

FINAL BILL REPORT

ESHB 1926

C 89 L 09
Synopsis as Enacted

Brief Description: Exempting certain hospice agencies from certificate of need requirements.

Sponsors: House Committee on Health Care & Wellness (originally sponsored by Representatives Cody, Ericksen, Appleton, Pettigrew, Kenney, Moeller and Ormsby).

House Committee on Health Care & Wellness
Senate Committee on Health & Long-Term Care

Background:

A certificate of need is required before:

- a health care facility may be constructed, renovated, or sold;
- the bed capacity at certain health care facilities is increased;
- the number of dialysis stations at a kidney disease center is increased; or
- specialized health services are added.

When determining whether to issue a certificate of need, the Department of Health (DOH) must consider:

- the population's need for the service;
- the availability of less costly or more effective methods of providing the service;
- the financial feasibility and probable impact of the proposal on the cost of health care in the community;
- the need and availability of services and facilities for physicians and patients in the community;
- the efficiency and appropriateness of the use of existing similar services and facilities; and
- improvements in the financing and delivery of health services that contain costs and promote quality assurance.

Summary:

A certificate of need is not required for a hospice agency if:

- the hospice agency is designed to serve the unique religious or cultural needs of a religious group or ethnic minority and commits to furnishing hospice services in a manner specifically aimed at meeting those needs;

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.

- the hospice agency is operated by an organization that has operated, for at least 10 consecutive years, a facility or group of facilities that offers a comprehensive continuum of long-term care services (including, at a minimum, a licensed, Medicare-certified nursing home, assisted living, independent living, day health, and community-based support services) designed to meet the unique religious or cultural needs of a religious group or ethnic minority;
- the hospice agency commits to coordinating with existing hospice programs in its community when appropriate;
- the hospice agency has a census of no more than 40 patients;
- the hospice agency commits to obtaining and maintaining Medicare certification;
- the hospice agency only provides services to patients located in the same county as the majority of the long-term care services offered by the organization that operates the agency; and
- the hospice agency is not sold or transferred to another entity.

The DOH must include the patient census for an exempted agency in its calculations for future certificate of need applications.

Votes on Final Passage:

House	96	0
Senate	45	0

Effective: July 26, 2009