

Weekly Legislative Update: Health and Behavioral Health

Issue Team Chair: Kim Abbey
Contact: kabbey@lwwwa.org

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Bills Needing Action This Week

Remember, only authorized members can speak for the League; the Issue Chairs will do that, **so please leave the “Organization” box blank.** A more powerful influence is many voices speaking for themselves rather than many voices speaking for the League.

HB 1141 Increasing access to the death with dignity act. Sponsor: Rep. Skyler Rude
Makes changes to the 2009 Death with Dignity Act, mainly changes ‘physician’ to ‘qualified medical provider.’ Hospice care is increasingly provided by advanced registered nurse practitioners and physician assistants, especially in rural areas. Eliminates the 15-day waiting period and reduces it to 72 hours. A contract employer may not prevent a health care provider from participating in Death with Dignity Act of 2009 so long as they act independently and at a location that is not on the hospital facility premises.

⚠ This bill was referred to House Rules back on April 25, 2021. If your representative sits on the House Rules Committee reach out and ask them to move the bill forward. You can see who sits on the committee and reach out [here](https://leg.wa.gov/House/Committees/RUL/Pages/default.aspx) (<https://leg.wa.gov/House/Committees/RUL/Pages/default.aspx>).

HB 1616 Concerning the charity care act. Sponsor: Tarra Simmons

The Department of Health shall monitor the distribution of charity care among hospitals. No hospital shall adopt or maintain practices or policies which would deny access to emergency care based on ability to pay. No hospital which maintains an emergency department shall transfer a patient with an emergency medical condition or who is in active labor unless the transfer is performed at the request of the patient or is due to the limited medical resources of the transferring hospital. Each hospital shall post and prominently display notice of charity care availability. Charity care eligibility is determined by calculating family income based on the federal poverty level: if under 300% of FPL receives 100% discounted health services bill; under 350% receives 75% discount; under 400% FPL receives 50% discount.

⚠ This hearing begins at **10:00 AM** and is in the House Committee on Health and Wellness Please sign in as **PRO** [here](https://app.leg.wa.gov/csi/Testifier/Add?chamber=House&mId=29358&aid=143459&cald=18531&tId=3) (<https://app.leg.wa.gov/csi/Testifier/Add?chamber=House&mId=29358&aid=143459&cald=18531&tId=3>).

HB 1622 Increasing the availability of sexual assault nurse examiner education in rural and underserve areas. Sponsor: Rep. Gina Mosbrucker

The Washington State University college of nursing shall establish a program to increase the availability of qualified sexual assault nurse examiners in eastern Washington. The program will develop and train lead sexual assault nurse examiners.

⚠ This bill will be heard in the House Committee on College & Workforce Development on Monday, Jan. 10 at 1:30 PM and Thursday Jan 13 at 10:00 AM. **Please sign in as Pro** at: <https://app.leg.wa.gov/csi/Testifier/Add?chamber=House&mid=29436&ald=143679&cald=18491&tld=3>

[HB 1646](#) Continuing the work of the dementia action collaborative. Sponsor: Rep. Jessica Bateman. In January 2016, Washington state released a State Plan to Address Alzheimer’s Disease and Other Dementias. The State Plan identifies goals, strategies, and recommendations as a blueprint for action. This bill reestablishes the formal dementia action collaborative to update the state plan and make recommendations.

⚠ This bill will be heard in the House Committee on Health and Wellness on Monday, Jan. 10 at 1:30 PM. **Please sign in as Pro** at: <https://app.leg.wa.gov/csi/Testifier/Add?chamber=House&mid=29356&ald=143455&cald=18523&tld=3>

Bills We Support

[HB 1047](#) **Requiring coverage for hearing instruments for children and adolescents.** Sponsor: Rep. Emily Wicks

A health carrier offering a health plan issued or renewed on or after January 1, 2023, must include coverage for hearing instruments, including bone conduction hearing devices, for persons who are 18 years of age or younger. Coverage must include the hearing instrument, the initial assessment, fitting, adjustment, auditory training, and ear molds as necessary to maintain optimal fit.

[HB 1141](#) **Increasing access to the death with dignity act.** Sponsor: Rep. Skyler Rude
Makes changes to the 2009 Death with Dignity Act, mainly changes ‘physician’ to ‘qualified medical provider.’ Hospice care is increasingly provided by advanced registered nurse practitioners and physician assistants, especially in rural areas. Eliminates the 15-day waiting period and reduces it to 72 hours. A contract employer may not prevent a health care provider from participating in Death with Dignity Act of 2009 so long as they act independently and at a location that is not on the hospital facility premises.

[HB1610](#) / [SB 5518](#) **Concerning the occupational therapy licensure compact.** Sponsor: Rep. Jessica Bateman

The purpose of this compact is to facilitate interstate practice of occupational therapy with the goal of improving public access to occupational therapy services, primarily in rural areas. The compact member states will create and establish a joint public agency known as the occupational therapy compact commission. This bill, if passed, will allow OTs and COTAs (Certified Assistants) to work in other states under their home state license.

