

HOUSE BILL REPORT

SB 6485

As Passed House - Amended:

March 2, 2004

Title: An act relating to improving the regulatory environment for hospitals.

Brief Description: Improving the regulatory environment for hospitals.

Sponsors: By Senators Deccio and Winsley.

Brief History:

Committee Activity:

Health Care: 2/24/04, 2/26/04 [DPA].

Floor Activity:

Passed House - Amended: 3/2/04, 95-0.

Brief Summary of Bill (As Amended by House)

- Establishes a pilot project to coordinate hospital surveys and audits among state and local agencies.
- Requires that the Department of Health, and other state and local agencies that inspect hospitals, coordinate survey and inspection activities and standards.

HOUSE COMMITTEE ON HEALTH CARE

Majority Report: Do pass as amended. Signed by 12 members: Representatives Cody, Chair; Morrell, Vice Chair; Bailey, Ranking Minority Member; Alexander, Benson, Campbell, Clibborn, Darneille, Moeller, Rodne, Schual-Berke and Skinner.

Staff: Chris Blake (786-7392).

Background:

Acute care hospitals are among the 45 types of facilities that the Department of Health (Department) regulates. These facilities provide continuous accommodations, facilities, and services to patients requiring observation, diagnosis, or care over a period of at least 24 hours. Acute care hospitals serve patients who may require surgery and interventional services, obstetrical and nursery services, emergency care units or services, critical care units or services, cardiology services, pediatric care services, rehabilitation units, oncology services, or laboratory services.

Hospitals are licensed according to minimum standards established by the Department in rule, while other state and local agencies regulate specific aspects of health care facility operations. Conditions that do not meet the licensing standards are generally discovered either through complaints received by the Department or as a result of inspections conducted regularly by either the Department or an approved accrediting organization. Upon notice of a violation, facilities have an opportunity to correct the deficiency, depending upon the severity of the violation. After a facility has either failed or refused to correct a condition that is not in compliance with the standards of licensure, the Department may modify, suspend, or revoke its license. Such actions are governed by the Administrative Procedures Act and a procedural section of the Department's authority.

Summary of Amended Bill:

The Department of Health (Department) must coordinate with the Washington State Hospital Association to oversee a pilot project to implement and assess strategies related to the effectiveness of hospital surveys and audits. Other participants include: the State Auditor's Office, the Department of Revenue, the Department of Social and Health Services, the State Board of Pharmacy, the Department of Ecology, the Office of the State Fire Marshal, the Department of Labor and Industries, local building and fire officials, and the Joint Commission on Accreditation of Health Care Organizations. The strategies must address: providing notice prior to a survey or audit, coordinating separate visits, allowing the visit of one agency to substitute for the visit of another, using combined entrance meetings with hospital management, identifying documents common to all surveys and audits, and minimizing the duplication of documents. The Department must report to the Legislature on the pilot project results by December 1, 2004.

State agencies that conduct surveys or audits of hospitals must list on their web sites the most frequent problems identified in hospital surveys, methods for avoiding or addressing them, and a contact person for assistance with those problems.

The Department, in cooperation with other state agencies, shall develop an anonymous evaluation instrument to allow hospitals to assess a survey or audit with respect to the survey's quality, effectiveness, and extent to which it supports improving patient care without unnecessarily burdening the hospital. The Department shall distribute the evaluations that it receives to the appropriate agency and prepare an annual report of the evaluations to the Legislature.

Fire protection standards for hospitals developed by the Washington State Patrol must be consistent with the standards of the United States Department of Health and Human Service's Centers for Medicare and Medicaid Services.

State agencies must provide a hospital with at least four weeks notice before conducting a survey or audit unless the agency is responding to a complaint or immediate public health and safety concerns or it would conflict with other state and federal laws.

In addition to coordinating hospital inspection functions with the Department of Social and Health Services, the Department must coordinate with the Office of the State Fire Marshal and local agencies when inspecting hospitals. The Department must notify and invite the Office of the State Fire Marshal and local agencies at least four weeks before conducting an inspection. The Department must provide a copy of its inspection report to these agencies.

The Department must coordinate the hospital construction review process with other state and local agencies, including the Department of Labor and Industries, the Office of the State Fire Marshal, and local building and fire officials. Inconsistencies or conflicts among the agencies must be identified and eliminated. The Department must report to the Legislature on the implementation of this coordination by September 1, 2004.

Appropriation: None.

Fiscal Note: Available.

Effective Date of Amended Bill: The bill takes effect 90 days after adjournment of session in which bill is passed.

Testimony For: This bill codifies the recommendations of an interim report regarding the coordination of hospital surveys and minimization of regulatory burden on hospitals.

Testimony Against: None.

Persons Testifying: (In support) Ron Weaver, Department of Health; and Lisa Thatcher, Washington State Hospital Association.

(Neutral) Stu Clark, Department of Ecology.

Persons Signed In To Testify But Not Testifying: None.