# **SENATE BILL 646**

By: Senators Middleton, Astle, Benson, Brinkley, Brochin, Colburn, Conway, Currie, DeGrange, Dyson, Edwards, Feldman, Ferguson, Forehand, Frosh, Getty, Gladden, Glassman, Hershey, Jacobs, Jennings, Jones-Rodwell, Kasemeyer, Kelley, King, Kittleman, Klausmeier, Madaleno, Manno, Mathias, McFadden, Miller, Montgomery, Muse, Peters, Pinsky, Pugh, Ramirez, Raskin, Reilly, Robey, Rosapepe, Shank, Simonaire, Stone, Young, and Zirkin
Introduced and read first time: January 31, 2014

Assigned to: Finance

Committee Report: Favorable with amendments Senate action: Adopted Read second time: March 10, 2014

# CHAPTER \_\_\_\_\_

#### 1 AN ACT concerning

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## 2 State Health Plan – Licensed Hospice Programs – Certificate of Need Review

- 3 FOR the purpose of requiring that, beginning on a certain date, the State health plan 4 methodologies, standards, and criteria for licensed hospice certificate of need  $\mathbf{5}$ review shall use certain data from certain years to calculate a certain volume 6 threshold; requiring that, beginning on a certain date for licensed hospice 7 programs, the State health plan methodologies, standards, and criteria for 8 certificate of need review for a jurisdiction demonstrating need first take into 9 consideration the capability of current licensed hospice providers in that 10 jurisdiction that have the infrastructure, capacity, and scale to meet the demonstrated need; requiring the Commission, in collaboration with the 11 12Hospice and Palliative Care Network, to incorporate in a certain methodology 13recognition that hospice utilization may be influenced by a certain demographic makeup; providing for the use of certain race and ethnicity data in a certain 14 methodology; and generally relating to the State health plan and licensed 1516 hospice programs.
- 17 BY repealing and reenacting, with amendments,
- 18 Article Health General

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

<u>Underlining</u> indicates amendments to bill.

Strike out indicates matter stricken from the bill by amendment or deleted from the law by amendment.



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$egin{array}{c} 1 \\ 2 \\ 3 \end{array}$	Section 19–118 Annotated Code of Maryland (2009 Replacement Volume and 2013 Supplement)
4 5	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:
6	Article – Health – General
7	19–118.
8 9	(a) (1) At least every 5 years, beginning no later than October 1, 1983, the Commission shall adopt a State health plan.
10 11	(2) [The] SUBJECT TO PARAGRAPH (3) OF THIS SUBSECTION, THE plan shall include:
$\begin{array}{c} 12 \\ 13 \end{array}$	(i) The methodologies, standards, and criteria for certificate of need review; and
$\begin{array}{c} 14 \\ 15 \end{array}$	(ii) Priority for conversion of acute capacity to alternative uses where appropriate.
16 17 18 19 20 21	(3) (1) SUBJECT TO PARAGRAPH (4) OF THIS SUBSECTION, BEGINNING DECEMBER 31, 2014, THE PLAN METHODOLOGIES, STANDARDS, AND CRITERIA FOR LICENSED HOSPICE CERTIFICATE OF NEED REVIEW SHALL USE DATA FROM THE 5 MOST RECENT YEARS BEGINNING WITH THE MOST RECENT DATA AVAILABLE 6 MONTHS PRIOR TO THE DATE USED TO CALCULATE THE VOLUME THRESHOLD IN THE TARGET YEAR.
22 23 24 25 26 27	(II) BEGINNING DECEMBER 31, 2014, FOR LICENSED HOSPICE PROGRAMS, THE PLAN METHODOLOGIES, STANDARDS, AND CRITERIA FOR CERTIFICATE OF NEED REVIEW FOR A JURISDICTION DEMONSTRATING NEED SHALL FIRST TAKE INTO CONSIDERATION THE CAPABILITY OF CURRENT LICENSED HOSPICE PROVIDERS IN THAT JURISDICTION THAT HAVE THE INFRASTRUCTURE, CAPACITY, AND SCALE TO MEET THE DEMONSTRATED NEED.
28 29 30 31 32 33	(4) (1) WHEN PROJECTING NEED FOR ADDITIONAL HOSPICE CAPACITY, THE COMMISSION, IN COLLABORATION WITH THE HOSPICE AND PALLIATIVE CARE NETWORK, SHALL INCORPORATE IN THE METHODOLOGY USED RECOGNITION THAT HOSPICE UTILIZATION MAY BE INFLUENCED BY THE DEMOGRAPHIC MAKEUP OF A JURISDICTION. (II) THE METHODOLOGY UNDER SUBPARAGRAPH (I) OF
33 34	THIS PARAGRAPH SHALL USE RACE AND ETHNICITY UTILIZATION DATA,

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1	INCLUDING AVERAGE LENGTH OF STAY IN A HOSPICE PROGRAM, FROM THE
2	MOST RECENT STUDIES AS A DATA SOURCE WHEN PROJECTING NEED FOR
3	ADDITIONAL HOSPICE CAPACITY IN THE TARGET YEAR.
$4 \\ 5 \\ 6 \\ 7$	(b) Annually or upon petition by any person, the Commission shall review the State health plan and publish any changes in the plan that the Commission considers necessary, subject to the review and approval granted to the Governor under this subtitle.
8 9 10	(c) The Commission shall adopt rules and regulations that ensure broad public input, public hearings, and consideration of local health plans in development of the State health plan.
$\begin{array}{c} 11 \\ 12 \end{array}$	(d) (1) The Commission shall develop standards and policies consistent with the State health plan that relate to the certificate of need program.
13	(2) The standards:
$\begin{array}{c} 14 \\ 15 \end{array}$	(i) Shall address the availability, accessibility, cost, and quality of health care; and
$\begin{array}{c} 16 \\ 17 \end{array}$	(ii) Are to be reviewed and revised periodically to reflect new developments in health planning, delivery, and technology.
18 19 20	(3) In adopting standards regarding cost, efficiency, cost-effectiveness, or financial feasibility, the Commission shall take into account the relevant methodologies of the Health Services Cost Review Commission.
$21 \\ 22 \\ 23$	(e) Annually, the Secretary shall make recommendations to the Commission on the plan. The Secretary may review and comment on State specifications to be used in the development of the State health plan.
24 25 26 27	(f) All State agencies and departments, directly or indirectly involved with or responsible for any aspect of regulating, funding, or planning for the health care industry or persons involved in it, shall carry out their responsibilities in a manner consistent with the State health plan and available fiscal resources.
28 29 30 31	(g) In carrying out their responsibilities under this Part II of this subtitle for hospitals, the Commission and the Secretary shall recognize, but may not apply, develop, or duplicate standards or requirements related to quality which have been adopted and enforced by national or State licensing or accrediting authorities.
32 33 34	(h) The Commission shall transfer to the Department of Health and Mental Hygiene health planning functions and necessary staff resources for licensed entities in the State health plan that are not required to obtain a certificate of need or an

exemption from the certificate of need program.

- SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect 1  $\mathbf{2}$
- October 1, 2014.

Approved:

Governor.

President of the Senate.

Speaker of the House of Delegates.