
Health Care & Wellness Committee

HB 1755

Brief Description: Exempting elective percutaneous coronary intervention performed in certain hospitals owned or operated by a state entity from certificate of need requirements.

Sponsors: Representatives Street, Macri, Schmick, Parshley, Thai, Salahuddin, Ormsby, Stonier and Reed.

<p style="text-align: center;">Brief Summary of Bill</p> <ul style="list-style-type: none">• Exempts elective percutaneous coronary interventions provided in a hospital owned or operated by a state entity from certificate of need requirements.
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Hearing Date: 2/14/25

Staff: Jim Morishima (786-7191).

Background:

Before certain health care facilities, including hospitals, may be constructed, renovated, or sold, the Department of Health (DOH) must issue a certificate of need. A certificate of need is also required for any new tertiary health services that are offered by a health care facility if the services were not offered on a regular basis within the previous 12-month period. A tertiary health service is a specialized service that meets complicated medical needs of people and requires sufficient patient volume to optimize provider effectiveness, quality of service, and improved outcomes.

Under rules adopted by the DOH, adult elective percutaneous coronary interventions (PCI) are tertiary services subject to the certificate of need requirement. Percutaneous coronary interventions are invasive but nonsurgical mechanical procedures or devices used for the

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revascularization of obstructed coronary arteries.

The DOH calculates the projections for PCI needs using individual geographic areas designed in rule. When submitting an application for a certificate of need for PCI, the applicant hospital must include a variety of information, including an analysis of the impact of the services on training programs at the University of Washington, projected volumes for PCI in the first three years of operations, and a plan detailing how the hospital will recruit and staff the new program. The hospital must also maintain one catheterization lab used primarily for cardiology and be prepared and staffed to perform emergent PCI 24-hours per day. Hospitals providing PCI are also subject to requirements relating to volume, staffing, partnering with other hospitals, and quality assurance.

Summary of Bill:

Elective percutaneous coronary interventions provided in a hospital owned or operated by a state entity are exempt from certificate of need requirements.

Appropriation: None.

Fiscal Note: Requested on February 7, 2025.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.