

FORMATTING NOTE:

In initiatives, legislative bills and other proposed measures, language that is to be deleted from current statutes is represented by a "strikethrough" character and language that is to be added is underlined. Because these special characters cannot be formatted in all Internet browsers, a different set of symbols is used for presenting these proposals on-line. The symbols are as follows:

- Text that is surrounded by (({- text here -})) is text that will be DELETED FROM the existing statute if the proposed measure is approved.
- Text that is surrounded by {+ text here +} is text that will be ADDED TO the existing statute if the proposed measure is approved.
- {+ NEW SECTION+} (found at the beginning of a section or paragraph) indicates that ALL of the text in that section will become law if the proposed measure is approved.

* * *
INITIATIVE 192

I, Ralph Munro, Secretary of State of the State of Washington and custodian of its seal, hereby certify that, according to the records on file in my office, the attached copy of Initiative Measure No. 192 to the Legislature is a true and correct copy as it was received by this office.

AN ACT Relating to health plans; adding a new section to chapter 48.43 RCW; and creating a new section.

BE IT ENACTED BY THE PEOPLE OF THE STATE OF WASHINGTON:

{+ NEW SECTION. +} Sec. 1. The purpose of section 2 of this act is to expand access to health care providers so that Washington state residents, not the government or health insurance companies, select health care providers for themselves and their families.

{+ NEW SECTION. +} Sec. 2. A new section is added to chapter 48.43 RCW to read as follows:

Every health plan delivered, issued for delivery, or renewed by a health carrier on and after July 1, 1998:

(1)(a) Shall permit every individual doctor, as defined below, to provide health services or care for conditions to the extent that:

(i) The provision of such health services or care is within the doctor's scope of practice; and

(ii) The doctor agrees to abide by standards related to:

(A) Provision, utilization review, and cost containment of health services;

(B) Management and administrative procedures; and

(C) Provision of cost-effective and clinically efficacious health services; and,

(iii) The plan covers the condition or provides the service.

(b) For purposes of this section, the term "doctor" means doctor of podiatric medicine and surgery licensed under chapter 18.22 RCW, doctor of chiropractic licensed under chapter 18.25 RCW, doctor of naturopathy licensed under chapter 18.36A RCW, doctor of optometry licensed under chapter 18.53 RCW, doctor of osteopathic medicine and surgery licensed under chapter 18.57 RCW, doctor of pharmacy or pharmacist licensed under chapter 18.64 RCW, doctor of medicine licensed under chapter

18.71 RCW, and doctor of psychology licensed under chapter 18.83 RCW. This subsection (1) shall not apply to a health maintenance organization to the extent that it directly employs doctors.

(2) May include patient cost-sharing requirements, gatekeeper or referral requirements, or any other managed care provisions, only to assure efficient delivery of health care services. Such requirements or provisions may not discriminate unfairly against any category of provider included in the plan and must be written and applied on a substantially fair and uniform basis among all health care providers included in the plan.

--- END ---