By: Senator Middleton

Introduced and read first time: February 3, 2012

Assigned to: Finance

A BILL ENTITLED

AN ACT concerning

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Maryland Health Care Commission - Cardiac Surgery and Percutaneous Coronary Intervention Services

FOR the purpose of requiring, with a certain exception, a certificate of need for the establishment of percutaneous coronary intervention (PCI) services; requiring, beginning on a certain date, an acute general hospital to have a certificate of conformance before the hospital may establish primary PCI services or nonprimary PCI services; prohibiting the Maryland Health Care Commission from issuing a certificate of conformance unless the Commission finds that the proposed primary PCI services or proposed nonprimary PCI services meet certain standards; providing that a certificate of conformance is not required, notwithstanding certain provisions of this Act, for an acute general hospital to establish primary PCI services under certain circumstances; requiring an acute care hospital that provides cardiac surgery or PCI services under certain authorization to obtain and maintain a certificate of ongoing performance to continue to provide cardiac surgery services, primary PCI services, or nonprimary PCI services; requiring an acute general hospital that is providing nonprimary PCI services under a research waiver issued by the Commission to obtain a certificate of conformance for its nonprimary PCI services before it may obtain a certificate of ongoing performance to provide the nonprimary PCI services; requiring the Commission to adopt certain regulations; requiring the regulations to include certain items; establishing certain parameters for the process established by the Commission for issuing a certificate of conformance; authorizing a certain hospital, notwithstanding certain provisions of this Act, to provide nonprimary PCI services until the Commission takes certain actions; defining certain terms; and generally relating to the regulation of cardiac surgery and percutaneous coronary intervention services by the Maryland Health Care Commission.

BY repealing and reenacting, without amendments,

Article – Health – General

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 2 3	Section 19–120(j)(1) Annotated Code of Maryland (2009 Replacement Volume and 2011 Supplement)						
4 5 6 7 8	BY repealing and reenacting, with amendments, Article – Health – General Section 19–120(j)(2) Annotated Code of Maryland (2009 Replacement Volume and 2011 Supplement)						
9 10 11 12 13	BY adding to Article – Health – General Section 19–120.1 Annotated Code of Maryland (2009 Replacement Volume and 2011 Supplement)						
14 15	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:						
16	Article – Health – General						
17	19–120.						
18 19	(j) (1) A certificate of need is required before the type or scope of any health care service is changed if the health care service is offered:						
20	(i) By a health care facility;						
21	(ii) In space that is leased from a health care facility; or						
22	(iii) In space that is on land leased from a health care facility.						
23	(2) This subsection does not apply if:						
24 25	(i) The Commission adopts limits for changes in health care services and the proposed change would not exceed those limits;						
26 27 28	(ii) The proposed change and the annual operating revenue that would result from the addition is entirely associated with the use of medical equipment;						
29 30	(iii) The proposed change would establish, increase, or decrease a health care service and the change would not result in the:						
31 32	1. Establishment of a new medical service or elimination of an existing medical service;						

$\frac{1}{2}$	2. Establishment of [an open heart] A CARDIAC surgery, organ transplant surgery, or burn or neonatal intensive health care service;
3 4 5	3. EXCEPT AS PROVIDED IN § 19–120.1 OF THIS SUBTITLE, ESTABLISHMENT OF PERCUTANEOUS CORONARY INTERVENTION SERVICES;
6 7	[3.] 4. Establishment of a home health program, hospice program, or freestanding ambulatory surgical center or facility; or
8 9 10 11	[4.] 5. Expansion of a comprehensive care, extended care, intermediate care, residential treatment, psychiatry, or rehabilitation medical service, except for an expansion related to an increase in total bed capacity in accordance with subsection (h)(2)(i) of this section; or
12 13 14	(iv) 1. At least 45 days before increasing or decreasing the volume of one or more health care services, written notice of intent to change the volume of health care services is filed with the Commission;
15 16	2. The Commission in its sole discretion finds that the proposed change:
17 18 19	A. Is pursuant to the consolidation or merger of two or more health care facilities, the conversion of a health care facility or part of a facility to a nonhealth–related use, or the conversion of a hospital to a limited service hospital;
20 21	B. Is not inconsistent with the State health plan or the institution–specific plan developed and adopted by the Commission;
22 23	C. Will result in the delivery of more efficient and effective health care services; and
24	D. Is in the public interest; and
25 26	3. Within 45 days of receiving notice under item 1 of this item, the Commission notifies the health care facility of its finding.
27	19–120.1.
28 29	(A) (1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS INDICATED.
30 31	(2) "CERTIFICATE OF CONFORMANCE" MEANS AN APPROVAL ISSUED BY THE COMMISSION THAT ALLOWS AN ACUTE GENERAL HOSPITAL TO

ESTABLISH PRIMARY PCI SERVICES OR NONPRIMARY PCI SERVICES WITHOUT

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A CERTIFICATE OF NEED.

