

SENATE BILL REPORT

ESB 5949

As Passed Senate, March 19, 2003

Title: An act relating to hospital emergency services.

Brief Description: Establishing emergency service requirements for hospitals.

Sponsors: Senators Deccio and Thibaudeau.

Brief History:

Committee Activity: Health & Long-Term Care: 2/27/03 [DP].

Passed Senate: 3/19/03, 49-0.

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: Do pass.

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

Staff: Jonathan Seib (786-7427)

Background: Current law does not require a hospital to have an emergency department, although those that choose to do so are subject to certain obligations regarding patient care. There is concern that the increasing demands placed on these departments, as both primary and emergency care providers, could prompt those building new hospitals to choose not to include an emergency department, to the detriment of the communities in which they are built.

Summary of Bill: A hospital must provide emergency services 24 hours per day, seven days per week in a designated area of the hospital, meeting standards specified in the act and those otherwise established by the Department of Health and federal law. This requirement does not apply to any specialty hospital that provides only psychiatric, pediatric, long-term acute care, or rehabilitative services, or to a hospital licensed prior to January 1, 2003. Also exempt is any hospital designated as a critical access hospital. The requirement expires on July 1, 2004.

The Department of Health, in consultation with affected stakeholders, must study the establishment of specialty hospitals, the requirements of this act, and the impact that specialty hospitals have on the delivery of health care, addressing several specified issues. The department must report to the Legislature by December 1, 2003. The Legislature is to reevaluate the requirements of the act based on the study.

Appropriation: None.

Fiscal Note: Not requested.

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

Testimony For: This bill is preemptive; if something is not done soon, there will be specialty hospitals built in this state that do not have emergency departments. This is a growing problem across the country, with at least six other states addressing it legislatively in 2002. The increasingly difficult environment in which existing hospitals must operate would be made worse if new hospitals are built without emergency rooms. These new hospitals would undermine current hospitals by not sharing in the burdens that an emergency department brings, but that are integral to a hospital's mission and the well being of the health care system.

Testimony Against: The bill appears to apply only to new surgical specialty hospitals owned by physicians. If it is to effectively address its stated purpose, it should also apply to existing hospitals. It creates an unequal playing field to have the bill apply only prospectively.

Testified: PRO: Robb Menaul, Lisa Thatcher, Washington State Hospital Association;
CON: Andrew Dolan, Washington State Medical Association.