

SENATE BILL 596

J3

(5lr0029)

ENROLLED BILL

— Finance/Health and Government Operations —

Introduced by **Chair, Finance Committee (By Request – Departmental – Health and Mental Hygiene)**

Read and Examined by Proofreaders:

Proofreader.

Proofreader.

Sealed with the Great Seal and presented to the Governor, for his approval this _____ day of _____ at _____ o'clock, _____ M.

President.

CHAPTER _____

1 AN ACT concerning

2 **Health Care Facilities – Surveys, Inspections, and External Reviews**

3 FOR the purpose of requiring the Department of Health and Mental Hygiene to survey
4 freestanding ambulatory care facilities in accordance with certain regulations, with
5 a certain exception; requiring the Department to survey each freestanding birthing
6 center at a certain frequency; requiring the Department to inspect the operations of
7 each home health agency at a certain frequency; repealing a provision of law
8 authorizing a certain professional standards review organization to conduct an
9 external review of health maintenance organizations; exempting certain accredited
10 health maintenance organizations from a certain external review; altering the
11 frequency at which the Department must make a site visit and conduct a survey of
12 each licensed nursing home; repealing an exception to the licensed nursing home site
13 visit and survey requirements; ~~providing for the termination of this Act;~~ and

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

Underlining indicates amendments to bill.

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

Italics indicate opposite chamber/conference committee amendments.



1 generally relating to surveys, inspections, and external reviews of health care
2 facilities.

3 BY repealing and reenacting, with amendments,
4 Article – Health – General
5 Section 19–3B–03, 19–407, 19–705.1(f), and 19–1408
6 Annotated Code of Maryland
7 (2009 Replacement Volume and 2014 Supplement)

8 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
9 That the Laws of Maryland read as follows:

10 **Article – Health – General**

11 19–3B–03.

12 (a) (1) After consultation with representatives of payors, health care
13 practitioners, and ambulatory care facilities, the Secretary shall by regulation establish:

- 14 (i) Procedures to implement the provisions of this subtitle; and
- 15 (ii) Standards to ensure quality of care and patient safety that shall
16 include:
- 17 1. Procedures for credentialing and practitioner performance
18 evaluation;
 - 19 2. Qualifications of health care practitioners and support
20 personnel;
 - 21 3. Procedures to be followed in the event of an emergency,
22 including a requirement that in the event of an emergency the patient be transported to
23 the nearest appropriate emergency care facility;
 - 24 4. Procedures for quality control of any biomedical
25 equipment;
 - 26 5. Procedures for postoperative recovery;
 - 27 6. Procedures for discharge; and
 - 28 7. Any other procedures that the Secretary considers
29 necessary for quality of care and patient safety.

30 (2) The procedures for practitioner performance evaluation required under
31 paragraph (1)(ii)1 of this subsection shall include a review of care provided to patients at
32 the freestanding ambulatory care facility by members of the medical staff.

1 (3) The review of care shall:

2 (i) Be undertaken for cases chosen at random and for cases with
3 unexpected adverse outcomes;

4 (ii) Be based on objective review standards;

5 (iii) Include a review of the appropriateness of the plan of care for the
6 patient, particularly any medical procedures performed on the patient, in relation to the
7 patient's condition; and

8 (iv) Except as provided in paragraph (4) of this subsection, be
9 conducted by at least two members of the medical staff who:

10 1. As appropriate, are of the same specialty as the member
11 of the medical staff under review; and

12 2. Have been trained in the freestanding ambulatory care
13 facility's policies and procedures regarding practitioner performance evaluation.

14 (4) A review of the care provided by a member of the medical staff who is a
15 solo practitioner shall be conducted by an external reviewer.

16 (5) A freestanding ambulatory care facility shall take into account the
17 results of the practitioner performance evaluation process for a member of the medical staff
18 in the reappointment process.

19 (b) If appropriate certification by Medicare is available, obtaining the certification
20 shall be a condition of licensure for:

21 (1) An ambulatory surgical facility; and

22 (2) A kidney dialysis center.

23 (c) Each freestanding ambulatory care facility shall provide assurances
24 satisfactory to the Secretary that the freestanding ambulatory care facility does not
25 discriminate against patients, including discrimination based on ability to pay for
26 nonelective procedures.

27 (d) The Secretary may delegate to the Kidney Disease Commission the
28 Secretary's authority under § 19-3B-07 of this subtitle to inspect kidney dialysis centers.

29 **(E) (1) EXCEPT AS PROVIDED IN PARAGRAPH (2) OF THIS SUBSECTION,**
30 **THE DEPARTMENT SHALL SURVEY FREESTANDING AMBULATORY CARE FACILITIES**
31 **IN ACCORDANCE WITH FEDERAL REGULATIONS.**

1 **(2) THE DEPARTMENT SHALL SURVEY EACH FREESTANDING**
2 **BIRTHING CENTER AT LEAST ONCE PER CALENDAR YEAR.**

3 19–407.

4 The Department shall:

5 (1) Inspect the operations of each home health agency **AT LEAST EVERY 3**
6 **YEARS** to determine whether it is meeting the requirements of this subtitle and the rules
7 and regulations adopted under it; and

8 (2) Issue, deny, suspend, or revoke a home health agency license in
9 accordance with the rules and regulations adopted under this subtitle.

10 19–705.1.

11 (f) (1) Except as provided in paragraph (5) of this subsection, the Department
12 shall conduct an annual external review of the quality of the health services of the health
13 maintenance organization in a manner that the Department considers to be appropriate.

14 (2) The external review shall be conducted by:

15 (i) A panel of physicians and other health professionals that consists
16 of persons who:

17 1. Have been approved by the Department;

18 2. Have substantial experience in the delivery of health care
19 in a health maintenance organization setting, but who are not members of the health
20 maintenance organization staff or performing professional services for the health
21 maintenance organization; and

22 3. Reside outside the area serviced by the health
23 maintenance organization; **OR**

24 (ii) The Department[; or

25 (iii) A federally approved professional standards review
26 organization].

27 (3) The final decision on the type of external review that is to be employed
28 rests solely with the Secretary.

29 (4) The external review shall consist of a review and evaluation of:

- 1 (i) An internal peer review system and reports;
- 2 (ii) The program plan of the health maintenance organization to
3 determine if it is adequate and being followed;
- 4 (iii) The professional standards and practices of the health
5 maintenance organization in every area of services provided;
- 6 (iv) The grievances relating specifically to the delivery of medical
7 care, including their final disposition;
- 8 (v) The physical facilities and equipment; and
- 9 (vi) A statistically representative sample of member records.

10 **(5) A HEALTH MAINTENANCE ORGANIZATION ACCREDITED BY AN**
11 **ACCREDITATION ORGANIZATION APPROVED BY THE SECRETARY IN ACCORDANCE**
12 **WITH § 19-2302 OF THIS TITLE SHALL BE EXEMPT FROM THE EXTERNAL REVIEW.**

13 19-1408.

14 (a) The Department shall make a site visit and conduct a full survey of each
15 licensed nursing home at least [two times] ONCE per calendar year.

16 (b) [The Department may waive the requirements of subsection (a) of this section
17 for a nursing home that, in the two most recent surveys of the nursing home conducted
18 after October 1, 2000, has had no deficiencies that have the potential for minimum harm
19 or greater.

20 (c)] All surveys shall be unannounced.

21 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
22 October 1, 2015. ~~It shall remain effective for a period of 5 years and, at the end of September~~
23 ~~30, 2020, with no further action required by the General Assembly, this Act shall be~~
24 ~~abrogated and of no further force and effect.~~