1		(3)	"CERT	IFICAT	TE OF	ONGOI	NG PE	RFOR	MANCE"	MEANS	AN
2	APPROVAL	ISSUE	D BY	THE	COMM	ISSION	THAT	THE	CARDIA	C SURG	ERY
3	SERVICES, I	PRIMA	RY PCI	SERV	ICES, O	R NONP	RIMAR	Y PCI	SERVICE	S PROVI	DED
4	BY AN ACU	TE GEN	ERAL	HOSPI	TAL MI	EET STA	NDARD	S EVII	DENCING	CONTIN	UED

- 5 QUALITY.
- 6 (4) (I) "NONPRIMARY PCI" MEANS PCI CAPABLE OF 7 RELIEVING CORONARY-VESSEL NARROWING ASSOCIATED WITH CORONARY 8 ARTERY DISEASE UNRELATED TO ST-SEGMENT-ELEVATION MYOCARDIAL 9 INFARCTION.
- 10 (II) "Nonprimary PCI" includes elective PCI.
- 11 (5) "PCI" MEANS PERCUTANEOUS CORONARY INTERVENTION.
- 12 (6) (I) "PERCUTANEOUS CORONARY INTERVENTION" MEANS A
 13 PROCEDURE IN WHICH A CATHETER IS INSERTED INTO A BLOOD VESSEL AND
 14 GUIDED TO THE SITE OF THE NARROWING OF A CORONARY ARTERY TO RELIEVE
 15 CORONARY NARROWING.
- 16 (II) "PERCUTANEOUS CORONARY INTERVENTION" 17 INCLUDES A VARIETY OF CATHETER-BASED TECHNIQUES, INCLUDING BALLOON 18 ANGIOPLASTY.
- 19 (7) "PRIMARY PCI" MEANS PCI CAPABLE OF RELIEVING 20 CORONARY VESSEL NARROWING ASSOCIATED WITH ST-SEGMENT-ELEVATION 21 MYOCARDIAL INFARCTION.
- 22 (B) (1) BEGINNING JULY 1, 2012, BEFORE AN ACUTE GENERAL
 23 HOSPITAL MAY ESTABLISH PRIMARY PCI SERVICES OR NONPRIMARY PCI
 24 SERVICES, THE HOSPITAL SHALL OBTAIN A CERTIFICATE OF CONFORMANCE
 25 FROM THE COMMISSION.
- 26 (2) THE COMMISSION MAY NOT ISSUE A CERTIFICATE OF CONFORMANCE UNLESS THE COMMISSION FINDS THAT THE PROPOSED PRIMARY PCI SERVICES OR PROPOSED NONPRIMARY PCI SERVICES:
- 29 (I) ARE CONSISTENT WITH THE STATE HEALTH PLAN FOR 30 FACILITIES AND SERVICES;
- 31 (II) WILL RESULT IN THE DELIVERY OF MORE EFFICIENT 32 AND EFFECTIVE HEALTH CARE SERVICES; AND

