

SENATE BILL REPORT

SSB 6171

As Passed Senate, April 23, 2009

Title: An act relating to savings in programs under the supervision of the department of health.

Brief Description: Concerning savings in programs under the supervision of the department of health.

Sponsors: Senate Committee on Ways & Means (originally sponsored by Senator Prentice).

Brief History:

Committee Activity: Ways & Means: 4/18/09 [DPS].

Passed Senate: 4/23/09, 48-0.

SENATE COMMITTEE ON WAYS & MEANS

Majority Report: That Substitute Senate Bill No. 6171 be substituted therefor, and the substitute bill do pass.

Signed by Senators Prentice, Chair; Fraser, Vice Chair, Capital Budget Chair; Tom, Vice Chair, Operating Budget; Carrell, Fairley, Hewitt, Hobbs, Honeyford, Keiser, Kline, Kohl-Welles, McDermott, Murray, Parlette, Pridemore, Regala, Rockefeller and Schoesler.

Staff: Elaine Deschamps (786-7441)

Background: Group B public water systems provide drinking water for between two and fourteen households and serve less than 25 people per day. Larger Group A public water systems must meet federal standards, but Group B systems are not regulated by the federal government. Under current law, the Department of Health (DOH) staff review and approve the systems, conduct water sampling activities, and respond to emergencies.

The DOH provides technical assistance to local health jurisdictions for the assessment of the degree of contamination at properties used as clandestine drug laboratories.

Chapter 56, Laws of 2008 (SHB 2431) expanded the information that must be provided to pregnant patients about the differences between and the potential benefits and risks of public or private cord blood banking, and the information must be sufficient to allow a pregnant woman to make a decision before her third trimester of pregnancy about whether to participate in a cord blood banking program. It requires the DOH update existing rules to include these provisions.

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

Under RCW 70.56, an "adverse event" means the list of serious reportable events adopted by the National Quality Forum in 2002. A medical facility must notify the DOH within 48 hours of confirmation that an adverse event has occurred, and then it must submit notification of the event, date, type, and any additional contextual information to the DOH within 45 days. The DOH must contact with an independent entity to develop a secure internet-based system for the reporting of adverse events and incidents. The independent entity is responsible for receiving and analyzing the notifications and reports, and developing recommendations for changes in health care practices for the purposes of reducing the number and severity of adverse events.

Under current law, the Pesticide Incident Reporting and Tracking (PIRT) Review Panel reviews procedures for investigating and reporting pesticide incidents. The panel consists of ten members who are agency directors, university representatives, a toxicologist, and a member of the public. Several agencies, including the DOH, conduct pesticide investigations and report to the panel.

Summary of Substitute Bill: A number of changes are made to the DOH statute to allow for the agency to achieve savings for the 2009 Supplemental and 2009-11 Biennial budgets, including:

- The requirement that the DOH review and approve Group B water systems, monitor water quality standards, and establish maintenance requirements is eliminated. Local governments may establish requirements for Group B water systems in addition to those established by rule or by the State Board of Health as long as they are at least as stringent as the state requirements.
- The requirement that the DOH provide technical assistance in the assessment of contaminated properties is repealed.
- The rulemaking requirement for the DOH relating to time limits and standards for providing information on cord blood donations is eliminated.
- The requirement that the DOH contract with an independent entity to establish an internet-based adverse events reporting system is contingent upon specific funding provided in the budget.
- Statutory flexibility is provided in the department's investigation of human cases of pesticide poisoning.

Appropriation: None.

Fiscal Note: Requested on April 17, 2009.

Committee/Commission/Task Force Created: No.

Effective Date: The bill contains several effective dates. Please refer to the bill.

Staff Summary of Public Testimony: PRO: Thank you for incorporating the proposed changes regarding adverse events reporting to allow for the department to contract with an independent entity for the internet-based system. Rather than repealing the section, at least there is a placeholder so that hospitals will be able to share data on adverse events when funding becomes available in the future.

Persons Testifying: PRO: Lisa Thatcher, Washington State Hospital Association.