

SENATE BILL REPORT

ESHB 2787

As Reported By Senate Committee On:
Health & Long-Term Care, February 26, 2004

Title: An act relating to immunity from liability for licensed health care providers volunteering at community health care settings.

Brief Description: Providing immunity from liability for licensed health care providers at community health care settings.

Sponsors: House Committee on Health Care (originally sponsored by Representatives Kessler, Campbell, Cody, Morrell, Schual-Berke, Clibborn, Moeller, Upthegrove and Kagi).

Brief History:

Committee Activity: Health & Long-Term Care: 2/26/04 [DPA].

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: Do pass as amended.

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

Staff: Tanya Karwaki (786-7447)

Background: The Good Samaritan Act provides immunity from liability for individuals who provide emergency care at the scene of an emergency without compensation or the expectation of compensation. Last year, the Good Samaritan Act was amended to include immunity provisions for physicians who volunteer health care services at public or nonprofit community clinics. These immunity provisions do not apply to acts or omissions that constitute gross negligence.

Summary of Amended Bill: Good Samaritan Act immunity coverage for individuals volunteering health care services in certain health care settings is expanded beyond physicians to include all licensed health care providers.

In addition to immunity at public and nonprofit clinics, a health care provider may be immune from liability when volunteering health care services at a for-profit corporation or hospital-based clinic that holds itself out to the public as having, and actually maintains, established hours on a regular basis for providing free health care services to the public. A health care provider may also be immune from liability when volunteering health care services at a for-profit corporation or hospital-based clinic through participation in a community-based program to provide access to such services to uninsured individuals. The health care provider's participation in the program is conditioned upon providing health care services without compensation or the expectation of compensation.

Amended Bill Compared to Substitute Bill: The amendment makes the language consistent with the reference statute relating to boards and commissions.

Appropriation: None.

Fiscal Note: Not requested.

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

Testimony For: Under this bill providers would have immunity from medical malpractice cases. It would increase access to health care and enhance care. The bill would make it easier to recruit providers and expand services.

Testimony Against: None.

Testified: PRO: Patricia Hannah, United Way of Clallam County; George Wehnes, Olympia Union Gospel Mission; Steve Albrecht, MD, Thurston-Mason Medical Society; Ron Weaver, Dept. of Health; Ruth Shearer, Bread & Roses.