SENATE BILL REPORT SHB 1642

As Reported By Senate Committee On: Health & Long-Term Care, April 3, 2003

Title: An act relating to peer review committees and coordinated quality improvement programs.

Brief Description: Modifying medical information exchange and disclosure provisions.

Sponsors: House Committee on Judiciary (originally sponsored by Representatives Morrell, Pflug, Cody, Benson, Schual-Berke, Alexander, Clibborn, Edwards, Moeller and Kenney).

Brief History:

Committee Activity: Health & Long-Term Care: 3/27/03, 4/3/03 [DPA].

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: Do pass as amended.

Signed by Senators Deccio, Chair; Winsley, Vice Chair; Brandland, Franklin, Keiser, Parlette and Thibaudeau.

Staff: Tanya Karwaki (786-7447)

Background: Under Washington law, hospitals are required to maintain coordinated quality improvement programs designed to improve the quality of health care services and prevent medical malpractice. Other health institutions and medical facilities, and health provider groups consisting of at least ten providers, are authorized to maintain coordinated quality improvement programs. Programs maintained by these other entities must be approved by the Department of Health and must comply, or substantially comply, with the statutorily required components of the hospital coordinated quality improvement programs.

Coordinated quality improvement programs must include: a medical staff privileges sanction procedure; periodic review of employee credentials and competency in the delivery of health care services; a procedure for prompt resolution of patient grievances; collection of information relating to negative outcomes, patient grievances, settlements and awards, and safety improvement activities; and quality improvement education programs. Components of the education programs include quality improvement, patient safety, injury prevention, improved communication with patients, and causes of malpractice claims.

With some limited exceptions, information and documents created for or collected and maintained by a quality improvement committee are not subject to discovery, not admissible into evidence in any civil action, and are confidential and not subject to public disclosure.

Summary of Amended Bill: A coordinated quality improvement program may share information created for, and collected and maintained by, a quality improvement committee, a peer review committee or review boards with other coordinated quality improvement

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programs for the purpose of improving the quality of health care services and preventing medical malpractice. Information shared between coordinated quality improvement programs, and information created or maintained as a result of sharing information, is confidential and not discoverable or admissible in civil proceedings.

Health care provider groups that consist of five or more providers may maintain a coordinated quality improvement program.

Medical errors are added to the list of issues that must be included in quality improvement education programs.

Amended Bill Compared to Substitute Bill: The striker changes the underlying bill by providing that health care provider groups of five or more providers may maintain a coordinated quality improvement program.

Appropriation: None.

Fiscal Note: Not requested.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Testimony For: This bill permits different organizations to share information without reinventing the wheel. This will improve the health care delivery system by helping to avert future errors. This bill needs to be amended to better define what information is protected. There is concern that any amendment not conflict with current state or federal law.

Testimony Against: None.

Testified: Lisa Thatcher, Washington State Hospital Association (pro); Becky Repp, Washington State Hospital Association (pro); Patty Rathbun, Department of Health (pro); Larry Shannon, Washington State Trial Lawyers Association (needs amending); Lou Powers, Citizen's Health (needs amending).

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