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1999 Regular Session 9lr2460

By: Senator Dorman Introduced and read first time: February 22, 1999 Assigned to: Rules A BILL ENTITLED 1 AN ACT concerning 2 Health Resources Planning Commission - Certificate of Need - Obstetric Medical Services - Prince George's County 3 4 FOR the purpose of excluding new obstetric medical services established in Prince 5 George's County on or after a certain date from certain requirements concerning 6 certificates of need issued by the Health Resources Planning Commission; and generally relating to certain obstetric services in Prince George's County and 7 8 certain certificate of need requirements. 9 BY repealing and reenacting, with amendments, Article - Health - General 10 11 Section 19-115 Annotated Code of Maryland 12 (1996 Replacement Volume and 1998 Supplement) 13 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF 14 15 MARYLAND, That the Laws of Maryland read as follows: 16 Article - Health - General 17 19-115. In this section the following words have the meanings indicated. 18 (a) (1) 19 "Health care service" means any clinically-related patient service (2)20 including a medical service under paragraph (3) of this subsection. (3) "Medical service" means: 21 22 (i) Any of the following categories of health care services: 23 1. Medicine, surgery, gynecology, addictions;

25 SERVICE ESTABLISHED IN PRINCE GEORGE'S COUNTY ON OR AFTER OCTOBER 1, 1999;

Obstetrics, EXCEPT FOR A NEW OBSTETRIC MEDICAL

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|----------------|---|---|--|--|--|
| 1 | 3 | | Pediatrics; | | |
| 2 | 4 | | Psychiatry; | | |
| 3 | 5 | | Rehabilitation; | | |
| 4 | 6 | | Chronic care; | | |
| 5 | 7 | | Comprehensive care; | | |
| 6 | 8 | | Extended care; | | |
| 7 | 9 | | Intermediate care; or | | |
| 8 | 1 | 0. | Residential treatment; or | | |
| | | liate ca | category of the rehabilitation, psychiatry, re categories of health care services for which n. | | |
| 12 13 | (b) The Commission m facilities not assessed a user fee | | an application fee for a certificate of need for \$19-122 of this subtitle. | | |
| 14 15 | 4 (c) The Commission shall adopt rules and regulations for applying for and issuing certificates of need. | | | | |
| 18 19 20 | methods for determining the circ which a certificate of need appli alternative approaches and recor | cumstar cation i nmend for mar | may adopt, after October 1, 1983, new thresholds or nees or minimum cost requirements under must be filed. The Commission shall study alternatives that will streamline the current nagement flexibility through the reduction of for a certificate of need. | | |
| 22 23 | (2) The Comr Assembly by October 1, 1985. | nission | shall conduct this study and report to the General | | |
| | before the person develops, open | ates, or | ve a certificate of need issued by the Commission reparticipates in any of the following health need is required under this section. | | |
| 29 30 | rendered wholly or partially invaimposed, if an appeal concerning | alid solo g the ce onditio | eed issued prior to January 13, 1987 may not be ely because certain conditions have been ertificate of need, challenging the power of the ns on a certificate of need, has not been noted 3, 1987. | | |
| 32 33 | | | section (g)(2)(iii) of this section, a certificate of re facility is built, developed, or established. | | |
| 34 35 | (g) (1) A certifica approved, but unbuilt, health car | | eed is required before an existing or previously ty is moved to another site. | | |

