's bill to reduce prescription costs for state funded health care programs. Authorizes state purchased health care programs to maximize appropriate prescription drug use in a cost-effective manner. Deletes the requirement for state funded prescriptions to be filled with a brand name drug if the provider writes "dispense as written" on the prescription. Requires starting with generic prescriptions before using brand name. Makes it easier to list generic drugs on the formulary list. Restricts prescribing off label.			
8003	Requesting that Congress issue a date at which health information technology must comply with a uniform national standard of interoperability.	Pflug	Monitor	H, Passed 3rd +
	Urges Congress to institute a date certain, no later than January 1, 2013, at which time all vendors, suppliers, and manufacturers of health information technology must comply with a uniform national standard of interoperability, such that all electronic medical and health records can be readily shared and accessed across all health care providers and institutions while at the same time preserving the proprietary nature of health information technology producers that will encourage future innovation and competition.			

LOW PRIORITY BILLS

1322	Repealing scoliosis screening in schools. Repeals scoliosis screening in schools.	Green	Monitor	Del to Gov
ES1401	Concerning the standard health questionnaire. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Cody	Monitor	Del to Gov
	Modifies the standard health questionnaire in regard to the basic health plan and an individual health benefit plan.			
1596	Protecting a woman's right to breastfeed in a place of public resort, accommodation, assemblage, or amusement.	Green	Monitor	S, Passed 3rd
	Protects the right of a mother to breastfeed in a place of public resort, accommodation, assemblage, or amusement.			
ES1703	Concerning child immunization exemptions. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Cody	Monitor	S, 2nd Reading +
	Requires certain documents for child immunization exemptions. Adds a requirement that the parent seeking a waiver from the immunization requirement for school admission have a written form from a medical provider documenting that he/she has received information about the benefits and risks of immunizations.			
2S1899	Concerning physicians holding a retired active license. (DIGEST OF PROPOSED 2ND SUBSTITUTE)	Warnick	Monitor	S, 2nd Reading
	Modifies continuing education requirements for physicians holding a retired active license. Exempts a physician who resides and practices in this state and who obtains or renews a retired active license from the licensing fees imposed under RCW 18.71.080. Requires the medical quality assurance commission to consider amending its rules on retired active physicians in a manner that improves access to health care services for the citizens of this state without compromising public safety.			
2014	Requiring tamper-resistant prescription pads.	Kelley	Monitor	S, Rules 2G

Requires every prescription written in this state by a licensed practitioner to be written on a tamper-resistant prescription pad or paper approved by the board of pharmacy.

2025	Sharing health care information. Authorizes treatment records of a person to be released without informed written consent to a licensed health care professional who is providing or anticipates providing health care to a person with both medical and behavioral health care needs, for the purpose of coordinating care and treatment of that person.	Orwall	Monitor	S, Passed 3rd
ES2105	Concerning diagnostic imaging services. (AS OF HOUSE 2ND READING 3/10/2009) Directs the department of labor and industries to convene a work group to analyze and identify evidence-based best practice guidelines or protocols applicable to advanced diagnostic imaging services and any decision and support tools available to implement the guidelines or protocols. Requires all state purchased health care programs, for those health care services purchased directly by the state, to implement evidence-based best practice guidelines or protocols applicable to advanced diagnostic imaging services, and the decision support tools to implement the guidelines or protocols.	Cody	Monitor	S, Rules 2G
2117	Modifying the basic health plan. Revises the basic health plan to enable unemployed workers to maintain their health and avoid the risk of financial hardship related to unpaid medical bills as they search for new employment.	Cody	Monitor	S, Ways & Means +
S5056	Requiring health care professionals to report patient information in cases of violent injury. (DIGEST OF PROPOSED 1ST SUBSTITUTE) Requires health care professionals to report violent injuries and to preserve evidence for law enforcement. This bill is supported by law enforcement. It will primarily affect hospitals and first responders.	Brandland	Monitor	H, Passed 3rd
S5360	Establishing a community health care collaborative grant program. (DIGEST OF PROPOSED 1ST SUBSTITUTE) Authorizes the Washington state health care authority, within funds appropriated for community health care collaborative grants, to award grants for community-based health care collaborative programs that increase access to appropriate, affordable health care for Washington residents, consistent with requirements established by the act. Establishes the community health care collaborative grant program to further the efforts of community-based coalitions to increase access to appropriate, affordable health care for Washington residents, particularly employed low-income persons and children in school who are uninsured and underinsured.	Keiser	Monitor	H, Rules R +
ES5406	Concerning the standard health questionnaire. (DIGEST OF PROPOSED 1ST SUBSTITUTE) Modifies the standard health questionnaire in regard to the basic health plan and an individual health benefit plan.	Keiser	Monitor	H, Rules R
S5436	Concerning direct patient-provider primary care practice arrangements. (DIGEST OF PROPOSED 1ST SUBSTITUTE) Modifies provisions regarding payment arrangements involving direct patient-provider primary care practices. Allows the direct patient-provider to accept payment from third party entities and from self-insured plans. Modifies what they can pay for to include all xrays and lab work; current law restricts these to wellness exams.	Murray	Support	H, 2nd Reading +
S5480	Creating the Washington health care discount plan organization act. (DIGEST OF PROPOSED 1ST SUBSTITUTE) Creates the Washington health care discount plan organization act to promote the public interest by establishing standards for discount plan organizations, to protect consumers from unfair or deceptive marketing, sales, or enrollment practices, and to facilitate consumer understanding of the role and function of discount plan organizations in providing discounts on charges for health care services. Requires a person to obtain a license from the insurance commissioner to operate as a discount plan organization before conducting discount plan business to which the act applies. Requires discount plans to have signed agreements with health care providers and that health care providers cannot charge more than the agreed upon rate. This is a Insurance Commissioner request bill.	Delvin	Monitor	H, Rules R +
2S5491	Requiring school districts or educational service districts to purchase employee health insurance coverage through the state health care authority. (DIGEST OF PROPOSED 2ND SUBSTITUTE) Requires the health care authority, in coordination with the office of the superintendent of public instruction, to convene a work group to develop a strategy to reduce the cost of providing health benefits for K-12 employees. These employees would transition their coverage to the state PEBB system.	Brandland	Monitor	H, Rules R +
S5588	Administering, suspending, and eliminating boards and commissions. (DIGEST OF PROPOSED 1ST SUBSTITUTE) Administers, suspends, and eliminates boards and commissions. Requires the governor, by July 1, 2010, to recommend to the legislature which of the boards and commissions, created either by statute or by action of the executive branch, shall receive state funding, those whose activities shall be suspended, and those which shall be terminated either by legislative or executive branch action.	Pridemore	Monitor	S, Rules 2 +

