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SENATE BILL 6750

1998 Regular Session

State of Washington 55th Legislature

By Senators Anderson and Winsley

Read first time . Referred to Committee on .

- 1 AN ACT Relating to health facilities and services; amending RCW
- 2 70.38.025, 70.38.105, 70.38.115, and 70.38.135; adding a new chapter to
- 3 Title 70 RCW; creating new sections; decodifying RCW 70.38.155,
- 4 70.38.156, 70.38.157, 70.38.914, 70.38.915, 70.38.916, 70.38.917,
- 5 70.38.918, and 70.38.919; repealing RCW 70.38.095; prescribing
- 6 penalties; and providing an effective date.
- 7 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 8 **Sec. 1.** RCW 70.38.025 and 1997 c 210 s 2 are each amended to read 9 as follows:
- When used in this chapter, the terms defined in this section shall have the meanings indicated.
- 12 (1) "Board of health" means the state board of health created 13 pursuant to chapter 43.20 RCW.
- 14 (2) "Capital expenditure" is an expenditure, including a force
- 15 account expenditure (i.e., an expenditure for a construction project
- 16 undertaken by a nursing home facility as its own contractor) which,
- 17 under generally accepted accounting principles, is not properly
- 18 chargeable as an expense of operation or maintenance. Where a person
- 19 makes an acquisition under lease or comparable arrangement, or through

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donation, which would have required review if the acquisition had been made by purchase, such expenditure shall be deemed a capital expenditure. Capital expenditures include donations of equipment or facilities to a nursing home facility which if acquired directly by such facility would be subject to certificate of need review under the provisions of this chapter and transfer of equipment or facilities for less than fair market value if a transfer of the equipment or facilities at fair market value would be subject to such review. cost of any studies, surveys, designs, plans, working drawings, specifications, and other activities essential to the acquisition, improvement, expansion, or replacement of any plant or equipment with respect to which such expenditure is made shall be included in determining the amount of the expenditure.

- (3) "Continuing care retirement community" means an entity which provides shelter and services under continuing care contracts with its members and which sponsors or includes a health care facility or a health service. A "continuing care contract" means a contract to provide a person, for the duration of that person's life or for a term in excess of one year, shelter along with nursing, medical, health-related, or personal care services, which is conditioned upon the transfer of property, the payment of an entrance fee to the provider of such services, or the payment of periodic charges for the care and services involved. A continuing care contract is not excluded from this definition because the contract is mutually terminable or because shelter and services are not provided at the same location.
 - (4) "Department" means the department of health.
- (5) "Expenditure minimum" means, for the purposes of the certificate of need program, one million dollars adjusted by the department by rule to reflect changes in the United States department of commerce composite construction cost index; or a lesser amount required by federal law and established by the department by rule.
 - (6) "Health care facility" means hospices, ((hospitals, psychiatric hospitals,)) nursing homes, kidney disease treatment centers, ((ambulatory surgical facilities,)) and home health agencies, and includes such facilities when owned and operated by a political subdivision or instrumentality of the state and such other facilities as required by federal law and implementing regulations, but does not include any health facility or institution conducted by and for those who rely exclusively upon treatment by prayer or spiritual means in

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accordance with the creed or tenets of any well-recognized church or 1 2 religious denomination, or any health facility or institution operated for the exclusive care of members of a convent as defined in RCW 3 4 84.36.800 or rectory, monastery, or other institution operated for the care of members of the clergy. In addition, the term does not include 5 any nonprofit hospital: (a) Which is operated exclusively to provide 6 7 health care services for children; (b) which does not charge fees for 8 such services; and (c) if not contrary to federal law as necessary to 9 the receipt of federal funds by the state.

