

CERTIFICATION OF ENROLLMENT

**ENGROSSED SUBSTITUTE SENATE BILL 5481**

Chapter 212, Laws of 2024

68th Legislature  
2024 Regular Session

UNIFORM TELEHEALTH ACT

EFFECTIVE DATE: June 6, 2024

Passed by the Senate March 5, 2024  
Yeas 49 Nays 0

DENNY HECK

**President of the Senate**

Passed by the House March 1, 2024  
Yeas 94 Nays 0

Laurie Jinkins

**Speaker of the House of  
Representatives**

Approved March 19, 2024 3:13 PM

JAY INSLEE

**Governor of the State of Washington**

CERTIFICATE

I, Sarah Bannister, Secretary of the Senate of the State of Washington, do hereby certify that the attached is **ENGROSSED SUBSTITUTE SENATE BILL 5481** as passed by the Senate and the House of Representatives on the dates hereon set forth.

SARAH BANNISTER

**Secretary**

FILED

March 21, 2024

**Secretary of State  
State of Washington**

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**ENGROSSED SUBSTITUTE SENATE BILL 5481**

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AS AMENDED BY THE HOUSE

Passed Legislature - 2024 Regular Session

**State of Washington                      68th Legislature                      2023 Regular Session**

**By** Senate Health & Long Term Care (originally sponsored by Senators Cleveland and Pedersen; by request of Uniform Law Commission)

READ FIRST TIME 02/17/23.

1            AN ACT Relating to the uniform law commission's uniform  
2 telehealth act; amending RCW 28B.20.830; adding a new chapter to  
3 Title 18 RCW; and providing an expiration date.

4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

5            NEW SECTION.    **Sec. 1.**    SHORT TITLE. This act may be known and  
6 cited as the uniform telehealth act.

7            NEW SECTION.    **Sec. 2.**    DEFINITIONS. The definitions in this  
8 section apply throughout this chapter unless the context clearly  
9 requires otherwise.

10            (1) "Disciplining authority" means an entity to which a state has  
11 granted the authority to license, certify, or discipline individuals  
12 who provide health care.

13            (2) "Electronic" means relating to technology having electrical,  
14 digital, magnetic, wireless, optical, electromagnetic, or similar  
15 capabilities.

16            (3) "Health care" means care, treatment, or a service or  
17 procedure, to maintain, monitor, diagnose, or otherwise affect an  
18 individual's physical or behavioral health, injury, or condition.

19            (4) (a) "Health care practitioner" means:

20            (i) A physician licensed under chapter 18.71 RCW;

- 1 (ii) An osteopathic physician or surgeon licensed under chapter  
2 18.57 RCW;
- 3 (iii) A podiatric physician and surgeon licensed under chapter  
4 18.22 RCW;
- 5 (iv) An advanced registered nurse practitioner licensed under  
6 chapter 18.79 RCW;
- 7 (v) A naturopath licensed under chapter 18.36A RCW;
- 8 (vi) A physician assistant licensed under chapter 18.71A RCW; or  
9 (vii) A person who is otherwise authorized to practice a  
10 profession regulated under the authority of RCW 18.130.040 to provide  
11 health care in this state, to the extent the profession's scope of  
12 practice includes health care that can be provided through  
13 telehealth.
- 14 (b) "Health care practitioner" does not include a veterinarian  
15 licensed under chapter 18.92 RCW.
- 16 (5) "Professional practice standard" includes:  
17 (a) A standard of care;  
18 (b) A standard of professional ethics; and  
19 (c) A practice requirement imposed by a disciplining authority.
- 20 (6) "Scope of practice" means the extent of a health care  
21 practitioner's authority to provide health care.
- 22 (7) "State" means a state of the United States, the District of  
23 Columbia, Puerto Rico, the United States Virgin Islands, or any other  
24 territory or possession subject to the jurisdiction of the United  
25 States. The term includes a federally recognized Indian tribe.
- 26 (8) "Telecommunication technology" means technology that supports  
27 communication through electronic means. The term is not limited to  
28 regulated technology or technology associated with a regulated  
29 industry.
- 30 (9) "Telehealth" includes telemedicine and means the use of  
31 synchronous or asynchronous telecommunication technology by a  
32 practitioner to provide health care to a patient at a different  
33 physical location than the practitioner. "Telehealth" does not  
34 include the use, in isolation, of email, instant messaging, text  
35 messaging, or fax.
- 36 (10) "Telehealth services" means health care provided through  
37 telehealth.

