

WEAMA Potential Legislative Agenda for 2019

Our lobbyist is often aware of bills that are being considered for the next legislative session months in advance. For those entities that are considering legislation for next year, stakeholder work begins early! Here are a few bills that are being proposed for next year, including our own:

WEAMA RCW 18.06 Statute Update

Your last big scope of practice update was in 2009. We have had some minor, but important updates to your RCW in the past 10 years, such as removing the requirement for a primary care providers signature before you could renew your license and clarifying Point Injection Therapy in your scope of practice.

What we are finding is that there has been some confusion around Acupuncture as a system of medicine vs a technique under East Asian Medicine. That needs to be clarified. We need to rework the definitions around acupuncture, what it is, what points you use and clarify what type of needles are used for acupuncture.

We need to better clarify the number of hours needed for EAMP to be able to pass the NCCAOM test. Currently your scope only has 500 hours and you receive much more than that!

We need to determine if Continuing Education (CE) is needed and what it would look like. We need to work with Bastyr & others to clarify the number of hours for dual licensure training for other professions to practice acupuncture. We also need to clarify what Medical Acupuncture is for Physicians & ARNPs.

Background: As you will see from our 10-year retrospective, WEAMA has not had a significant statute update since 2009. Many things have changed in 10 years and the Board is considering updating the laws that regulate our profession. The Board has approved of a WEAMA Public Policy Committee for broad review as we get going.

WEAMA would like to involve Bastyr University, Seattle Institute of Oriental Medicine (SIOM) and Middle Way Acupuncture Institute in our review process to assure that new modalities are included in your scope. There is lots to do over the summer and we will begin stakeholder work soon!

DOH Licensing System Replacement: DOH regulates 430,000 healthcare practitioners in 86 professions. They have an antiquated computer system in place for licensure of professions. The department is proposing a \$10 fee increase for 4 years for all professions to pay for the licensing system upgrade.

Background: Currently professions pay a licensure fee that covers the cost of the regulation of the profession at DOH. Fees go up and down depending on the number of investigations or disciplinary actions during a set period of time. There are approximately 1,400 licensed EAMPs in our state. Acupuncture has a very low level of complaint against our practitioners and

disciplinary actions. The East Asian Medicine Advisory committee is also funded by your licensure fees. The East Asian Medicine Advisory Committee (EAMAC) is a Secretary Profession regulated under the Secretary of Health. Your licensure also covers the [HEAL-WA](#) research access for practitioners.

Regulation of Benefits Managers: We don't have a lot of information on this bill yet, but we will be working with the chiropractors, PTs, massage therapists and OTs, as well as pharmacy managers this year on another bill impacting prior authorizations. This bill would regulate third party administrators like Evicore and others who slow or reduce care to patients who pay for it through their insurance benefit.

Background: This is essentially the same team of practitioners who successfully passed SB 5167 regarding prior authorizations in the 2018 legislative session. It is my understanding that Senator Shelly Short is interested in sponsoring this bill as well!

Alternatives to Opioids Bill: WEAMA is working with chiropractors, PTs, massage therapists and OTs chiropractors, PTs, massage therapists and OT to gain coverage for patients on Medicaid. There are a number of options under consideration on how this could be accomplished.

Background: WEAMA has been working collaboratively with chiropractors, PTs, massage therapists and OTs since last year on Opioid issues in both the legislature and with state agencies charged to deal with the crisis in our state. We met with the Governor's Health Care Policy Staff last fall and the states health care medical directors to find a way to offer alternatives to opioids. It could be a pilot project in the future or just a bill that directs the Health Care Authority to provide these services under Medicaid, the states largest insurer!

Physical Therapy Dry Needling: WEAMA has been informed by the Physical Therapy Association of Washington (PTWA) that they intend to run Dry Needling legislation again next session. This is a top priority for their association and nationally. They are part of a national compact that is working on dry needling legislation throughout the US.

Background: WEAMA has a long history of preventing Dry Needling for PTs in WA State. WEAMA supported successful lawsuit against PTs practicing Dry Needling 2016. WEAMA opposed SB 6374 (2016) Allowing physical therapists to perform dry needling with 54 hours of training. The bill died in the Senate Health Care committee, but only by 1 vote.

WEAMA requested that DOH perform a Sunrise Review on PT Dry Needling. The review was finalized on December 2016 with recommendations that it is currently not in their scope, but they could try to get legislative approval.

Attorney General Opinion requested by Representative Cody: April 15, 2016 Scope of Practice of Physical Therapy "The practice of dry needling does not fall within the scope of practice of a licensed physical therapist."

Recent: WEAMA was advised by a state legislator that they should at least engage in a mediated conversation with the PTs, or the legislature might make the decision for us! WEAMA agreed to a “Facilitated Conversation” (not a mediation) w/ PTWA & a facilitator May 4, 2018:

Here are the ideas that PTWA proposed in the conversation (no agreement at this time)

- No longer use the term “dry needling” for PTs, find alternative term
- Only allowed to use trigger points, no needle retention or electro
- Must have special endorsement to perform, limited to movement impairment only
- No billing under acupuncture codes
- High level of training: To be determined (850 hours?)
- Illinois Dry Needling language definitions as example

WEAMA went back to our membership with this information to get feedback at our May 20th Spring Conference at Bastyr. The majority of the membership (4 people voted against) at the meeting voted to allow WEAMA to meet with PTWA one more time and come back to the Fall membership conference with their final offer prior to session starting to see if WEAMA could support, stay neutral or oppose. We will share any proposals that they offer in the public policy committee meetings prior to the fall conference as we get more information. There are pros and cons to working cooperatively on issues. Legislators become battle weary over scope of practice wars during a legislative session!

Tradeoffs in the “chess game” - PTs will not fight WEAMA RCW update or trigger points in our legislative update. We would both stay neutral on each other’s bills.

WEAMA works closely on other issues with PTs such as Prior Authorization & Opioid Alternatives, and next year the Benefit Managers bill. We are powerful when we combine forces to pass legislation helping all our professions!

PTs do not have Representative Cody’s support for Dry Needling, so the bill may go nowhere for the next two years because it can’t get out of Rep Cody’s health care committee.

2019 Acupuncture & East Asian Medicine Day Join WEAMA for our Acupuncture & East Asian Medicine Day in Olympia! Please mark your calendars for February 26, 2019. Orientation and review of talking point starting at 7 am!

WEAMA has reserved the Washington Room in Prichard Building on the Capital Campus for our legislative day. We are discussion offering treatments to legislators. We will work with you to set up meetings with your local legislators to advocate for acupuncture and East Asian Medicine!