

FINAL BILL REPORT

SSB 5778

PARTIAL VETO C 146 L 16 Synopsis as Enacted

Brief Description: Concerning ambulatory surgical facilities.

Sponsors: Senate Committee on Health Care (originally sponsored by Senators Becker, Frocht, Keiser, Bailey, Dammeier, Liias, Hatfield, Angel, Dansel, King, Baumgartner, Brown, Cleveland, Warnick, Honeyford, Parlette, Hill, Rivers, Fain, Braun, Litzow, Conway, Sheldon, Ericksen and Hewitt).

Senate Committee on Health Care
House Committee on Health Care & Wellness
House Committee on Appropriations

Background: An ambulatory surgical facility (ASF) is any distinct entity that operates for the primary purpose of providing specialty or multispecialty outpatient surgical services in which patients are admitted to and discharged from the facility within 24 hours and do not require inpatient hospitalization. ASFs are licensed by the Department of Health (DOH) which establishes initial and renewal license fees, change of ownership fees, and late fees.

DOH must survey ASFs every 18 months, which must include an inspection of the ASF. A survey performed pursuant to Medicare certification or by an approved accrediting organization may substitute for a survey by DOH if DOH has completed a survey of the ASF within the previous 18 months and the ASF provides evidence of a successful survey within 30 days of learning the results of the survey.

Summary: DOH may not raise fees on ASFs before July 1, 2018. If DOH anticipates that the amounts raised by licensing fees will not defray the costs of regulating ASFs, DOH must report this to the fiscal committees of the Legislature and identify the amount of general fund money necessary to make up for the insufficiency.

ASFs must be surveyed by DOH no more than once every 18 months. However, facilities that are certified by the Centers for Medicare and Medicaid Services (CMS) or accredited by an approved accrediting organization must be surveyed no more than once every 36 months if a certification or accreditation survey occurs within 18 months of a DOH survey and they maintain certification or accreditation. After an ASF has been surveyed by an entity other than DOH, it must provide DOH with evidence that it is certified or accredited.

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.

Payers that contract with an ASF must accept CMS certification surveys or surveys by an accrediting organization that is determined by DOH to have equivalent standards to the CMS surveys; they may not impose additional requirements on the ASF.

DOH must conduct a benchmark survey to compare Washington's system for licensing ASFs with other states. This must include a review of licensing standards, staffing levels, training of surveyors and inspectors, and expenditures of the selected states. Survey findings must be reported to the health care committees of the Legislature by December 1, 2016.

Votes on Final Passage:

Senate	47	0	
House	97	0	(House amended)
Senate	49	0	(Senate concurred)

Effective: June 9, 2016

Partial Veto Summary: The section providing that the bill would be null and void if funding is not provided in the operating budget is vetoed.