

SENATE BILL REPORT

SHB 2391

AS REPORTED BY COMMITTEE ON HEALTH & LONG-TERM CARE,
FEBRUARY 24, 1992

Brief Description: Regulating biomedical waste.

SPONSORS: House Committee on Environmental Affairs (originally sponsored by Representatives Horn, Rust, Pruitt, Bray, J. Kohl, Brekke, Edmondson, D. Sommers, Valle and May)

HOUSE COMMITTEE ON ENVIRONMENTAL AFFAIRS

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: Do pass.

Signed by Senators West, Chairman; L. Smith, Vice Chairman; M. Kreidler, Niemi, Sumner, and Wojahn.

Staff: Martin Lovinger (786-7443)

Hearing Dates: February 24, 1992

BACKGROUND:

There are currently no comprehensive state laws governing the definition, handling, storage, or disposal of medical waste.

The Utilities and Transportation Commission (UTC) has adopted rules requiring persons collecting "sharps" waste which consists of hypodermic needles and scalpels, and untreated medical waste to plan for and implement a number of procedures designed to protect workers from infection. The rules also require sharps waste and untreated medical waste to be contained in a way that reduces the risk of disease transmission to persons who handle the waste. The UTC rules do not impose any such requirements on treated solid waste. The UTC rules apply to all private companies that offer the service of collecting biomedical waste.

Some local governments regulate medical waste through local ordinances. King County assesses higher landfill charges for medical waste to pay for special handling procedures required in King County.

Biomedical waste is typically sterilized through incineration or exposure to heat. Several new technologies are being developed to treat biomedical waste. A treatment facility to be located in Morton, Washington plans to use microwaves to treat biomedical waste. The state has no procedures to verify the effectiveness of these new technologies.

SUMMARY:

The term "biomedical waste" is defined. The definition preempts any local definitions of such waste.

The Department of Health, in conjunction with the Department of Ecology and local health jurisdictions, are authorized to develop a process to verify the effectiveness of new technologies to treat biomedical waste.

Appropriation: none

Revenue: none

Fiscal Note: requested February 20, 1992

Effective Date: Sections 2 and 3 contain an emergency clause and take effect immediately. Section 4 takes effect October 1, 1992. The rest of the bill takes effect 90 days after adjournment.

TESTIMONY FOR:

A uniform statewide definition of biomedical waste would simplify compliance. It would protect workers, the hospital industry, and the public with consistent policy. The flexibility in the bill as to the fiscal impact is helpful.

TESTIMONY AGAINST: None

TESTIFIED: Representative Jim Horn, original prime sponsor; Beverly Jacobson, Washington State Hospital Association; Scott Sigmon, Washington Health Care Association; J.P. Jones, Washington Waste Management Association; Jean Wessman, Washington Association of Counties; Karen Van Dusen, Department of Health