Department of Legislative Services

Maryland General Assembly 2020 Session

FISCAL AND POLICY NOTE Third Reader - Revised

(Senator Lam)

Senate Bill 728 Finance

Health and Government Operations

Health Facilities - Freestanding Ambulatory Care Facilities - Administration of Anesthesia

This bill requires the Maryland Department of Health (MDH) to establish by regulation procedures for ensuring that an anesthesia practitioner is not precluded from providing the highest level of anesthesia support that may be required to safely treat patients undergoing procedures in a "nonsterile procedure room" or a "sterile operating room" in a freestanding ambulatory surgical facility.

Fiscal Summary

State Effect: The bill's requirements can be handled with existing budgeted resources. Revenues are not affected.

Local Effect: None.

Small Business Effect: None.

Analysis

Bill Summary: "Nonsterile procedure room" means a room (1) in which minor surgical procedures are performed, including endoscopy and endoscopic procedures requiring deep sedation; (2) that can only be accessed from a semi-restricted or an unrestricted corridor; (3) that is not used for open surgical procedures that enter the thorax, abdomen, pelvis, cranium, or spine, or routinely require induction of deep sedation or general anesthesia for the entirety of the surgical procedure; and (4) in which deep sedation or general anesthesia may be induced if warranted by the clinical situation and the room is equipped to safely conduct the required level of anesthesia.

"Sterile operating room" means a room in a surgical suite that meets the requirements of a restricted area and is designated and equipped for performing surgical operations or other invasive procedures that may require an aseptic field.

Current Law: "Freestanding ambulatory care facility" is defined as an ambulatory surgical facility, freestanding endoscopy facility, freestanding facility utilizing (or operating) major medical equipment, kidney dialysis center, or freestanding birthing center.

"Ambulatory surgical facility" means any center, service, office facility, or other entity that (1) operates exclusively for the purpose of providing surgical services to patients requiring a period of postoperative observation but not requiring hospitalization and in which the expected duration of services is less than 24 hours after admission and (2) seeks reimbursement from payers as an ambulatory surgery center. "Ambulatory surgical facility" does not include:

- the office of one or more health care practitioners seeking only professional reimbursement for the provision of medical services, unless the office operates under contract or agreement with a payer as an ambulatory surgical facility (regardless of whether it is paid a technical or facility fee) or the office is designated to receive ambulatory surgical referrals in accordance with utilization review or other policies;
- any facility or service owned or operated by a hospital;
- the office of a health care practitioner or group of health care practitioners with up to one operating room if the office does not receive a technical or facility fee and the operating room is used exclusively by the health care practitioner or members of the group of health care practitioners for their own patients; or
- an office owned or operated by one or more licensed dentists.

A freestanding ambulatory care facility may not operate in the State unless licensed by MDH. The Secretary of Health may issue regulations in regard to freestanding ambulatory care facilities, after consultation with representatives of payers, health care practitioners, and freestanding ambulatory care facilities.

In general, a health care practitioner must be licensed and must have received the necessary training to administer anesthesia.

Additional Information

Prior Introductions: None.

SB 728/ Page 2

Designated Cross File: HB 935 (Delegate Kipke, *et al.*) - Health and Government Operations.

Information Source(s): Maryland Department of Health; Department of Legislative Services

Fiscal Note History:	First Reader - February 28, 2020
rh/jc	Third Reader - March 16, 2020
	Revised - Amendment(s) - March 16, 2020

Analysis by: Amberly Holcomb

Direct Inquiries to: (410) 946-5510 (301) 970-5510