- 10 (7) "Health maintenance organization" means a public or private 11 organization, organized under the laws of the state, which:
- 12 (a) Is a qualified health maintenance organization under Title 13 XIII, section 1310(d) of the Public Health Services Act; or
- 14 (b)(i) Provides or otherwise makes available to enrolled 15 participants health care services, including at least the following 16 basic health care services: Usual physician services, hospitalization, 17 laboratory, x-ray, emergency, and preventive services, and out-of-area coverage; (ii) is compensated (except for copayments) for the provision 18 19 of the basic health care services listed in (b)(i) to enrolled 20 participants by a payment which is paid on a periodic basis without regard to the date the health care services are provided and which is 21 fixed without regard to the frequency, extent, or kind of health 22 service actually provided; and (iii) provides physicians' services 23 24 primarily (A) directly through physicians who are either employees or 25 partners of such organization, or (B) through arrangements with individual physicians or one or more groups of physicians (organized on 26 a group practice or individual practice basis). 27
- (8) "Health services" means clinically related (i.e., preventive, diagnostic, curative, rehabilitative, or palliative) services and includes alcoholism, drug abuse, and mental health services and as defined in federal law.
- (9) "Health service area" means a geographic region appropriate for effective health planning which includes a broad range of health services.
- 35 (10) "Person" means an individual, a trust or estate, a 36 partnership, a corporation (including associations, joint stock 37 companies, and insurance companies), the state, or a political 38 subdivision or instrumentality of the state, including a municipal 39 corporation or a hospital district.

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- 1 (11) "Provider" ((generally)) means a health care professional or 2 an organization, institution, or other entity providing health care 3 ((but the precise definition for this term shall be established by rule 4 of the department, consistent with federal law)).
- 5 (12) "Public health" means the level of well-being of the general 6 population; those actions in a community necessary to preserve, 7 protect, and promote the health of the people for which government is 8 responsible; and the governmental system developed to guarantee the 9 preservation of the health of the people.
- 10 (13) "Secretary" means the secretary of health or the secretary's 11 designee.
- (14) "Tertiary health service" means: (a) Speciality tertiary burn 12 13 services designed to treat complex burn cases; (b) tertiary neonatal 14 intensive care nursery or obstetric services designed to treat complex nursery or obstetric cases; (c) transplantation of specific solid 15 organs, including heart, liver, pancreas, lung, small bowel, kidney, 16 and bone marrow; (d) open heart surgery, therapeutic cardiac 17 catheterization, or percutaneous translumenal coronary angioplasty; (e) 18 19 inpatient physical rehabilitation services for persons with usually nonreversible, multiple function impairments of moderate-to-severe 20 complexity resulting in major changes in the patient's lifestyle and 21 requiring intervention by several rehabilitation disciplines; (f) 22 specialized tertiary inpatient pediatric service designed to treat 23 24 complex pediatric cases for more than twenty-four hours; or (q) a 25 similar specialized service that meets complicated medical needs of 26 people and requires sufficient patient volume to optimize provider 27 effectiveness, quality of service, and improved outcomes of care.
- (((15) "Hospital" means any health care institution which is required to qualify for a license under RCW 70.41.020(2); or as a psychiatric hospital under chapter 71.12 RCW.))
- 31 **Sec. 2.** RCW 70.38.105 and 1996 c 50 s 1 are each amended to read 32 as follows:
- 33 (1) The department is authorized and directed to implement the 34 certificate of need program in this state pursuant to the provisions of 35 this chapter.
- 36 (2) There shall be a state certificate of need program which is 37 administered consistent with the requirements of federal law as 38 necessary to the receipt of federal funds by the state.

- 1 (3) No person shall engage in any undertaking which is subject to 2 certificate of need review under subsection (4) of this section without 3 first having received from the department either a certificate of need 4 or an exception granted in accordance with this chapter.
- 5 (4) The following shall be subject to certificate of need review 6 under this chapter:
- 7 (a) The construction, development, or other establishment of a new 8 health care facility;
- 9 (b) ((The sale, purchase, or lease of part or all of any existing 10 hospital as defined in RCW 70.38.025;
- (c)) Any capital expenditure for the construction, renovation, or alteration of a nursing home which substantially changes the services of the facility ((after January 1, 1981,)) provided that the substantial changes in services are specified by the department in rule;
- $((\frac{d}{d}))$ (c) Any capital expenditure for the construction, renovation, or alteration of a nursing home which exceeds the expenditure minimum as defined by RCW 70.38.025. However, a capital expenditure which is not subject to certificate of need review under (a), (b), $((\frac{d}{d}))$ or $(\frac{d}{d})$ of this subsection and which is solely for any one or more of the following is not subject to certificate of need review:
 - (i) Communications and parking facilities;
- (ii) Mechanical, electrical, ventilation, heating, and air conditioning systems;
- 26 (iii) Energy conservation systems;