38 NEW SECTION. **Sec. 3.** SCOPE. (1) This chapter applies to the  
39 provision of telehealth services to a patient located in this state.

1 (2) This chapter does not apply to the provision of telehealth  
2 services to a patient located outside this state.

3 NEW SECTION. **Sec. 4.** TELEHEALTH AUTHORIZATION. (1) A health  
4 care practitioner may provide telehealth services to a patient  
5 located in this state if the services are consistent with the health  
6 care practitioner's scope of practice in this state, applicable  
7 professional practice standards in this state, and requirements and  
8 limitations of federal law and law of this state.

9 (2) This chapter does not authorize provision of health care  
10 otherwise regulated by federal law or law of this state, unless the  
11 provision of health care complies with the requirements, limitations,  
12 and prohibitions of the federal law or law of this state.

13 (3) A practitioner-patient relationship may be established  
14 through telehealth. A practitioner-patient relationship may not be  
15 established through email, instant messaging, text messaging, or fax.

16 NEW SECTION. **Sec. 5.** PROFESSIONAL PRACTICE STANDARD. (1) A  
17 health care practitioner who provides telehealth services to a  
18 patient located in this state shall provide the services in  
19 compliance with the professional practice standards applicable to a  
20 health care practitioner who provides comparable in-person health  
21 care in this state. Professional practice standards and law  
22 applicable to the provision of health care in this state, including  
23 standards and law relating to prescribing medication or treatment,  
24 identity verification, documentation, informed consent,  
25 confidentiality, privacy, and security, apply to the provision of  
26 telehealth services in this state.

27 (2) A disciplining authority in this state shall not adopt or  
28 enforce a rule that establishes a different professional practice  
29 standard for telehealth services merely because the services are  
30 provided through telehealth or limits the telecommunication  
31 technology that may be used for telehealth services.

32 NEW SECTION. **Sec. 6.** OUT-OF-STATE HEALTH CARE PRACTITIONER. An  
33 out-of-state health care practitioner may provide telehealth services  
34 to a patient located in this state if the out-of-state health care  
35 practitioner:

36 (1) Holds a current license or certification required to provide  
37 health care in this state or is otherwise authorized to provide

1 health care in this state, including through a multistate compact of  
2 which this state is a member; or

3 (2) Holds a license or certification in good standing in another  
4 state and provides the telehealth services:

5 (a) In the form of a consultation with a health care practitioner  
6 who has a practitioner-patient relationship with the patient and who  
7 remains responsible for diagnosing and treating the patient in the  
8 state;

9 (b) In the form of a specialty assessment, diagnosis, or  
10 recommendation for treatment. This does not include the provision of  
11 treatment; or

12 (c) In the form of follow up by a primary care practitioner,  
13 mental health practitioner, or recognized clinical specialist to  
14 maintain continuity of care with an established patient who is  
15 temporarily located in this state and received treatment in the state  
16 where the practitioner is located and licensed.

17 NEW SECTION. **Sec. 7.** LOCATION OF CARE—VENUE. (1) The provision  
18 of a telehealth service under this chapter occurs at the patient's  
19 location at the time the service is provided.

20 (2) In a civil action arising out of a health care practitioner's  
21 provision of a telehealth service to a patient under this chapter,  
22 brought by the patient or the patient's personal representative,  
23 conservator, guardian, or a person entitled to bring a claim under  
24 the state's wrongful death statute, venue is proper in the patient's  
25 county of residence in this state or in another county authorized by  
26 law.

27 NEW SECTION. **Sec. 8.** RULE-MAKING AUTHORITY. Disciplining  
28 authorities may adopt rules to administer, enforce, implement, or  
29 interpret this chapter.

30 NEW SECTION. **Sec. 9.** UNIFORMITY OF APPLICATION AND  
31 CONSTRUCTION. In applying and construing this chapter, a court shall  
32 consider the promotion of uniformity of the law among jurisdictions  
33 that enact the uniform telehealth act.