ES5763	Requiring the adoption of policies for the management of concussion and head injury in youth sports. (AS OF SENATE 2ND READING 3/9/2009)	King	Monitor	H, Rules R +
	Directs each school district's board of directors to work in consort with the Washington interscholastic activities association to develop guidelines and other pertinent information and forms to inform and educate coaches, youth athletes, and their parents and/or guardians of the nature and risk of concussion and head injury including continuing to play after concussion or head injury. Requires a release from a health care provider after an obvious injury.			
S5994	Eliminating boards and commissions on June 30, 2010. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Pridemore	Monitor	S, Rules 2G +
	Eliminates boards and commissions on June 30, 2010. Declares that while advisory boards, committees, and commissions be eliminated, agencies should identify new, less costly, and more effective opportunities to ensure a broad range of citizen participation is provided and that all reasonable efforts are made to ensure that channels are maintained for vital input from the citizens of Washington. Ample time is provided for the advisory groups to complete work in progress and for agencies to develop alternative communication strategies. Eliminates several health care related boards and advisory groups, including the UWSOM Family Practice Education Advisory Committee.			
S5995	Eliminating certain boards, committees, and commissions and the consolidation and transfer of certain duties effective June 30, 2009. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	Pridemore	Monitor	S, 2nd Reading +
	Eliminates certain boards, committees, and commissions and transfers certain duties by June 30, 2009. Includes the Citizens' Work Group on health Care Reform.			

DEAD BILLS

1047	Establishing the Family Medicine residency training program.	Hasegawa	Neutral	H, HC/Wellness
	Establishes a Family Medicine residency training grant program. Requires the joint legislative audit and review committee to conduct a performance audit and evaluation of the Family Medicine residency training grant program every five years. Creates the Family Medicine residency training account. Imposes an additional tax on the sale, use, consumption, handling, possession, or distribution of cigarettes, in an amount equal to seven and one-half cents per pack. SB 5502 includes the provisions of this bill, but does not include the new account or new tax. This bill is not likely to move.			
2S1165	Providing for the safe collection and disposal of unwanted drugs from residential sources through a producer provided and funded product stewardship program. (DIGEST OF PROPOSED 2ND SUBSTITUTE)	Morrell	Monitor	H, Rules C +
	Providing for the safe collection and disposal of unwanted drugs from residential sources through a producer provided and funded product stewardship program. Requires every producer of covered products sold in or into Washington state to participate in a product stewardship program for unwanted products from residential sources. Allows the director of the department of ecology to lend money from the state toxics control account to the pharmaceutical product stewardship account if necessary to ensure that money is available in the pharmaceutical product stewardship program account for the initial administration of the product stewardship program for unwanted drugs from residential sources. Provides penalties.			
1237	Changing the implementation date and benefit design of nonsubsidized state health coverage for children.	Hinkle	Concerns	H, HC/Wellness
	Revises the implementation date, benefit design, and obligations of participating managed health care systems for nonsubsidized state health coverage for children. Moves out the start date for covering children in the 250 to 300% poverty range from 2009 to 2010.			
1255	Eliminating the business and occupation tax deduction for initiation fees and dues.	Moeller	Monitor	H, Finance
	Eliminates the business and occupation tax deduction for initiation fees and dues.			
S1282	Creating a school-based influenza vaccination pilot program. (DIGEST OF PROPOSED 1ST SUBSTITUTE)	White	Monitor	H, HHS Apps +
	Requires the department of health and the office of the superintendent of public instruction to jointly establish a school-based influenza vaccination pilot program using both killed vaccine and live attenuated vaccine in one urban school district and one rural school district. Directs the department of health to convene a working group to plan the school-based influenza vaccination pilot program. Expires July 1, 2011.			
1307	Concerning public health financing.	Moeller	Monitor	H, HC/Wellness
	Declares an intent to help provide local health jurisdictions with a more stable dedicated funding system by authorizing local option revenue sources and creating a single account through which all state funding for public health will be distributed. Declares that local health jurisdictions receiving state funds be held accountable for the use of those funds based on the minimum standards of public health protection in the state's public health improvement plan. Authorizes a			

