

Meeting Minutes

Thursday, Jan 23, 2019 | 10:00 am – 12:00 pm
 Senate Republican Caucus Room (Legislative Building)
 313 Sid Snyder Ave SW
 Olympia, WA 98501

Member attendance					
Sen. Randi Becker	Y	Cory Gillenwater	Zoom	Dr. Ricardo Jimenez	N
Sen. Annette Cleveland	N	Dr. Josh Frank	Zoom	Dr. Geoff Jones	Zoom
Rep. Marcus Riccelli	N	Joelle Fathi	Zoom	Dr. Catherine (Ryan) Keay	N
Rep. Joe Schmick	N	Chad Gabelein	Zoom	Scott Kennedy	N
Dr. John Scott	Y	Dr. Frances Gough	Zoom	Mark Lo	N
Dr. Chris Cable	Zoom	Sheila Green-Shook	N	Denny Lordan	N
Stephanie Cowen	Zoom	Ray Hanley	Y	Adam Romney	N
Kathleen Daman	Zoom	Sheryl Huchala	Zoom	Cara Towle	Zoom
				Lori Wakashige	Zoom

Public attendees: Nicole LaGrone (UW Medicine), Stafford Strong (Representative Caucus), Sean Graham (Washington State Medical Association)

Meeting began at 10:01 am

I. Welcome and Attendance (John Scott,) [0:00]

II. Review of Meeting Minutes Nov 2019 (All) [4:33]

- a. Collaborative reviews minutes. Dr. Frank moves to approve minutes. Seconded by Kathleen Daman. Unanimously approved.

III. Final Vote Nurse Licensure Compact (All) [6:43]

- a. Dr. Scott calls for final vote on Nurse Licensure Compact. Asks for any additional questions or concerns for compact.
- b. Questions: Ms. Fathi - What weight collaborative vote holds for this?
 Response: Sen. Becker - Collaborative supported policy is impactful when senate and house vote.

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c. Dr. Scott - Calls for vote. NLC unanimously supported.

IV. Policy Update: ESSB 5389, ESSB 5385, and ESSB 6061 (Sen. Becker, Stafford Strong) [[12:11](#)]

i. ESSB 5389

1. Summary - proposes two-year pilot of telehealth mental health visits for high school students. Trains all staff who are in contact with students, bus drivers, teachers etc. Allows students to get 2 visits by mental health care professional during school hours. A list of psychologists will be provided for students who need follow up care. Bill allows for those mental health care visits to be reimbursed from their insurance, and a state fund created for students without insurance.
2. Updates: Bill has support. Governor's office currently reviewing it. She is putting it through the Health Committee.

ii. ESSB 6061

1. Summary - Bill proposes mandatory telehealth training for non-physician health care staff.
2. Updates: MDs and DO are excluded. Hope any MDs that don't have it will be encouraged to.
3. Questions:
 - a. Ms. Wakashige - To clarify, MD's not required? Response: Yes, doctors not required to complete it, however, medical students will have training as part of their education and other physicians will be encouraged to complete. Can use collaborative training freely available if needed.

iii. ESSB 5385

1. Summary - Bill proposes payment parity for telehealth services.
2. Updates: had striker to update language and dates. Will have further discussion with Rep. Cody on how to include recommendations made by Collaborative. Introduced into House.

V. Legislative Discussion and Review: SB 5759 Remote Technology for Eye Exams

- a. This is the first discussion of this bill. The collaborative has invited guests to speak on the bill at future meetings for further discussion.

- b. Presentation by 1-800 Contacts (Nick Shillago) [21:48]**
- c. Presentation: Policy Alternative for Regulating Ocular Telemedicine [link]
- d. Presentation Summary: 1 800 contacts offer “Express Exam” which allows customers to renew their contact prescription via non refractive eye exam. This is done through an app or a web portal. This exam was designed by a panel of ophthalmology experts at the company; it is recorded and forwarded to ophthalmologists, who are hired by 1 800 contacts. Exam allows customers to avoid seeing an eye care specialist for in person physical exam every year for prescription renewal. Current requirements in proposed bill SB 5759 would not allow for this kind of exam in Washington.
- e. Exam details and safeguards: Online exam is not a replacement for physical exam, and there are several checks to ensure patients are eligible for exam: such as age limits (between 18 -55), patient location, date of previous exam, eye irritation test, existing conditions or eye medical history. If patient does not qualify, 1-800 contacts prevents online exam and suggests optometrists in area. Exam includes red eye test and visual acuity element and is recorded.
- f. Questions about Exam:
 - i. Dr. Scott - Concerned about continuity of care for patients with specific needs. Response: No communication with patient’s eye doctor, but can see prescription.
 - ii. Ms. LaGrone - Who employs providers? Response: Employed by 1-800-Contacts.
 - iii. Sen. Becker - How does insurance coverage fit in? Response: Exams are free to the patient
 - iv. Dr. Scott - What prevents people from gaming the exam, and is there education? Response: There are many safeguards in place. 30% of people who start this process don’t make it through.
 - v. Ms. LaGrone - How many other companies are offering this service? Response: There are 3 other companies offering something or very similar.
 - vi. Sen. Becker - Does FDA have to have any approval for your equipment? Or are there limitations of the equipment you can use? Response: No approval process, and while there are some software requirements for the app and phone compatibility, there are none for the web interface.
 - vii. Dr. Scott - Is there any choice with which ophthalmologist your exam is forwarded to? Response: No.
 - viii. Dr. Scott - Do you have any idea of how much this technology has increased access for patients in rural areas? Response: Don’t have

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numbers but in addition to could also be used as a way to screen for people that aren't using their contacts safely.