34 NEW SECTION. **Sec. 10.** (1) Nothing in this act shall be  
35 construed to require a health carrier as defined in RCW 48.43.005, a  
36 health plan offered under chapter 41.05 RCW, or medical assistance

1 offered under chapter 74.09 RCW to reimburse for telehealth services  
2 that do not meet statutory requirements for reimbursement of  
3 telemedicine services.

4 (2) This chapter does not permit a health care practitioner to  
5 bill a patient directly for a telehealth service that is not a  
6 permissible telemedicine service under chapter 48.43, 41.05, or 74.09  
7 RCW without receiving patient consent to be billed prior to providing  
8 the telehealth service.

9 **Sec. 11.** RCW 28B.20.830 and 2021 c 157 s 9 are each amended to  
10 read as follows:

11 (1) The collaborative for the advancement of (~~telemedicine~~)  
12 telehealth is created to enhance the understanding and use of health  
13 services provided through (~~telemedicine~~) telehealth and other  
14 similar models in Washington state. The collaborative shall be hosted  
15 by the University of Washington telehealth services and shall be  
16 comprised of one member from each of the two largest caucuses of the  
17 senate and the house of representatives, and representatives from the  
18 academic community, hospitals, clinics, and health care providers in  
19 primary care and specialty practices, carriers, and other interested  
20 parties.

21 (2) By July 1, 2016, the collaborative shall be convened. The  
22 collaborative shall develop recommendations on improving  
23 reimbursement and access to services, including originating site  
24 restrictions, provider to provider consultative models, and  
25 technologies and models of care not currently reimbursed; identify  
26 the existence of (~~telemedicine~~) telehealth best practices,  
27 guidelines, billing requirements, and fraud prevention developed by  
28 recognized medical and (~~telemedicine~~) telehealth organizations; and  
29 explore other priorities identified by members of the collaborative.  
30 After review of existing resources, the collaborative shall explore  
31 and make recommendations on whether to create a technical assistance  
32 center to support providers in implementing or expanding services  
33 delivered through (~~telemedicine~~) telehealth technologies.

34 (3) The collaborative must submit an initial progress report by  
35 December 1, 2016, with follow-up policy reports including  
36 recommendations by December 1, 2017, December 1, 2018, and December  
37 1, 2021. The reports shall be shared with the relevant professional  
38 associations, governing boards or commissions, and the health care  
39 committees of the legislature.

1 (4) The collaborative shall study store and forward technology,  
2 with a focus on:

3 (a) Utilization;

4 (b) Whether store and forward technology should be paid for at  
5 parity with in-person services;

6 (c) The potential for store and forward technology to improve  
7 rural health outcomes in Washington state; and

8 (d) Ocular services.

9 (5) The meetings of the board shall be open public meetings, with  
10 meeting summaries available on a web page.

11 (6) The collaborative must study the need for an established  
12 patient/provider relationship before providing audio-only  
13 ((telemedicine)) telehealth, including considering what types of  
14 services may be provided without an established relationship. By  
15 December 1, 2021, the collaborative must submit a report to the  
16 legislature on its recommendations regarding the need for an  
17 established relationship for audio-only ((telemedicine)) telehealth.

18 (7) The collaborative must review the proposal authored by the  
19 uniform law commission for the state to implement a process for out-  
20 of-state health care providers to register with the disciplinary  
21 authority regulating their profession in this state allowing that  
22 provider to provide services through telehealth or store and forward  
23 technology to persons located in this state. By December 1, 2024, the  
24 collaborative must submit a report to the legislature on its  
25 recommendations regarding the proposal.

26 (8) The future of the collaborative shall be reviewed by the  
27 legislature with consideration of ongoing technical assistance needs  
28 and opportunities. ((The collaborative terminates December 31,  
29 2023.))

30 (9) This section expires July 1, 2025.

31 NEW SECTION. Sec. 12. SEVERABILITY. If any provision of this  
32 act or its application to any person or circumstance is held invalid,  
33 the remainder of the act or the application of the provision to other  
34 persons or circumstances is not affected.

35 NEW SECTION. Sec. 13. Sections 1 through 10 of this act  
36 constitute a new chapter in Title 18 RCW.

Passed by the Senate March 5, 2024.  
Passed by the House March 1, 2024.

Approved by the Governor March 19, 2024.  
Filed in Office of Secretary of State March 21, 2024.

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