county to impose a tax on the acquisition, receipt, or possession of bottled water in the county, subject to certain requirements. Directs the secretary of the department of health to establish a review process for determining whether a local health jurisdiction is in substantial compliance with the minimum standards for public health protection established under RCW 43.70.520. Requires the secretary of the department of health to notify the local health jurisdiction, in writing, and the state treasurer when the secretary finds that a local health jurisdiction is not in substantial compliance with the minimum standards for public health protection established under RCW 43.70.520.

Authorizes the secretary of the department of health to exempt a local health jurisdiction from the review process if the jurisdiction is accredited by an organization whose accreditation standards meet or exceed the minimum standards for public health protection established under RCW 43.70.520. Creates the public health improvement account.

1337	Concerning developmental screenings through medicaid. Requires the department of social and health services to adopt a rule specifying: (1) Which developmental screening tools may be ordered for minors eligible for medical assistance; and (2) The frequency of administering these developmental screens.	Green	Monitor	H, HC/Wellness
1342	Creating a pilot program to screen children for lead poisoning. Creates a pilot program to screen children for lead poisoning.	Hudgins	Monitor	H, Env Health
1345	Regarding lead blood level assessments. Directs the Department of Health to give high priority to lead blood level assessments in children.	Hudgins	Monitor	H, Env Health
1396	Concerning referral procedures for medical eye care. Requires a carrier as defined in RCW 48.43.005 to provide enrollees with direct access to the participating medical eye care provider of the enrollee's choice for covered medical eye care without the necessity of prior referral.	Green	Monitor	H, HC/Wellness
1400	Enacting the uniform emergency volunteer health practitioners act. Enacts the uniform emergency volunteer health practitioners act. Expands definitions and conditions for emergency volunteer health practitioners who assist in emergencies. Requires registering with the Military Department. Allows practitioners from out of state to participate.	Cody	Monitor	H, Pub Safety
S1412	Concerning health benefit plan coverage of neurodevelopmental therapies. (DIGEST OF PROPOSED 1ST SUBSTITUTE) This bill deals with autism spectrum disorders. It requires health plans for public employees and all group health plans that are established or renewed on or after January 1, 2011, to include coverage for neurodevelopmental therapies for covered individuals under eighteen years of age.	Kagi	Monitor	H, Ways & Means
	It directs the department of health to: (1) Conduct a review under chapter 18.120 RCW to determine the most appropriate means to regulate persons who utilize applied behavior analysis for the treatment of persons with an autism spectrum disorder. In developing its recommendations, the department shall consult with interested organizations and shall give strong consideration to certification criteria established by the institute for applied behavior analysis; and (2) Identify therapies for the treatment of autism spectrum disorders in individuals under eighteen years of age that should be considered to be in accordance with generally accepted standards of practice, as that term is defined in section 2 (5) and section 3 (5) of the act. Provides an effective date of January 1, 2011, for section 6 of the act.			
1424	Concerning health professions discipline. Allows health care professionals to request that a particular person conduct a mental or physical examination in the event of an investigation of the health care professional's skill or safety. Requires a new license to be issued to health care professionals found to have not committed unprofessional conduct.	Appleton	Monitor	H, HC/Wellness
1459	Concerning direct patient-provider primary care practice arrangements. Modifies provisions regarding payment arrangements involving direct patient-provider primary care practices. Allows the direct patient-provider to accept payment from third party entities and from self-insured plans. Modifies what they can pay for to include all xrays and lab work; current law restricts these to wellness exams.	Green	Support	H, HC/Wellness
S1493	Marketing prescription drugs. (DIGEST OF PROPOSED 1ST SUBSTITUTE) Declares an intent to protect the confidentiality of prescribing information, safeguard the integrity of the doctor-patient relationship, and contain health care costs by prohibiting conduct involving the sale, disclosure, and use of individual patient prescription drug data for marketing purposes. Prohibits health care providers, including pharmacies and entities licensed under chapter 18.64 RCW; health carriers; pharmacy benefit managers; or the business associates, subsidiaries, or affiliates of the aforementioned entities from intentionally sharing, selling, or otherwise using any health care information for the purpose of marketing prescription drugs to patients, notwithstanding allowable disclosures under RCW 70.02.050, and unless expressly authorized by the patient as provided in RCW 70.02.030.	Pedersen	Support	H, Rules R +
1519	Requiring language access services for persons with limited English	Hasegawa	Monitor	H, HC/Wellness

