

Information and guidance related to COVID-19 is changing rapidly. Please refer to the Physicians Insurance website for the most up-to-date information.

Guidance – Expedited Licensure and Telemedicine Options in Washington During COVID-19
Draft date: March 19, 2020

Licensure Guidance

1. Expedited licensure for out of state practitioners in emergencies.

Washington State has made available expedited licensing processes for out-of-state practitioners pursuant to Chapter 70.15 RCW (the Uniform Emergency Volunteer Practitioners Act) for the COVID-19 response.

The process includes emailing an application form to WAserv@doh.wa.gov. Specific requirements, as well as the application form itself (titled Emergency Volunteer Health Practitioners Application), is available in the below link:

<https://www.doh.wa.gov/Emergencies/NovelCoronavirusOutbreak2020/HealthcareProviders/EmergencyVolunteerHealthPractitioners>

More information can be obtained at WAserv@doh.wa.gov (directed to the WAserv coordinator, Kim Butowicz), or 360-236-4090.

2. Expedited State Licensing for Physicians

In addition to the expedited process noted above, out of state physicians may also expedite Washington State licensure using the Interstate Medical Licensure Compact: <https://imlcc.org/>.

3. Expedited Licensure for Nurses

In addition to expedited process noted above, the Nursing Commission has advised that emergency staff requests for temporary practice permits can be sent to nurselicensing@doh.wa.gov with information identifying the urgency of the request based on one or more of the following criteria:

- intensity of patient care
- lack of current staffing to provide patient care
- staff unable to continue to provide patient care due to illness
- existing nursing vacancies that are currently unfilled due to the COVID 19 situation

The Nursing Commission currently advises that it is prioritizing applications to assist with needs in King, Snohomish, and Pierce Counties.

<https://www.doh.wa.gov/Portals/1/Documents/6000/669419.pdf>

4. General Licensing Information

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General information about licensing can be obtained at:
360-236-4700, or email questions to hsga.csc@doh.wa.gov

a. Reactivating Licenses

The DOH has advised that online processing may not be available for practitioners seeking to reactivate a previous license. These requests will need to be completed as paper applications sent with the fee to:

Department of Health

P.O. Box 1099

Olympia, WA 98507-1099

<https://www.doh.wa.gov/LicensesPermitsandCertificates/ProfessionsNewReneworUpdate>

Telemedicine Guidance

1. Telehealth and Virtual Care Services for Out of State Practitioners

Chapter 70.15 RCW can also be used for a health care entity in Washington to offer telehealth or virtual care services to patients in Washington, by employed providers out of state.

For a paid out-of-state licensed provider to be authorized to practice by Chapter 70.15 RCW, the practitioner must:

- “Not have a preexisting employment relationship with the health care entity that requires the practitioner to provide services in Washington. Paid providers can qualify as emergency volunteer health practitioners under RCW 70.15. Unpaid emergency volunteer health practitioners under RCW 70.15 can provide care essentially anywhere and for any entity in Washington.
- Be licensed in another state and be in good standing in every state in which he/she is licensed.
- All eligible practitioners or employees must complete an application to serve as an Emergency Volunteer Health Practitioner and then be registered in the Department of Health’s volunteer health practitioner system before starting to practice in Washington or provide services to Washington patients.

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- Unless modified or restricted by the Department of Health, health care practitioners must adhere to the scope of practice of the equivalent license type in this state, though not outside the scope allowed by his/her state of licensure.”¹
 - In some states, advanced practitioners may have a greater scope of practice than would be allowed here, and they should be made aware of the limitations for practice in Washington of their license type.
- “If engaging in telehealth/telenursing, the nurses and ARNPs must comply with the Nursing Care Quality Assurance Commission’s interpretive statement Telehealth/telenursing for Registered Nurses (PDF).”²

2. Telemedicine Information for Washington State Practitioners

Washington state practitioners can and should make use of telemedicine tools and options during the current emergency. The Washington State Medical Commission (WMC) has a specific Guideline regarding the use of telemedicine, which acknowledges that telemedicine tools are “useful” and provide important benefits to patients.

The full Guideline is available here:

https://wmc.wa.gov/sites/default/files/public/documents/MD2014-03TelemedicineGuideline_approved10-3-14.pdf

a. Licensure

The WMC Guideline requires that a practitioner using telemedicine to practice medicine on patients in Washington must be licensed to practice medicine in Washington (subject to the exceptions noted above).

b. Standard of Care

The WMC Guideline also provides that practitioners using telemedicine will be held to the same standard of care as if they were practicing onsite in Washington State. The practitioner must:

- Establish a practitioner-patient relationship with the patient.
- Obtain informed consent.

¹<https://www.doh.wa.gov/Emergencies/NovelCoronavirusOutbreak2020/HealthcareProviders/EmergencyVolunteerHealthPractitioners>

²<https://www.doh.wa.gov/Emergencies/NovelCoronavirusOutbreak2020/HealthcareProviders/EmergencyVolunteerHealthPractitioners>

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- Evaluate the patient. The telemedicine practitioner may make use of an appropriate surrogate in order to provide necessary in-person observations.
- Document the care in a manner that is permanent and easily available to other practitioners.

c. Documentation

The practitioner using telemedicine as a tool should:

- Document the encounter appropriately and completely so that the record clearly, concisely and accurately reflects what occurred during the encounter.
- Create a record that is permanent and easily available to or on behalf of the patient and other practitioners in accordance with patient consent, direction and applicable standards.
- Document informed consent that includes (a) a reasonable understanding by all parties of the enabling technologies utilized, their capabilities and limitations, and a mutual agreement that they are appropriate for the circumstances, and (b) the credentials of the practitioner.

d. Prescribing

A telemedicine provider may prescribe within the scope of their licensure, when deemed appropriate for the patient. Special caution must be used in prescribing controlled substances.

3. Facility Credentialing/Privileging

The Joint Commission requires that medical staff bylaws including a privileging process for temporary and disaster privileges. EM.02.02.13.

<https://www.jointcommission.org/standards/standard-faqs/critical-access-hospital/medical-staff-ms/000002257/>

Facility bylaws regarding emergency or disaster privileging may allow for:

- Proxy credentialing, which allows the hospital board to credential a separate site institution that has practitioners who hold Washington state licenses.
- Credentialed practitioners to provide services outside the scope of their credentials.

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- Grants of temporary privileges by the CEO in consultation with medical staff leaders.
- Grants of disaster privileges to individuals who present evidence of a professional license, privileges at other hospitals, and a completed Emergency Privileges form. In such circumstances, information verification may take place after the immediate crisis situation.

Other information

The DOH is collecting a wide variety of resources for Washington state health care providers that may also be of benefit as a resource to brief practitioners who are new to practicing in the state: <https://www.doh.wa.gov/Emergencies/NovelCoronavirusOutbreak2020/HealthcareProviders>