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**WASHINGTON PHYSICIANS FIGHT FOR PATIENT ACCESS TO CARE
AND PATIENT SAFETY LEGISLATION**

Washington State Medical Association (WSMA)
Weighs in on Legislation in Olympia

Olympia, Wash. – More than 140 physicians met with legislators to voice their opinions on several bills that could significantly impact patient access to care and patient safety. The Washington State Medical Association (WSMA), which held its annual Legislative Day this week, is working hard on legislation to preserve programs that are on the cutting block, and promote legislation that would benefit patients.

“As physicians we understand the tough choices that must be made because of the budget situation,” said Doug Myers, MD, president of the WSMA. “But those tough choices should not come at the expense of patient access to care and patient safety—especially for the most vulnerable patients. Washington’s physicians will continue to fight for our patients.”

Issues of interest to the WSMA include:

Patient Access to Care

Interpreter Services – More than 19,000 patients each month use interpreter services to communicate with their physicians. The Legislature is considering eliminating this program, which has historically been funded by Washington’s Medicaid program with state and federal matching funds. Cutting interpreter services will eliminate access to healthcare for some of Washington’s poorest and most vulnerable patients. In addition, the state would lose the federal match of \$7 million. Washington physicians strongly oppose cutting funding to this important program.

Denial of Emergency Services for Medicaid Patients – Physicians have proposed a plan (which they are lobbying the Legislature to consider) to reduce “misuse” of the emergency department while saving the state millions of dollars and protecting patient safety and patient access to care. The plan is an alternative to one advanced by the Washington State Health Care Authority (HCA). In November a Washington state judge sided with physicians in halting the state’s plan to ration emergency services for Medicaid patients by limiting them to three emergency room visits per year. Rather than move forward with the judge’s ruling for a formal rulemaking process, the Washington Health Care Authority (HCA) announced in

December that it will stop paying for all emergency department visits for Medicaid patients when it (HCA) deems those visits “not medically necessary in the ER setting”. Physicians strongly oppose the HCA plan that will examine every Medicaid claim through their own lens of “medically necessary,” which takes the onsite emergency physician out of the equation. Quality patient care does not happen when bureaucrats stand between the physician and patient.

Volunteer Retired Physicians Program (VRP) – Each year volunteer physicians and healthcare professionals serve 67,000 low-income patients in Washington state, providing services worth \$82 million. The VPR, which provides necessary malpractice insurance for volunteer physicians, costs only \$233,000, yet the Legislature is considering eliminating it. Cutting this program would discourage physicians from volunteering their time and services and would eliminate access to healthcare for some of Washington’s most vulnerable patients.

Patient Safety/Patient Education

Truth in Advertising – The WSMA believes that all healthcare professionals should clearly and accurately identify themselves to patients. Many healthcare professionals can earn advanced degrees that carry the title “doctor,” including doctor of physical therapy, doctor of nursing, doctor of psychology, doctor of audiology, doctor of naturopathy, doctor of chiropractic, doctor of optometry and more. Full disclosure of a doctor’s professional degree and training will help patients better advocate for their own healthcare needs and avoid potential confusion as to level of training, qualifications, or scope of practice. The WSMA supports this bill.

Medical Assistants – Medical Assistants (MAs) are unlicensed personnel who assist physicians and other healthcare providers. They have received specific training (formal or otherwise) in medical office and hospital procedures including performing some diagnostic tests, basic patient care activities, and administering medications. The WSMA supports legislation that would formally recognize and regulate Medical Assistants and the tasks they are authorized to perform based on their training.

Regulation of Indoor Tanning – The WSMA supports legislation that would prohibit the use of indoor tanning devices by minors under the age of 18. Indoor tanning nearly doubles the risk of developing melanoma, the deadliest form of skin cancer. Yet the tanning industry remains completely unregulated in Washington state. The U.S. Department of Health and Human Services and the World Health Organization have recognized the carcinogenic risks associated with tanning bed use by placing tanning beds in the highest cancer risk category.

POLST Immunity – The Physician Orders for Life-Sustaining Treatment (POLST) is a form that summarizes the wishes of an individual regarding life-sustaining treatment. The WSMA supports legislation to grant immunity to physicians, other health care providers, and certain healthcare facilities from civil liability for good faith actions taken in accordance with the orders in a POLST form. Emergency medical personnel currently have such immunity.

For more information on the Washington State Medical Association or any issues of interest to Washington physicians or patients, please contact Susan Callahan at slc@wsma.org or 206-794-4706.