proficiency in health care and insurance matters.

Requires contracted managed health care systems to provide interpretation services to limited English proficient enrollees, to the extent funding is available for that purpose. Directs all health care service contractors that provide coverage for health care services to provide interpretation services or reimburse clinical health care providers, contract representatives, or administrators that are responsible for billing and claims services for providing interpretation services to limited English proficient enrolled participants. Directs all health maintenance organizations that provide coverage for health care services to provide interpretation services or reimburse clinical health care providers, contract representatives, or administrators that are responsible for billing and claims services for providing interpretation services to limited English proficient enrolled participants. Directs, for all disability insurance contracts that provide hospital and medical expenses and health care services, insurers to provide interpretation services or reimburse clinical health care providers, contract representatives, or administrators that are responsible for billing and claims services for providing interpretation services to limited English proficient insured individuals. Establishes a working group on language access in health care in the department of health. Requires the insurance commissioner to conduct a study of language issues that affect consumers who purchase health insurance contracts in the state of Washington.

- [1611](#) Concerning online access to the University of Washington health sciences library by certain health care providers. Morrell Monitor H, HC/Wellness
Requires the University of Washington to provide to the department of health, by September 1st of each year, an accounting of: (1) The use of funds collected under RCW 43.70.110(3)(c) (health care provider license fees) during the prior year; and
(2) The use of the online health sciences library by each category of provider subject to RCW 43.70.110(3)(c) (health care provider license fees).
- [1620](#) Establishing a community health care collaborative grant program. Kenney Monitor H, HC/Wellness
Authorizes the Washington state health care authority, within funds appropriated for community health care collaborative grants, to award grants for community-based health care collaborative programs that increase access to appropriate, affordable health care for Washington residents, consistent with requirements established by the act. Establishes the community health care collaborative grant program to further the efforts of community-based coalitions to increase access to appropriate, affordable health care for Washington residents, particularly employed low-income persons and children in school who are uninsured and underinsured.
- [S1647](#) Concerning administrative procedures for payors and providers of health care services. (DIGEST OF PROPOSED 1ST SUBSTITUTE) Driscoll Monitor S, Hea/L-T Care
The fragmentation and variation in administrative processes prevalent in our health care system contribute to the high cost of health care, putting it increasingly beyond the reach of small businesses and individuals in Washington. Declares an intent to: (1) Establish streamlined and uniform procedures for payors and providers of health care services in the state; and (2) Foster a continuous quality improvement cycle to simplify health care administration. Directs the department of social and health services, the department of labor and industries, and the health care authority to cooperate with the insurance commissioner and adopt the processes, guidelines, and standards to streamline health care administration pursuant to the act. Directs the insurance commissioner to designate one or more lead organizations to coordinate development of processes, guidelines, and standards to streamline health care administration and to be adopted by payors and providers of health care services operating in the state.
- [1861](#) Concerning alternative health care practitioners. Chase Monitor H, HC/Wellness
Declares an intent to: (1) Protect the right of all individuals to access every type of health care service and practitioner that they desire whenever possible. Protecting consumer access to health care services must include protecting consumer access to health care services from practitioners who are not licensed, certified, or registered by the state. Health care service practitioners who are not licensed, certified, or registered by the state must be able to provide the services that individuals seek without risking civil or criminal investigations or sanctions sought by the state, its agencies, boards, or commissions; and (2) Allow health care practitioners who are not licensed, certified, or registered by the state, to provide any health care services sought by individuals, unless there exists clear and convincing evidence that the specific health care service causes serious physical or mental harm or causes imminent and significant risk of discernable, significant, and serious physical or mental injury, under the circumstances in which the health care practitioner knew, or in the exercise of reasonable care should have known, would result in such injury.
- [1892](#) Concerning health care financing. Appleton Monitor H, HC/Wellness
Establishes a single financing entity called the Washington health security trust to provide coverage for a set of health services for all residents. Requires all Washington state employers to pay a health security assessment to the department of revenue to fund the Washington health security trust. Requires all Washington residents eighteen years old or older, except medicare and medicaid beneficiaries, with incomes over one hundred fifty percent of the federal poverty level to pay a standard monthly flat rate health security premium effective May 15, 2011. Abolishes the health care authority and transfers its powers, duties, and functions to the Washington health security trust. Creates the reserve account, the displaced worker training account, and the benefits account. Expires the displaced worker training account on January 1, 2014. Makes an appropriation.

