

SENATE BILL REPORT

SB 6273

As Reported By Senate Committee On:
Health & Long-Term Care, February 4, 2004

Title: An act relating to regulating hospitals and health professions.

Brief Description: Regulating hospitals and health professions.

Sponsors: Senators Keiser, Winsley, Thibaudeau and Kohl-Welles.

Brief History:

Committee Activity: Health & Long-Term Care: 1/27/04, 2/4/04 [DPS].

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: That Substitute Senate Bill No. 6273 be substituted therefor, and the substitute bill do pass.

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

Staff: Tanya Karwaki (786-7447)

Background: The Medical Quality Assurance Commission is the disciplinary authority for physicians charged with unprofessional conduct under the Uniform Disciplinary Act. The actions the commission are authorized to make upon a finding of unprofessional conduct include revocation of the license, suspension of the license, or censure or reprimand the physician.

Currently, hospitals must report to the commission when a physician's clinical privileges are terminated or restricted based on a determination that the physician may have committed unprofessional conduct, or when a physician resigns in order to avoid hospital action regarding his or her clinical privileges. The report must be made within 60 days of the date the hospital's peer review committee took action or the physician accepted a voluntary change to his or her privileges. Failure to do so may subject the hospital to a civil penalty of not more than \$250.

There is concern that there is not sufficient compliance with reporting to the commission.

Summary of Substitute Bill: Hospitals must post notification of whistleblower protections for reporting improper quality of care in conspicuous places where notices to affected employees are usually posted. The Department of Health must approve such notices.

The commission, upon a finding that a license holder or applicant has committed unprofessional conduct or is unable to practice medicine safely, may consider imposing sanctions and may take into account the arguments of the participants, including other charges or sanctions.

Substitute Bill Compared to Original Bill: The substitute bill removes the requirement that the Department of Health specify and furnish whistleblower notices, replacing it with a requirement that the department approve such notices. The increased civil penalty for hospitals failing to comply with reporting requirements and the requirement of a review of the physical and mental health capacity and competence for medical staff who lose their privileges are removed. It is clarified that the commission may, when considering the imposition of sanctions, take into account the participants' arguments, including other charges or sanctions.

Appropriation: None.

Fiscal Note: Not requested.

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

Testimony For: The increased civil penalty placed on hospitals will send a message. Also, a current loophole where a physician leaves in order to avoid peer review will be closed. The bill, however, needs amending regarding the separation of sanctions from the hearing process.

Testimony Against: The notice section of the bill is missing the requirement of staff to report to the hospital. The review of a physician's competence would sometimes be redundant or moot, such as when a physician retired. SB 6210 would really fix the situation.

Testimony Other: A paper review of physicians would be acceptable, but there should be cause for an in person review.

Testified: Addy Dolan, Medical Assn.; Ron Weaver, DOH (pro); Becky Repp, WHCRMS (con).