

# FINAL BILL REPORT

## SHB 2304

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C 440 L 07

Synopsis as Enacted

**Brief Description:** Providing for the issuance of a certificate of need for certain cardiac care services.

**Sponsors:** By House Committee on Appropriations (originally sponsored by Representatives Morrell, Quall, McDonald, Bailey, Grant, Walsh, Haler, McCune, Seaquist, McDermott, Kenney, Cody, Darneille, Dunn, Schual-Berke, Kessler, Conway, Springer, Hudgins, Green, Blake, Rodne, Goodman, Campbell, VanDeWege, Williams, Hunter, Takko and Moeller).

**House Committee on Health Care & Wellness**

**House Committee on Appropriations**

**Senate Committee on Health & Long-Term Care**

**Senate Committee on Ways & Means**

### **Background:**

Percutaneous coronary interventions are procedures used to treat patients with diseased arteries of the heart. One common intervention is coronary angioplasty. This medical procedure is used to restore blood flow through an artery in the heart that has been blocked due to the accumulation of plaque on the inner walls of the artery. The procedure involves the insertion of a thin tube into a blood vessel which is directed to the site of the blockage. At the end of the tube is a small balloon or other device which is inflated to push the plaque against the wall of the artery to widen the artery and increase blood flow.

In Washington, only hospitals that have an established on-site open heart surgery program may perform nonemergent interventional cardiology procedures. Open heart surgery relates to the care of patients who have surgery on the heart muscle, valves, arteries, or other structures and who require the use of a heart lung bypass machine. Open heart surgery is considered a tertiary service which requires that a hospital receive a certificate of need from the Department of Health (Department) prior to offering these services. To obtain a certificate of need to provide open heart surgery services, the hospital must perform a minimum of 250 open heart surgeries per year.

### **Summary:**

By July 1, 2008, the Department must adopt rules that establish criteria for issuing a certificate of need to perform elective percutaneous coronary interventions at hospitals that do not provide on-site cardiac surgery. Prior to beginning the rulemaking process, the Department must contract for an independent, evidence-based review of the circumstances in which elective percutaneous coronary interventions should be allowed at hospitals that do not provide on-site cardiac surgery. The review must address access to care, patient safety, quality

outcomes, costs, and the stability of Washington's cardiac care delivery system and existing cardiac providers, and must ensure that procedure volumes at the University of Washington Medical Center are sufficient for training cardiologists.

**Votes on Final Passage:**

House	97	0	
Senate	46	2	(Senate amended)
House	92	0	(House concurred)

**Effective:** July 22, 2007