1918	Concerning physical therapists. Allows a physical therapist to perform spinal manipulation only upon showing evidence of adequate education and training in spinal manipulation. Requires a physical therapist to submit to the secretary of the department of health an affidavit that includes evidence of adequate education and training in spinal manipulation. A physical therapist who has graduated from an approved school of physical therapy in 2009 or later is not subject to this requirement.	Lias	Monitor	H, HC/Wellness
2S1985	Concerning public health financing. (DIGEST OF PROPOSED 2ND SUBSTITUTE) Declares an intent to help provide local health jurisdictions with a more stable dedicated funding system by creating a single account through which all state funding for public health will be distributed. Declares that local health jurisdictions receiving state funds be held accountable for the use of those funds based on the minimum standards of public health protection in the state's public health improvement plan. Directs the secretary of the department of health to establish a review process for determining whether a local health jurisdiction is in substantial compliance with the minimum standards for public health protection established under RCW 43.70.520. Requires the secretary of the department of health to notify the local health jurisdiction, in writing, and the state treasurer when the secretary finds that a local health jurisdiction is not in substantial compliance with the minimum standards for public health protection established under RCW 43.70.520. Authorizes the secretary of the department of health to exempt a local health jurisdiction from the review process if the jurisdiction is accredited by an organization whose accreditation standards meet or exceed the minimum standards for public health protection established under RCW 43.70.520. Creates the public health improvement account.	Moeller	Monitor	S, Ways & Means +
2073	Consenting to medical care by a minor. Modifies provisions regarding minors consenting to medical care.	Wallace	Monitor	H, Judiciary
2087	Eliminating certain boards, committees, and commissions and the transfer of certain duties effective June 30, 2009. Eliminates certain boards, committees, and commissions and transfers certain duties by June 30, 2009. Includes the Citizens' Work group on Health Care Reform.	Springer	Monitor	H, SGTribalAff
2S2114	Establishing a forum for testing primary care medical home reimbursement pilot projects. (DIGEST OF PROPOSED 2ND SUBSTITUTE) Requires the health care authority and the department of social and health services to design, oversee implementation of, and evaluate one or more primary care medical home reimbursement pilot projects in the state to include as participants public payors, private health carriers, third party purchasers, and health care providers. Authorizes the health care authority and the department of social and health services to select a pilot site that currently employs certain activities and functions associated with medical homes. Expires July 1, 2013.	Seaquist	Monitor	S, Hea/L-T Care
2121	Establishing the guaranteed health benefit program act. Creates the guaranteed health benefit program to provide care to all residents of this state not enrolled in both parts A and B of medicare, veterans' benefits, TRICARE, CHAMPUS, FEHBP, or other federal or state government programs, or who are confined or reside in a government-operated institution. Establishes the guaranteed health benefits board to govern the program. Directs the state health care authority to administer, supervise, and manage the program. Requires employers to make information developed by the state health care authority about the program and open enrollment available to their employees. Establishes the guaranteed benefit program trust account and the guaranteed benefit program reserve trust account. Requires the state auditor to examine the records of the program every second year, or more frequently upon request of the board, and to recommend methods of accounting and the rendering of periodic reports of projects undertaken by the board. Directs the secretary of the department of social and health services to seek all necessary waivers or amendments needed for full implementation of the program and to seek to obtain federal reimbursements for all eligible persons who enroll in the program. Directs the insurance commissioner to study and report on whether to retain, eliminate, or change the Washington state health insurance pool, created in chapter 48.41 RCW, after full implementation of the program. Provides for submission of the act to a vote of the people.	Morrell	Monitor	H, HC/Wellness
2127	Concerning health care coverage for children. Requires the department of social and health services to: (1) Take the opportunity provided in the federal children's health insurance program reauthorization act to implement express lane eligibility for children's health coverage not later than July 1, 2010; (2) Manage its outreach, application, and renewal procedures with the goal of achieving year by year improvements in enrollment, enrollment rates, renewals, and renewal rates; (3) Use an eligibility card for the program that clearly identifies the bearer, by text and by logo, as a participant in the apple health for kids program; and (4) Establish a concise set of explicit performance measures that can indicate whether children enrolled in the program are receiving health care through an established and effective medical home, and whether the overall health of enrolled children is improving.	Seaquist	Monitor	H, HC/Wellness