[HB 1616](#) **Concerning the charity care act.** Sponsor: Tarra Simmons

The Department of Health shall monitor the distribution of charity care among hospitals. No hospital shall adopt or maintain practices or policies which would deny access to emergency care based on ability to pay. No hospital which maintains an emergency department shall transfer a patient with an emergency medical condition or who is in active labor unless the transfer is performed at the request of

the patient or is due to the limited medical resources of the transferring hospital. Each hospital shall post and prominently display notice of charity care availability. Charity care eligibility is determined by calculating family income based on the federal poverty level: if under 300% of FPL receives 100% discounted health services bill; under 350% receives 75% discount; under 400% FPL receives 50% discount.

[HB 1622](#) Increasing the availability of sexual assault nurse examiner education in rural and underserved areas. Sponsor: Rep. Gina Mosbrucker

The Washington State University college of nursing shall establish a program to increase the availability of qualified sexual assault nurse examiners in eastern Washington. The Washington State University college of nursing shall: Develop and train lead sexual assault nurse examiners; and assist in the development of support mechanisms and role requirements for regional lead sexual assault nurse examiners.

[HB 1646](#) Continuing the work of the dementia action collaborative. Sponsor: Rep. Jessica Bateman
In January 2016, Washington state released State Plan to Address Alzheimer’s Disease and Other Dementias. The State Plan identifies goals, strategies and recommendations as a blueprint for action. This bill, sponsored by Rep. Jessica Bateman, reestablishing the formal dementia action collaborative to update the state plan and make recommendations. The Department of Health shall convene the dementia action collaborative, with 20 members appointed by the governor. They are tasked with providing any necessary administrative support and submitting all required reports. Meetings of the dementia action collaborative must be open to the public.

[SB 5532](#) / [HB 1671](#) Establishing a prescription drug affordability board. Sponsor: Sen. Karen Keiser
The prescription Drug Affordability board is established, to include five members who have expertise in health care economics or clinical medicine appointed by the governor. Board members shall serve for a term of five years. The board must coordinate and collaborate with the Health Care Authority, other boards, work groups, and commissions related to prescription drug costs and emerging therapies including the Health Care Cost Transparency board and the Universal Health Care commission. The board may choose to conduct an affordability review of any prescription drug with excessive price rises in a 12-month period. The board must establish a methodology for setting upper payment limits for prescription drugs.

[SB 5335](#) Concerning the acquisition of health care facilities. Sponsor: Sen. Emily Randall
Before any person or health care corporation plans to acquire or have a merger with another hospital an application must be submitted to the Department of Health. The DOH shall prepare an independent health care impact statement for any acquisition of a hospital that has more than 50 acute care beds. Or if there is a reasonable basis to conclude that the acquisition may significantly reduce the availability or accessibility or cost of any existing health care service. The impact statement must have an assessment of the effect of the acquisition on emergency services, reproductive health care services, end-of-life health care services, and gender affirming health care services and charity care.

[SB 5546](#) Concerning insulin affordability. Sponsor: Sen. Karen Keiser
The total cost of insulin work group is established. The work group membership must consist of the insurance commissioner or designee and twenty members appointed by the governor, to include representatives of pharmacists, health insurance carriers, patients, pharmacy benefit managers, and others. The work group must review and design strategies to reduce the cost of and total expenditures

on insulin in this state. By December 1, 2022, the work group must submit a preliminary report detailing strategies to reduce the cost of and total expenditures on insulin.

[SB 5589](#) Concerning statewide spending on primary care. Sponsor: Sen. June Robinson

The board of health shall submit a preliminary report to the governor and relevant committees of the legislature addressing primary care expenditures in Washington. The report must include the annual progress needed for primary care expenditures to reach 12 percent of total health care expenditures in a reasonable amount of time, and methods to incentivize the achievement of desired levels of primary care expenditures.

(no Bill # yet) Establishing the profession of dental therapist. Sponsor: Rep. Eileen Cody

It is the legislature's intent that dental therapists will meet the needs of local communities as they work under the direction of a licensed Washington dentist. The legislature intends for dental therapists to be incorporated into the dental care workforce and used to effectively treat more patients.

How You Can Be Involved

- During the legislative session we will send Action Alerts in the [Legislative Newsletter](#). Please respond to these, which will direct you to an application to facilitate communicating with your legislators on an important vote in committees or on the chamber floor.
- Local Leagues in Washington have action chairs who coordinate action teams. Some local Leagues have health teams to take action locally. Contact your local League action chair to find out and join.
- You may also express your opinion on legislation with the LWVWA issue chairs. We will take your perspectives under considerations as we determine our support for legislation and prepare testimony. Kim Abbey, Health and Behavioral Health Issue Chair, kabbey@lwvwa.org.