

SENATE BILL REPORT

SB 5297

As Reported By Senate Committee On:
Health & Long-Term Care, February 2, 1996
Ways & Means, February 6, 1996

Title: An act relating to the licensure of ambulatory surgical centers.

Brief Description: Adopting minimum standards for ambulatory surgical centers.

Sponsors: Senators Quigley, Moyer, Deccio, Franklin, Winsley and Wood; by request of Department of Health.

Brief History:

Committee Activity: Health & Long-Term Care: 2/1/96, 2/2/96 [DPS].
Ways & Means: 2/6/96 [DPS (HEA)].

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: That Substitute Senate Bill No. 5297 be substituted therefor, and the substitute bill do pass.

Signed by Senators Quigley, Chair; Deccio, Fairley, Franklin, Moyer, Thibaudeau, Winsley and Wood.

Staff: Rhoda Jones (786-7198)

SENATE COMMITTEE ON WAYS & MEANS

Majority Report: That Substitute Senate Bill No. 5297 as recommended by Committee on Health & Long-Term Care be substituted therefor, and the substitute bill do pass.

Signed by Senators Rinehart, Chair; Loveland, Vice Chair; Bauer, Drew, Finkbeiner, Fraser, Hargrove, Kohl, Long, McDonald, Moyer, Pelz, Quigley, Sheldon, Snyder, Spanel, Strannigan, Sutherland, West and Winsley.

Staff: Susan Lucas (786-7711)

Background: An increasing number of surgical procedures are being performed outside hospitals in free-standing ambulatory surgical centers. It is estimated that by next year, more than 60 percent of surgical procedures performed on patients who may receive general anesthesia, but go home within 24 hours, will be performed at ASCs.

Presently, these outpatient surgical facilities are not regulated by the state.

Summary of Substitute Bill: The Department of Health establishes licensure standards for construction, maintenance and operation of ambulatory surgical centers. Ambulatory surgical centers include any distinct entity operating exclusively to perform outpatient procedures.

Hospitals, physician, dental, or podiatry offices are excluded unless the providers from outside are allowed to use the facility.

The renewal period for licensure is two years. The department inspects the center at least once during that period. Compliance surveys conducted by approved accrediting or certifying bodies can be used in lieu of department-conducted surveys in certain instances.

Charity care requirements for ASCs are referenced by statute.

Substitute Bill Compared to Original Bill: Reference to "exclusively" is replaced with "primarily" to describe the amount of surgery done at ASCs. The word "freestanding" is added. Dentists are allowed to invite specialists into their offices to do surgery without having an ambulatory surgical center license. DOH standards for ASC licensure may not be greater than those required by Medicare. DOH must set medical gas piping standards. Charity care provisions are described.

Appropriation: None.

Fiscal Note: Available.

Effective Date: The bill takes effect on July 1, 1996.

Testimony For (Health & Long-Term Care): Licensure of ASCs is important because so much more outpatient surgery is being performed out of hospital setups.

Testimony Against (Health & Long-Term Care): ASCs should not have to go through the certificate of need process.

Testified (Health & Long-Term Care): Kathy Stout, DOH (pro); Jane Johnson, FASCAWS (pro); Trevor Sandison, FASCAWS (pro); Linda Hull, WA State Dental Assn. (con).

Testimony For (Ways & Means): None.

Testimony Against (Ways & Means): None.

Testified (Ways & Means): No one.