

# HOUSE BILL REPORT

## HB 2083

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**As Reported by House Committee On:**  
Health Care

**Title:** An act relating to hospital emergency services.

**Brief Description:** Establishing emergency service requirements for hospitals.

**Sponsors:** Representatives Cody, Benson and Darneille.

**Brief History:**

**Committee Activity:**

Health Care: 3/4/03 [DPS].

**Brief Summary of Substitute Bill**

- Requires hospitals to provide emergency services 24 hours per day, seven days per week.

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### HOUSE COMMITTEE ON HEALTH CARE

**Majority Report:** The substitute bill be substituted therefor and the substitute bill do pass. Signed by 7 members: Representatives Cody, Chair; Morrell, Vice Chair; Benson, Campbell, Clibborn, Darneille and Moeller.

**Minority Report:** Without recommendation. Signed by 5 members: Representatives Pflug, Ranking Minority Member; Bailey, Assistant Ranking Minority Member; Alexander, Schual-Berke and Skinner.

**Staff:** Chris Blake (786-7392).

**Background:**

State Regulation of Hospitals

Hospitals are health care facilities that provide continuous accommodations, facilities, and services, over a period of at least 24 hours, to patients requiring observation, diagnosis, or care. Acute care hospitals may serve patients who 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, and laboratory services.

If a hospital chooses to provide emergency services, state regulations require that emergency facilities: are appropriately located and accessible; have at least one major treatment or trauma room; have a minor treatment and examination room; have an observation room; and have room for severely disturbed patients. If the hospital provides regular trauma care, it must meet additional criteria.

#### Federal Law Regarding Emergency Services

The Emergency Medical Treatment and Labor Act (EMTALA) requires hospitals that have an emergency department and participate in the Medicare program to provide care for any individual that comes to the hospital's emergency department. Such care includes providing the individual with a medical screening exam to determine the presence of an emergency condition. If such a condition is present, the hospital must either provide treatment to stabilize the person or, if the resources to treat the person are not available, transfer the individual to another medical facility.

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#### **Summary of Substitute Bill:**

All licensed hospitals in Washington must provide emergency services 24 hours per day, seven days per week in a designated area of the hospital. Each hospital must have at least an emergency physician who is immediately available, a roster of on-call medical staff members, and procedures to ensure the patient's safety until transfer to a more appropriate facility for the patient's needs. Each hospital must meet all state and federal laws regarding emergency care and facilities.

The emergency services requirement does not apply to: hospitals that only provide psychiatric or rehabilitative services; hospitals licensed before January 1, 2003; and hospitals that are designated as critical access hospitals.

#### **Substitute Bill Compared to Original Bill:**

The exception for specialty hospitals in a health care system with another general hospital in the county is eliminated. A new exception is created for critical access hospitals.

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**Appropriation:** None.

**Fiscal Note:** Not Requested.

**Effective Date of Substitute Bill:** The bill takes effect 90 days after adjournment of

session in which bill is passed.

**Testimony For:** Specialty hospitals that do not have to provide services to patients needing emergency care have a competitive advantage over general hospitals that provide this care. This bill levels the playing field between specialty hospitals and general hospitals.

**Testimony Against:** Requiring specialty hospitals to provide continuous emergency services will discourage physicians from practicing in Washington. Hospitals are currently profitable in Washington and additional competition will not hurt them.

**Testified:** (In support) Rob Menaul and Lisa Thatcher, Washington State Hospital Association.

(Opposed) Andy Dolan and Carl Nelson, Washington State Medical Association.