



# Legislative Priorities

## ARNP Payment Reimbursement Parity

SB 5373 / HB 1495

POLICY

In recent years, private health plans lowered payments to Washington practices when services are provided by an advanced registered nurse practitioner (ARNP) and not a physician. Reduced ARNP reimbursement saves the insurers money, but it costs clinics and the patients they serve by making it harder to keep practices open. And studies comparing patient safety, patient satisfaction, and care quality consistently find similar results between ARNP and physician care. Washington's Medicaid and L&I reimburse 100% for ARNP services. Private health plans should follow the lead of state payers and reimburse ARNPs the same amount as physicians for the same service.

## Standing Order for Medication for School Nurses

HB 1608

POLICY / BUDGET

Legislation and funding are needed to create statewide standing orders allowing school nurses to purchase and administer epinephrine. This will ensure that students receive immediate care in the school building without relying on outside healthcare providers to shoulder this responsibility. It also ensures that the Legislature's authorization for schools to stock these emergency medications can be put into practice.

## Update Property Tax Cap to Support Public Health

SB 5770

POLICY

Public Health nurses provide critical services to our communities, especially as our communities' repair from the COVID-19 pandemic. However, earlier this year in a Seattle Times article County Executive Dow Constantine shared that King County will be forced to close most of its 10 public health clinics by next year unless the Legislature intervenes. To raise the necessary funds to continue these services the Legislature needs to update the cap on property taxes to be tied to inflation and population growth factors with a new cap not to exceed 3%. The current 1% cap has created a structural deficit in local government budgets making it a struggle to fund these critical services. This cap increase is not a tax increase but instead allows for thoughtful local debate on what will work best for each community.

## Keep Our Care Act

SB 5241 / HB 1263

POLICY

Mergers and acquisitions between health care entities like hospitals, hospital systems, and provider organizations are prolific in Washington State and can negatively impact cost, quality, and access to necessary health care services. Yet in Washington, these health entity consolidations receive minimal oversight, allowing large health care systems to dictate patients' access to care. Nurses at these hospitals also see a reduction in staff support and resources. The Keep Our Care Act (KOCA) does not prevent mergers & acquisitions but instead requires hospitals and the state to do the due diligence necessary to address any potential harm that might come from a merger or acquisition.