| 4 5 of a 6 the 6 7 exis 8 9 com 10 199 11 but 12 13 app 14 use 15 wit 16 17 to e 18 cor 19 20 inte 21 22 use 23 site 24 ind 25 26 nee 27 sub 28 29 care 30 31 cap 32 33 exc | (2) | This subsection | does not a | pply if: | | |
|---|----------------------------------|---|-----------------------------|------------------------------------|--|--------------------|
| 5 of a 6 the r 7 exis 8 9 com 10 199 11 but 12 13 app 14 use 15 with 16 17 to e 18 cor 19 20 inter 22 use 23 site 24 ind 25 26 nee 27 sub 28 29 care 30 31 cap 32 | ocation does not e | (i) The Coxceed those limits | | adopts limits for | relocations and t | he proposed |
| 9 com 10 199 11 but 12 13 app 14 use 15 wit 16 17 to e 18 cor 19 20 inte 21 22 use 23 site 24 ind 25 26 nee 27 sub 28 29 care 30 31 cap 32 33 exc | relocation is to ar | (ii) The related institution of the selated institution; | ution, as de site or imn | fined in § 19-30 | | |
| 13 app 14 use 15 with 16 17 to e 18 cor 19 20 inte 21 22 use 23 site 24 ind 25 26 nee 27 sub 28 29 care 30 31 cap 32 33 exc | | beds previously apposed new related | pproved by | the Commission | | • |
| 17 to e 18 cor 19 20 inte 21 22 use 23 site 24 ind 25 26 nee 27 sub 28 29 card 30 31 cap 32 33 exc | in a proposed ne | 1. mmission in a pricew related institutity ty in which a relate | or certification to be lo | te of need review cated in a munic | ipal corporation | |
| 20 inte 21 22 use 23 site 24 ind 25 26 nee 27 sub 28 29 care 30 31 cap 32 33 exc | | 2. ional new related Carroll County in | institution | that is located in | | |
| 22 use 23 site 24 ind 25 26 nee 27 sub 28 29 card 30 31 cap 32 33 exc | ended to be used t | 3. to establish a relat | | | beds not being real site; and | located are |
| 26 nee 27 sub 28 29 care 30 31 cap 32 33 exc | e will be used as o | 4. ite and the relocate components of sin ted living residen | ted compre gle buildin | hensive care bed | | |
| 29 care 30 31 cap 32 33 exc | (3) ed is not required esection. | Notwithstanding for a relocation do | | | s subtitle, a certifi 2)(iii) of this | cate of |
| 31 cap 32 33 exc | (h) (1) re facility is change | | need is req | uired before the | bed capacity of a | health |
| 33 exc | (2) pacity if: | This subsection | does not a | pply to any incre | ease or decrease in | ı bed |
| 34 | ceed the lesser of | (i) During 10 percent of the | | | se or decrease wouls; | ıld not |
| 35 for | an existing medi- | (ii) 1. cal service; and | The incr | ease or decrease | would change the | e bed capacity |
| 36 | | 2. | A. | The change wou | ıld not increase to | otal bed capacity; |

| 1 | | | B. | The change is maintained for at least a 1-year period; and | |
|----------|---|---------------------|--------------|--|--|
| | C. At least 45 days prior to the change the hospital provides written notice to the Commission describing the change and providing an updated inventory of the hospital's licensed bed complement; or | | | | |
| | (iii) 1. At least 45 days before increasing or decreasing bed capacity, written notice of intent to change bed capacity is filed with the Commission; and | | | | |
| 8 9 | proposed change: | | 2. | The Commission in its sole discretion finds that the | |
| | A. Is pursuant to the consolidation or merger of 2 or more health care facilities, or conversion of a health care facility or part of a facility to a nonhealth-related use; | | | | |
| 13 14 | institution-specific pl | an develo | B. oped by t | Is not inconsistent with the State health plan or the he Commission; | |
| 15 16 | health care services; | and | C. | Will result in the delivery of more efficient and effective | |
| 17 | | | D. | Is in the public interest. | |
| 18 19 | 18 (3) Within 45 days of receiving notice, the Commission shall notify the 19 health care facility of its finding. | | | | |
| 20 21 | 20 (i) A certificate of need is required before the type or scope of any health 21 care service is changed if the health care service is offered: | | | | |
| 22 | | (i) | By a hea | alth care facility; | |
| 23 | | (ii) | In space | e that is leased from a health care facility; or | |
| 24 | | (iii) | In space | e that is on land leased from a health care facility. | |
| 25 | (2) This subsection does not apply if: | | | | |
| 26 27 | | (i) osed char | | mmission adopts limits for changes in health care d not exceed those limits; | |
| | | (ii) e addition | | posed change and the annual operating revenue that ly associated with the use of medical | |
| 31 32 | health care service an | (iii) nd the cha | | posed change would establish, increase, or decrease a ld not result in the: | |
| 33 34 | an existing medical s | ervice; | 1. | Establishment of a new medical service or elimination of | |

| 1 2 | 2 surgery, or burn or neonatal inter | | Establishment of an open heart surgery, organ transplant ealth care service; |
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| 3 | program, or freestanding ambular | | Establishment of a home health program, hospice rgical center or facility; or |
| 7 | | atment, related | Expansion of a comprehensive care, extended care, psychiatry, or rehabilitation medical to an increase in total bed capacity in this section; or |
| | (iv) 1 volume of 1 or more health care of health care services is filed w | service | At least 45 days before increasing or decreasing the es, written notice of intent to change the volume Commission; |
| 12 13 | proposed change: | • | The Commission in its sole discretion finds that the |
| | health care facilities, or conversi nonhealth-related use; | | Is pursuant to the consolidation or merger of 2 or more health care facility or part of a facility to a |
| 17 18 | B institution-specific plan develope | | Is not inconsistent with the State health plan or the adopted by the Commission; |
| 19 20 | health care services; and | 2. | Will result in the delivery of more efficient and effective |
| 21 | D |) . | Is in the public interest; and |
| 22 23 | 3 subparagraph, the Commission s | | Within 45 days of receiving notice under item 1 of this tify the health care facility of its finding. |
| 24 25 | (3) Notwithsta certificate of need is required: | anding | the provisions of paragraph (2) of this subsection, a |
| 26 27 | | | n additional home health agency, branch office, or home existing health care agency or facility; |
| | | y or ho | n existing home health agency or health care facility me health care service at a location in the ous certificate of need or license; |
| 33 34 | health agency or home health car separates the ownership of the br | re servi ranch o | transfer of ownership of any branch office of a home ice of an existing health care facility that office from the home health agency or home a care facility which established the branch |