- ix. Sen. Becker - When do you charge? Response: You can take prescription renewal from 1-800 Contacts. Hope that patients will buy contacts from 1-800.
 - 1. Follow up question about whether this is in violation of Stark laws, which prevent free services in exchange for medical services. Response was this had not been an issue.
- x. Dr. Frank - Once patient is disqualified, is there anything that stops them from trying again to qualify? Response: Unclear.
- xi. Dr. Frank - How is list of suggested local optometrists created? Response: Largest contact lens provider in US, and suggestions are geographically determined.
- xii. Dr. Scott - how is patient data handled? Response: Other states have provision in their bill.
- g. 1-800 argues that the bill as currently written has overly burdensome requirements that would effectively ban the use of online vision testing services such as requiring FDA approval (process doesn't exist), ADA compliance, same level of evaluation of in-person exam, and unreasonable continuity of care assessment.
- h. Questions about bill:
 - i. Sen. Becker - What if we altered the language to include future FDA regulations? Response: That would be acceptable.
 - ii. Sen. Becker - Can you explain what you mean by "unreasonable continuity of care requirements"? Response: Having to have a relationship with the consumer's eye care home. Dr. Scott - but that is an easy problem to fix. The technology exists to improve continuity of care. Mr. Schillago - that should be decided by the medical board, not state law.
- i. Over 1 million patients served, no complaints reported.

VI. Payment Parity and Narrow Networks: Reviewing California Bill AB 744 (John Scott) [1:10:05]

- a. Review: Payment Parity is the concept that telemedicine visits should be billed and paid equally as in person visits. Recently, insurance companies have contracted with a national telemedicine provider to exclusively provide all telemedicine services to members. Testimony was heard from Multicare in which a child psychiatrist wanted to see an established patient by telemedicine because the patient lived far from the clinic. When Mutlicare

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- tried to collect for the visit, they were told that they would not pay because the patient's insurance only paid for telemedicine services provided by national company. This occurred despite pre-existing relationship and fact that no child psychiatrists are on staff at the national telemedicine company.
- b. Impact overview: telemedicine services are being denied by health insurance companies because they aren't offered by the contracted telemedicine partner, however hospitals and health care systems often offer more expansive telemedicine services than the contracted partners offer.
 - c. Dr. Scott reviews recent California Bill which bans this practice of exclusion and compares to our parity bill. Highlights language around parity, rate negotiation, and "coverage shall not be limited only to services delivered by select third-party corporate telehealth providers." (Sec b.1)
 - d. Discussion
 - i. Mr. Cable and Mr. Gillenwater raise concerns that California bill includes open negotiation for any services that do not have in-person equivalent. Opens possibility that chat and store and forward would be reimbursed at the same rate as in person.
 - ii. Purpose of keeping the language vague around services that have no in person equivalent seen as intentional for future technological developments.
 - iii. Mr. Graham of Washington State Medical Association clarifies narrow networks are allowed under Washington State law. The office of the insurance commissioner is supportive of narrow networks when there is adequacy of service.
 - iv. Members at Providence and Virginia Mason shared experiences of how narrow networks have negatively impacted their telehealth programs, which offer services such as mental health that are not offered by the contracted partners of the insurance companies. These claims are denied. Sen. Becker was concerned how this will impact her telehealth bill expanding mental health service in schools.
 - v. Concern that some health insurance companies are also investing these partners which raises concerns of conflict of interest.
 - vi. Next steps: Sean asked to present at next meeting on narrow networks implications and complexities. Sen. Becker to have conversation with Rep. Cody and Sen. Cleveland.

VII. Credentialing Discussion (John Scott) [1:35:07]

- a. Issue raised with bill that created mental health phone line for patients. Bill stipulated that doctors could see patients via video. However, providers that video into a hospital need to have their credentials verified by that hospital. At

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UW, we have a department that tracks credentialing that handles proxy credentialing. Rep Schmick asked if there was a legislative solution to this issue.

- b. Action: Sen. Becker to follow up with Dr. Scott offline. Perhaps have temporary credentialing.
- c. Action: Cara Towle, Dr. Unutzer and Dr. Kimmel to present at future collaborative meetings.

VIII. Call for Future meeting hosts (Nicole LaGrone) [1:43:52]

- a. Ms. Cowen - offered to host March 24th meeting.
- b. Ms. Daman - Providence offered to host May 12

IX. Public Comments [1:45:40]

- a. Dave Sanfield, Representative from OPW - voiced support of eye exam bill as it protects patients. OPW will be presenting at the next collaborative meeting on March 24th.

X. Meeting adjourned at 12:02 pm