

The 2021 Legislative Session: Weeks Eight-Nine (February 28 – March 13)

This past Tuesday, March 9, was the deadline for bills to be voted out of the chamber in which they were initially introduced. With the exception of those affecting the state budget, Senate bills not voted out of the Senate or House bills not voted out of the House are generally no longer in play this session. Bills receiving favorable votes are now being considered by the other chamber.

The status of bills of interest to family physicians and their patients on which WAFP has been most active:

- **Public health funding.** [SB 5149](#) dedicates a tax on health insurance plans to public health. [SB 5371](#) would do the same with a tax on sweetened beverages. WAFP supports both bills, but there is stiff opposition to each and their future remains uncertain. They remain in the Senate Ways & Means Committee where their fate, and the fate of public health funding generally, will likely be decided as part of the overall budget deliberations.
- **Public health system restructuring.** [HB 1152](#) makes numerous changes to the structure of the state's public health system, including establishing four regional public health centers. The version which passed the House and is awaiting action in the Senate is substantially different than the bill as introduced. This reflects in part the considerable work of an ad hoc advisory group including WAFP Public Health Committee Co-Chair Dr. Ashlin Mountjoy, which was convened by the bill's sponsors.
- **Medicaid primary care rate increase.** [SB 5246](#) increases payment for primary care services under Medicaid. WAFP testified in support at the bill's initial hearing before the Senate Health & Long-Term Care Committee. With a favorable recommendation, the bill was then referred to the Ways & Means Committee, where it remains. The issue is still very much in play and deserving of WAFP member attention, as the expectation all along has been that this too would be taken up during budget deliberations.
- **ARNP payment parity.** [SB 5222](#) requires health insurers to reimburse advanced registered nurse practitioners at the same rate as physicians. Academy past president Dr. Jeremia Bernhardt testified for WAFP in opposition to the bill before the Senate Health & Long-Term Care Committee. The bill was not brought up for a Committee vote, and is likely dead for the session.
- **Pregnancy and miscarriage-related patient care.** [SB 5140](#) prohibits health care entities from restricting health care providers from providing services related to pregnancy complications. The bill passed the Senate and was heard before the House Health Care & Wellness Committee last week. Dr. Christie Miles testified on behalf of WAFP in support. Its path forward looks promising.
- **Audio-only telemedicine.** [HB 1196](#) requires audio-only telemedicine visits be reimbursed at the same rate as in-person visits. The bill passed the House 94-3, and was heard last week before the Senate Health & Long-Term Care Committee. WAFP President Dr. Lillian Wu testified on behalf of the Academy in favor of the bill. Pressure remains to limit the reimbursement to behavioral health visits only and to allow it outside of established clinician-patient relationships, both of which WAFP

opposes. It would be good for WAFP members to continue to contact their legislators about this bill, particularly on these two contested issues.

- **Low carbon fuel standards.** [HB 1091](#) directs the Department of Ecology to adopt rules limiting transportation fuel greenhouse gas emissions. It is among the most contentious bills of the session, and passed the House 52-46. WAFP submitted written testimony from its Public Health Committee in support of the bill to each of the four legislative committees holding a hearing on the bill to date. With its fate still uncertain, we're looking for direction from some of the bills leading proponents as to how WAFP can be most helpful as we approach the session's home stretch.
- **Suicide among veterans and military members.** [HB 1181](#) provides outreach and services to prevent suicide among veterans and military service members. As introduced, it inadvertently imposed a confusing and problematic practice standard on primary care providers. WAFP testified on the bill before the House Housing, Human Services & Veterans Committee, and worked with the bill's prime sponsor to draft language addressing these concerns. The bill currently sits in the House Appropriations Committee and may be done for the session.

For those bills which remain under consideration, interim deadlines will [now be more frequent](#). The next is March 26, by which time the policy committees must complete their work. [Now is a good time for each WAFP member to weigh in with his or her own legislators](#) regarding the bills listed above, especially those dependent on the budget or whose fate otherwise remains uncertain.