2151	Eliminating boards and commissions on June 30, 2010. Eliminates boards and commissions on June 30, 2010. Declares that while advisory boards, committees, and commissions be eliminated, agencies should identify new, less costly, and more effective opportunities to ensure a broad range of citizen participation is provided and that all reasonable efforts are made to ensure that channels are maintained for vital input from the citizens of Washington. Ample time is provided for the advisory groups to complete work in progress and for agencies to develop alternative communication strategies. Eliminates the Family Practice Education Advisory Board at the University of Washington School of Medicine and transfers the duties to the Chairman of the Department of Family Medicine.	Springer	Monitor	H, SGTribalAff
2155	Concerning children's health care coverage. Requires the department of social and health services to: (1)Take the opportunity provided in the federal children's health insurance program reauthorization act to implement express lane eligibility for children's health coverage not later than July 1, 2010; (2) Manage its outreach, application, and renewal procedures with the goal of achieving year by year improvements in enrollment, enrollment rates, renewals, and renewal rates; (3) Use an eligibility card for the program that clearly identifies the bearer, by text and by logo, as a participant in the apple health for kids program; and (4) Establish a concise set of explicit performance measures that can indicate whether children enrolled in the program are receiving health care through an established and effective medical home, and whether the overall health of enrolled children is improving.	Seaquist	Monitor	H, HC/Wellness
S2160	Concerning health carrier payment of wellness incentives. (DIGEST OF PROPOSED 1ST SUBSTITUTE) Exempts employee wellness programs from a general prohibition on rebates by insurers.	Driscoll	Monitor	S, Passed 3rd
2161	Concerning support services provided under the maternity care access program. Allows, rather than requires, the support services for the department of social and health services' maternity care access program to include child care.	Cody	Monitor	H, HC/Wellness
2174	Concerning health care. Establishes the comprehensive health options, incentives, and consumer empowerment act or CHOICE act to: (1) Increase the availability of affordable coverage; (2) Allow consumers to purchase plans from insurers licensed or certified outside Washington; (3) Encourage alternatives to the basic health plan; and (4) Improve employee wellness.	Eddy	Monitor	H, HC/Wellness
2197	Abolishing the department of social and health services and creating new departments to take over its functions. Abolishes the department of social and health services effective July 1, 2011, and creates: (1) The department of economic services, which will conduct financial eligibility evaluations for all the newly created agencies; (2) The department of medical assistance; (3) The department of health and rehabilitative services, which will consist of the long-term care, developmentally disabled, vocational-rehabilitation, mental health, and drug and alcohol substance abuse programs, and the special commitment center; and (4) The department of children's services. Requires the transition team, by January 1, 2010, to submit a plan and necessary implementing legislation to the legislature for the division of the department of social and health services so that the new agencies will be operating by July 1, 2011.	Armstrong	Monitor	H, HHS Apps
2213	Concerning health care contracts. Addresses health care contracts. Details the provisions that must be in a contract between a health care provider and an insurer. This bill is based on the Colorado law.	Green	Support	H, HC/Wellness
5052	Concerning health insurance for young adults. Modifies health insurance options for young adults. Directs the office of the insurance commissioner to make available educational and outreach materials targeted to young adults aged nineteen to thirty-four, as funding becomes available.	Parlette	Monitor	S, Hea/L-T Care
5140	Requiring language access services for persons with limited English proficiency in health care and insurance matters. Requires the Washington basic health plan to provide interpretation services to limited English proficient enrollees. Directs all health care service contractors that provide coverage for health care services to provide interpretation services or reimburse clinical health care providers, contract representatives, or administrators that are responsible for billing and claims services for providing interpretation services to limited English proficient enrolled participants. Directs all health maintenance organizations that provide coverage for health care services to provide interpretation services or reimburse clinical health care providers, contract representatives, or administrators that are responsible for billing and claims services for providing interpretation services to limited English proficient enrolled participants. Directs, for all disability insurance contracts that provide hospital and medical expenses and health care services, insurers to provide interpretation services or reimburse clinical health care providers, contract representatives, or administrators that are responsible for billing and claims services for providing interpretation services to limited English proficient insured individuals. Establishes a working group on language access in health care in the department of health. Requires the insurance commissioner to conduct a study of language issues that affect consumers who purchase health insurance contracts in the	Shin	Monitor	S, Hea/L-T Care

state of Washington.