| 1 2 | (iv) Before the expansion of a home health service or program by a health care facility that: |
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| 3 4 | 1. Established the home health service or program without a certificate of need between January 1, 1984 and July 1, 1984; and |
| | 2. During a 1-year period, the annual operating revenue of the home health service or program would be greater than \$333,000 after an annual adjustment for inflation, based on an appropriate index specified by the Commission. |
| 8 9 | (j) A certificate of need is required before any of the following capital expenditures are made by or on behalf of a health care facility: |
| 10 11 | (i) Any expenditure that, under generally accepted accounting principles, is not properly chargeable as an operating or maintenance expense, if: |
| 14 15 | 1. The expenditure is made as part of an acquisition, improvement, or expansion, and, after adjustment for inflation as provided in the regulations of the Commission, the total expenditure, including the cost of each study, survey, design, plan, working drawing, specification, and other essential activity, is more than \$1,250,000; |
| | 2. The expenditure is made as part of a replacement of any plant and equipment of the health care facility and is more than \$1,250,000 after adjustment for inflation as provided in the regulations of the Commission; |
| 20 21 | The expenditure results in a substantial change in the bed capacity of the health care facility; or |
| | 4. The expenditure results in the establishment of a new medical service in a health care facility that would require a certificate of need under subsection (i) of this section; or |
| 25 26 | (ii) Any expenditure that is made to lease or, by comparable arrangement, obtain any plant or equipment for the health care facility, if: |
| 29 30 | 1. The expenditure is made as part of an acquisition, improvement, or expansion, and, after adjustment for inflation as provided in the rules and regulations of the Commission, the total expenditure, including the cost of each study, survey, design, plan, working drawing, specification, and other essential activity, is more than \$1,250,000; |
| | 2. The expenditure is made as part of a replacement of any plant and equipment and is more than \$1,250,000 after adjustment for inflation as provided in the regulations of the Commission; |
| 35 36 | The expenditure results in a substantial change in the bed capacity of the health care facility; or |

| | 4. The expenditure results in the establishment of a new medical service in a health care facility that would require a certificate of need under subsection (i) of this section. | | | | | |
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| 6 | (2) A certificate of need is required before any equipment or plant is donated to a health care facility, if a certificate of need would be required under paragraph (1) of this subsection for an expenditure by the health care facility to acquire the equipment or plant directly. | | | | | |
| 10 | (3) A certificate of need is required before any equipment or plant is transferred to a health care facility at less than fair market value if a certificate of need would be required under paragraph (1) of this subsection for the transfer at fair market value. | | | | | |
| | A certificate of need is required before a person acquires a health care facility if a certificate of need would be required under paragraph (1) of this subsection for the acquisition by or on behalf of the health care facility. | | | | | |
| 15 | (5) This subsection does not apply to: | | | | | |
| 16 | (i) Site acquisition; | | | | | |
| 19 20 | (ii) Acquisition of a health care facility if, at least 30 days before making the contractual arrangement to acquire the facility, written notice of the intent to make the arrangement is filed with the Commission and the Commission does not find, within 30 days after the Commission receives notice, that the health services or bed capacity of the facility will be changed; | | | | | |
| 22 23 | (iii) Acquisition of business or office equipment that is not directly related to patient care; | | | | | |
| 24 25 | (iv) Capital expenditures to the extent that they are directly related to the acquisition and installation of major medical equipment; | | | | | |
| | (v) A capital expenditure made as part of a consolidation or merger of 2 or more health care facilities, or conversion of a health care facility or part of a facility to a nonhealth-related use if: | | | | | |
| 29 30 | 1. At least 45 days before an expenditure is made, written notice of intent is filed with the Commission; | | | | | |
| 31 32 | 2. Within 45 days of receiving notice, the Commission in its sole discretion finds that the proposed consolidation, merger, or conversion: | | | | | |
| 33 34 | A. Is not inconsistent with the State health plan or the institution-specific plan developed by the Commission as appropriate; | | | | | |
| 35 36 | B. Will result in the delivery of more efficient and effective health care services; and | | | | | |