1	(III) ARE IN THE PUBLIC INTEREST.
2	(C) NOTWITHSTANDING SUBSECTION (B) OF THIS SECTION, A
3	CERTIFICATE OF CONFORMANCE IS NOT REQUIRED FOR AN ACUTE GENERAL
4	HOSPITAL TO ESTABLISH PRIMARY PCI SERVICES IF:
5	(1) THE ACUTE GENERAL HOSPITAL WAS PROVIDING PRIMARY
6	PCI SERVICES ON JANUARY 1, 2012; AND
7	(2) THE COMMISSION DETERMINES THAT THE PRIMARY PCI
8	SERVICES ARE CONSISTENT WITH THE STATE HEALTH PLAN FOR FACILITIES
9	AND SERVICES.
10	(D) (1) THIS SUBSECTION APPLIES TO AN ACUTE CARE HOSPITAL
11	THAT PROVIDES CARDIAC SURGERY OR PCI SERVICES UNDER:
12	(I) A CERTIFICATE OF NEED ISSUED UNDER § 19–120 OF
13	THIS SUBTITLE;
14	(II) A CERTIFICATE OF CONFORMANCE ISSUED UNDER THIS
15	SECTION; OR
16	(III) AN EXCEPTION FROM THE CERTIFICATE OF
17	CONFORMANCE REQUIREMENTS UNDER SUBSECTION (C) OF THIS SECTION.
18	(2) AN ACUTE GENERAL HOSPITAL SHALL OBTAIN AND MAINTAIN
19	A CERTIFICATE OF ONGOING PERFORMANCE TO CONTINUE TO PROVIDE:
20	(I) CARDIAC SURGERY SERVICES;
21	(II) PRIMARY PCI SERVICES; OR
22	(III) NONPRIMARY PCI SERVICES.
23	(E) AN ACUTE GENERAL HOSPITAL THAT IS PROVIDING NONPRIMARY
24	PCI SERVICES UNDER A RESEARCH WAIVER ISSUED BY THE COMMISSION
25	SHALL OBTAIN A CERTIFICATE OF CONFORMANCE FOR ITS NONPRIMARY PCI
26	SERVICES BEFORE THE ACUTE GENERAL HOSPITAL MAY OBTAIN A CERTIFICATE
27	OF ONGOING PERFORMANCE TO PROVIDE THE NONPRIMARY PCI SERVICES.

1 2 3	(F) (1) THE COMMISSION SHALL ADOPT REGULATIONS THROUGH AN UPDATE TO THE STATE HEALTH PLAN FOR FACILITIES AND SERVICES TO IMPLEMENT THIS SECTION.
4	(2) THE REGULATIONS SHALL:
5	(I) ADDRESS QUALITY, ACCESS, AND COST;
6 7	(II) ESTABLISH A PROCESS AND MINIMUM STANDARDS FOR OBTAINING A CERTIFICATE OF CONFORMANCE;
8 9	(III) ESTABLISH A PROCESS AND MINIMUM STANDARDS FOR OBTAINING AND MAINTAINING A CERTIFICATE OF ONGOING PERFORMANCE;
10 11	(IV) SET AN APPROPRIATE TIME PERIOD FOR THE EXPIRATION OF A CERTIFICATE OF ONGOING PERFORMANCE; AND
12 13 14 15 16 17 18	(V) REQUIRE, AS A CONDITION OF THE ISSUANCE OF A CERTIFICATE OF CONFORMANCE OR A CERTIFICATE OF ONGOING PERFORMANCE, THAT AN ACUTE GENERAL HOSPITAL AGREE TO VOLUNTARILY RELINQUISH ITS AUTHORITY TO PROVIDE CARDIAC SURGERY SERVICES, PRIMARY PCI SERVICES, OR NONPRIMARY PCI SERVICES IF THE HOSPITAL FAILS TO MEET THE APPLICABLE STANDARDS ESTABLISHED BY THE COMMISSION.
19 20 21 22	SECTION 2. AND BE IT FURTHER ENACTED, That the process established by the Maryland Health Care Commission for issuing a certificate of conformance, as required under § 19–120.1 of the Health – General Article, as enacted by Section 1 of this Act:
23 24 25	(1) shall be similar to the process through which the Commission grants an exemption from certificate of need requirements for merged asset systems; and
26	(2) may not allow interested party status.
27 28 29 30 31	SECTION 3. AND BE IT FURTHER ENACTED, That, notwithstanding any other provision of this Act, an acute general hospital whose research waiver for nonprimary PCI services was extended by the Maryland Health Care Commission under COMAR 10.24.05 and that continues to meet the requirements under COMAR 10.24.05 may provide nonprimary PCI services until the Commission:

 $\,$ (1) makes one of the determinations or findings provided under 33 $\,$ COMAR 10.24.05.05; and

- 1 (2) depending on the results of the C-PORT E study and the Commission's actions taken under COMAR 10.24.05.05A(1) and B, considers the hospital's application under § 19–120.1(b) of the Health General Article, as enacted by Section 1 of this Act, for a certificate of conformance for its nonprimary PCI services.
- 6 SECTION 4. AND BE IT FURTHER ENACTED, That this Act shall take effect 7 July 1, 2012.