5202	Changing the implementation date and benefit design of nonsubsidized state health coverage for children. Revises the implementation date, benefit design, and obligations of participating managed health care systems for nonsubsidized state health coverage for children. Moves out the start date for covering children in the 250 to 300% poverty range from 2009 to 2010.	Franklin	Concerns	S, Hea/L-T Care
5203	Regarding insurance coverage for autism spectrum disorders. Requires each health plan offered to public employees and their covered dependents under chapter 41.05 RCW which is not subject to the provisions of Title 48 RCW to include coverage for the diagnosis of autism spectrum disorders and treatment of autism spectrum disorders in individuals less than twenty-one years of age. Requires each health plan offered to the public under chapter 48.21, 48.44, or 48.46 RCW to include coverage for the diagnosis of autism spectrum disorders and treatment of autism spectrum disorders in individuals less than twenty-one years of age.	Hobbs	Monitor	S, Hea/L-T Care
5230	Concerning physical therapists. Allows a physical therapist to perform spinal manipulation only upon showing evidence of adequate education and training in spinal manipulation. Requires a physical therapist to submit to the secretary of the department of health an affidavit that includes evidence of adequate education and training in spinal manipulation. A physical therapist who has graduated from an approved school of physical therapy in 2009 or later is not subject to this requirement.	Fairley	Monitor	S, Hea/L-T Care
5279	Providing for the safe collection and disposal of unwanted drugs from residential sources through a producer provided and funded product stewardship program. Providing for the safe collection and disposal of unwanted drugs from residential sources through a producer provided and funded product stewardship program. Requires every producer of covered products sold in or into Washington state to participate in a product stewardship program for unwanted products from residential sources. Allows the director of the department of ecology to lend money from the state toxics control account to the pharmaceutical product stewardship account if necessary to ensure that money is available in the pharmaceutical product stewardship program account for the initial administration of the product stewardship program for unwanted drugs from residential sources. Provides penalties.	Kline	Monitor	S, Hea/L-T Care
5372	Creating a school-based influenza vaccination pilot program. Requires the department of health and the office of the superintendent of public instruction to jointly establish a school-based influenza vaccination pilot program using both killed vaccine and live attenuated vaccine in one urban school district and one rural school district. Directs the department of health to convene a working group to plan the school-based influenza vaccination pilot program. Expires July 1, 2011.	Jacobsen	Monitor	S, Hea/L-T Care
5457	Concerning vaccines. Requires notification to certain persons who are to be vaccinated or injected with any mercury-containing product. This notification would be in addition to what is currently required and would likely further discourage parents who may be inclined to not have their children vaccinated.	Oemig	Oppose	S, Hea/L-T Care
2S5484	Concerning developmental screening. (DIGEST OF PROPOSED 2ND SUBSTITUTE) Requires the department of social and health services to select a developmental screening tool consistent with nationally accepted pediatric guidelines and to reimburse providers using the tool to conduct developmental screenings of children. The department shall also recommend a schedule for administering these developmental screens consistent with nationally accepted pediatric guidelines.	Marr	Monitor	H, HC/Wellness +
S5497	Concerning telemedicine. (DIGEST OF PROPOSED 1ST SUBSTITUTE) Regulates the delivery of home health care services through telemedicine.	Marr	Monitor	S, Rules X
ES5502	Establishing the primary care physician conditional tuition waiver program. (AS OF SENATE 2ND READING 3/9/2009) Finds that there is a critical shortage of primary care physicians in the state especially in rural areas. Declares an intent to create incentives for medical school students to choose primary care practice for their medical careers. Establishes the primary care physician conditional tuition waiver program to be administered by the University of Washington. Requires the University of Washington to provide medical school students with information about the growth of patient and family-centered primary care medical homes throughout the state as a desirable and important strategy to improve quality of care. Requires funding for graduate medical education to be directed toward residents-in-training in Family Medicine, internal medicine, and pediatrics who plan to pursue primary care in Washington following their residency programs. Expires July 1, 2019.	Keiser	Support	H, Hi Ed
5627	Restricting contact with medical providers after appeals have been filed under industrial insurance.	McDermott	Monitor	S, Lab/Comm/CP

Restricts contact with medical providers after appeals have been filed under industrial insurance. Provides that the act applies to orders entered on or after the effective date of the act.