| 1 | | C. | Is in the public interest; and |
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| 2 3 | notify the health care facility o | 3. f its findi | Within 45 days of receiving notice, the Commission shalling; |
| 4 5 | (vi) construction, or renovation tha | | al expenditure by a nursing home for equipment, |
| 6 | | 1. | Is not directly related to patient care; and |
| 7 8 | other rates; | 2. | Is not directly related to any change in patient charges or |
| 9 10 | (vii) this title, for equipment, const | | al expenditure by a hospital, as defined in § 19-301 of or renovation that: |
| 11 | | 1. | Is not directly related to patient care; and |
| 12 | | 2. | Does not increase patient charges or hospital rates; |
| 13 14 | ` ' | | al expenditure by a hospital as defined in § 19-301 of 50,000 for construction or renovation that: |
| 15 | | 1. | May be related to patient care; |
| 18 19 | service associated with the prohospital rates of more than \$1, | 500,000 | Does not require, over the entire period or schedule of debt otal cumulative increase in patient charges or for the capital costs associated with the project or consultation with the Health Services Cost |
| 23 | | nmission | At least 45 days before the proposed expenditure is made, and within 45 days of receipt of the relevant makes the financial determination required |
| | | | The relevant financial information to be submitted by the ulgated by the Commission, after consultation Commission; or |
| 30 31 | which does not require a cumumore than \$1,500,000 for capi | lative in tal costs | donated to a hospital as defined in § 19-301 of this title, crease in patient charges or hospital rates of associated with the donated plant as onsultation with the Health Services Cost |
| 35 | hospital notifies the Commission | | At least 45 days before the proposed donation is made, the within 45 days of receipt of the relevant makes the financial determination required |

| | 2. The relevant financial information to be submitted by the hospital is defined in regulations promulgated by the Commission after consultation with the Health Services Cost Review Commission. | | | | | |
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| | (6) Paragraph (5)(vi), (vii), (viii), and (ix) of this subsection may not be construed to permit a facility to offer a new health care service for which a certificate of need is otherwise required. | | | | | |
| 9 10 | (7) Subject to the notice requirements of paragraph (5)(ii) of this subsection, a hospital may acquire a freestanding ambulatory surgical facility or office of one or more health care practitioners or a group practice with one or more operating rooms used primarily for the purpose of providing ambulatory surgical services if the facility, office, or group practice: | | | | | |
| 12 | (i) Has obtained a certificate of need; | | | | | |
| 13 14 | (ii) Has obtained an exemption from certificate of need requirements; or | | | | | |
| 15 16 | (iii) Did not require a certificate of need in order to provide ambulatory surgical services after June 1, 1995. | | | | | |
| 19 20 | Nothing in this subsection may be construed to permit a hospital to build or expand its ambulatory surgical capacity in any setting owned or controlled by the hospital without obtaining a certificate of need from the Commission if the building or expansion would increase the surgical capacity of the State's health care system. | | | | | |
| 22 23 | (l) A certificate of need is not required to close any hospital or part of a hospital as defined in § 19-301 of this title if: | | | | | |
| 24 25 | 4 (1) At least 45 days before closing, written notice of intent to close is filed 5 with the Commission; | | | | | |
| | 6 (2) The Commission in its sole discretion finds that the proposed closing 7 is not inconsistent with the State health plan or the institution-specific plan 8 developed by the Commission and is in the public interest; and | | | | | |
| 29 30 | (3) Within 45 days of receiving notice the Commission notifies the health care facility of its findings. | | | | | |
| | 1 (m) In this section the terms "consolidation" and "merger" include increases 2 and decreases in bed capacity or services among the components of an organization 3 which: | | | | | |
| 34 | (1) Operates more than one health care facility; or | | | | | |
| 35 36 | (2) Operates one or more health care facilities and holds an outstanding certificate of need to construct a health care facility. | | | | | |
| | | | | | | |

19 effect October 1, 1999.

SENATE BILL 724

Notwithstanding any other provision of this section, the Commission 1 (n) (1) 2 shall consider the special needs and circumstances of a county where a medical 3 service, as defined in this section, does not exist; and 4 (2) The Commission shall consider and may approve under this 5 subsection a certificate of need application to establish, build, operate, or participate 6 in a health care project to provide a new medical service in a county if the 7 Commission, in its sole discretion, finds that: 8 The proposed medical service does not exist in the county that (i) 9 the project would be located; The proposed medical service is necessary to meet the health 10 (ii) 11 care needs of the residents of that county; The proposed medical service would have a positive impact on 13 the existing health care system; 14 (iv) The proposed medical service would result in the delivery of 15 more efficient and effective health care services to the residents of that county; and 16 The application meets any other standards or regulations 17 established by the Commission to approve applications under this subsection. 18 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take