5707	Concerning child immunization exemptions. Requires certain documents for child immunization exemptions. Adds a requirement that the parent seeking a waiver from the immunization requirement for school admission have a written form from a medical provider documenting that he/she has received information about the benefits and risks of immunizations.	Keiser	Monitor	S, Hea/L-T Care
S5730	Enhancing federal financing of health coverage. (DIGEST OF PROPOSED 1ST SUBSTITUTE) Enhances federal financing of health coverage. Asks DSHS to get authorization to use the additional Medicaid funding and children's health care funding that will be in the federal stimulus package.	Keiser	Monitor	S, Ways & Means +
5755	Concerning alternative health care practitioners. Declares that all individuals should be permitted to enter into a health profession unless there is an overwhelming need for the state to protect the interests of the public by restricting entry into the profession and, if such a need is identified, the regulation adopted by the state should be set at the least restrictive level consistent with the public interest to be protected. Declares an intent to allow health care practitioners who are not licensed, certified, or registered by the state, to provide health care services, unless there is clear and convincing evidence that the specific health care service causes serious physical or mental harm or causes imminent and significant risk of discernable, significant, and serious physical or mental injury, under the circumstances in which the health care practitioner knew, or in the exercise of reasonable care should have known, would result in such injury.	Oemig	Monitor	S, Hea/L-T Care
5756	Concerning hazardous substance information. Requires the department of ecology, through the hazardous substance information and education office, to provide a list of hazardous substances regulated under RCW 70.102.010(5) and compile existing information about hazardous substances, at the request of citizens or public health or safety organizations. Prohibits a person or entity from knowingly administering a product containing a hazardous material in concentrations high enough so that the net product is a hazardous substance, if that product is to be placed upon, ingested by, or injected into another person unless specific disclosure is provided prior to administration of the product. Includes medical products.	Oemig	Monitor	S, Env/Water/Ener
5772	Concerning the shortage of health care professionals. Requires the department of health, in concert with a medical school located in central Washington, to prepare a health professional shortage plan that accomplishes certain goals.	Shin	Monitor	S, Hea/L-T Care
S5798	Concerning medical marijuana. (DIGEST OF PROPOSED 1ST SUBSTITUTE) Provides that health care professionals are excepted from liability and prosecution for the authorization of marijuana use to qualifying patients for whom, in the health care professional's professional judgment, medical marijuana may prove beneficial. Defines "health care professional" for purposes of chapter 69.51A RCW (medical marijuana).	Kohl-Welles	Monitor	S, Rules X
S5826	Requiring tamper-resistant prescription pads. (DIGEST OF PROPOSED 1ST SUBSTITUTE) Requires every prescription written in this state by a licensed practitioner to be written on a tamper-resistant prescription pad or paper approved by the board of pharmacy.	Keiser	Monitor	H, HHS Apps
5841	Delaying the implementation of the health insurance partnership. Delays implementation of the health insurance partnership.	Keiser	Monitor	S, Ways & Means
5848	Increasing immunization. Declares an intent to promote positive health outcomes for the children of the state by transferring to local health jurisdictions those funds appropriated to the department of health for the purpose of administering immunization protection to the citizens of the state.	Keiser	Monitor	S, Hea/L-T Care
ES5880	Providing flexibility in the education system. (DIGEST OF PROPOSED 1ST SUBSTITUTE) Provides flexibility in the education system to reduce costs. Repeals school model policy on nutrition and repeals specific requirements for school lunch nutrition standards and the requirement to offer physical education classes. Changes the requirement for asthma and anaphylaxis training to once every three years to the extent possible.	McAuliffe	Monitor	H, Education +
S5898	Creating a health care council. (DIGEST OF PROPOSED 1ST SUBSTITUTE) Creates the Washington state apple health community care council as an emergency working group within the department of social and health services to work to preserve critical publicly funded medical assistance programs that provide medical coverage to families and adults while providing a solution for a single entry way for all medical programs available to the low-income populations in Washington state.	Pflug	Monitor	S, Ways & Means +
5947	Reforming the health care system in Washington state. Reforms the health care system in Washington.	Pflug	Monitor	S, Hea/L-T Care

5998	Concerning health carrier payment of wellness incentives. Exempts employee wellness programs from a general prohibition on rebates by insurers.	Keiser	Monitor	S, Hea/L-T Care
2S6038	Concerning the basic health plan. (DIGEST OF PROPOSED 2ND SUBSTITUTE) Revises the basic health plan to enable unemployed workers to maintain their health and avoid the risk of financial hardship related to unpaid medical bills as they search for new employment.	Keiser	Monitor	S, 2nd Reading +
6041	Creating a statewide immunization registry. Authorizes the department of health to create an immunization registry program for children ages zero to eighteen residing in Washington state and to adopt rules to implement the program.	Pflug	Monitor	S, Hea/L-T Care
6094	Concerning health care financing. Establishes a single financing entity called the Washington health security trust to provide coverage for a set of health services for all residents. Requires all Washington state employers to pay a health security assessment to the department of revenue to fund the Washington health security trust. Requires all Washington residents eighteen years old or older, except medicare and medicaid beneficiaries, with incomes over one hundred fifty percent of the federal poverty level to pay a standard monthly flat rate health security premium effective May 15, 2011. Abolishes the health care authority and transfers its powers, duties, and functions to the Washington health security trust. Creates the reserve account, the displaced worker training account, and the benefits account. Expires the displaced worker training account on January 1, 2014. Makes an appropriation.	Jacobsen	Monitor	S, Hea/L-T Care