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- (iv) Repairs to, or the correction of, deficiencies in existing physical plant facilities which are necessary to maintain state licensure, however, other additional repairs, remodeling, or replacement projects that are not related to one or more deficiency citations and are not necessary to maintain state licensure are not exempt from certificate of need review except as otherwise permitted by (((d))) (c)(vi) of this subsection or RCW 70.38.115(13);
- (v) Acquisition of equipment, including data processing equipment, which is not or will not be used in the direct provision of health services;
- (vi) Construction or renovation at an existing nursing home which involves physical plant facilities, including administrative, dining

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1 areas, kitchen, laundry, therapy areas, and support facilities, by an 2 existing licensee who has operated the beds for at least one year;

(vii) Acquisition of land; and

(viii) Refinancing of existing debt;

((\(\frac{(+)}{e}\)) (d) A change in bed capacity of a health care facility which increases the total number of licensed beds or redistributes beds among acute care, nursing home care, and boarding home care if the bed redistribution is to be effective for a period in excess of six months, or a change in bed capacity of a rural health care facility licensed under RCW 70.175.100 that increases the total number of nursing home beds or redistributes beds from acute care or boarding home care to nursing home care if the bed redistribution is to be effective for a period in excess of six months;

((\(\frac{(++)}{(++)}\)) (e) Any new tertiary health services which are offered in or through a health care facility, hospital licensed under RCW 70.41.020(2) or chapter 71.12 RCW, or rural health care facility licensed under RCW 70.175.100((, and which were not offered on a regular basis by, in, or through such health care facility or rural health care facility within the twelve month period prior to the time such services would be offered;

- (g) Any expenditure for the construction, renovation, or alteration of a nursing home or change in nursing home services in excess of the expenditure minimum made in preparation for any undertaking under subsection (4) of this section and any arrangement or commitment made for financing such undertaking. Expenditures of preparation shall include expenditures for architectural designs, plans, working drawings, and specifications. The department may issue certificates of need permitting predevelopment expenditures, only, without authorizing any subsequent undertaking with respect to which such predevelopment expenditures are made)); and
- $((\frac{h}{h}))$ (f) Any increase in the number of dialysis stations in a 32 kidney disease center.
 - (5) The department is authorized to charge fees for the review of certificate of need applications and requests for exemptions from certificate of need review. The fees shall be sufficient to cover the full cost of review and exemption, which may include the development of standards, criteria, and policies.
- 38 (6) No person may divide a project in order to avoid review 39 requirements under any of the thresholds specified in this section.

- 1 **Sec. 3.** RCW 70.38.115 and 1996 c 178 s 22 are each amended to read 2 as follows:
- 3 (1) Certificates of need shall be issued, denied, suspended, or 4 revoked by the designee of the secretary in accord with the provisions 5 of this chapter and rules of the department which establish review 6 procedures and criteria for the certificate of need program.
- 7 (2) Criteria for the review of certificate of need applications, 8 except as provided in subsection (3) of this section for health 9 maintenance organizations, shall include but not be limited to 10 consideration of the following:
- 11 (a) The need that the population served or to be served by such 12 services has for such services;
- 13 (b) The availability of less costly or more effective alternative 14 methods of providing such services;
- 15 (c) The financial feasibility and the probable impact of the 16 proposal on the cost of and charges for providing health services in 17 the community to be served;
- (d) In the case of health services to be provided, (i) the 18 19 availability of alternative uses of project resources for the provision of other health services, (ii) the extent to which such proposed 20 services will be accessible to all residents of the area to be served, 21 and (iii) the need for and the availability in the community of 22 services and facilities for osteopathic physicians and surgeons and 23 24 allopathic physicians and their patients. The department shall 25 consider the application in terms of its impact on existing and 26 proposed institutional training programs for doctors of osteopathic 27 medicine and surgery and medicine at the student, internship, and residency training levels; 28
- (e) In the case of a construction project, the costs and methods of the proposed construction, including the cost and methods of energy provision, and the probable impact of the construction project reviewed (i) on the cost of providing health services by the person proposing such construction project and (ii) on the cost and charges to the public of providing health services by other persons;
- (f) ((The special needs and circumstances of osteopathic hospitals,
 nonallopathic services and children's hospitals;
- (g)) Improvements or innovations in the financing and delivery of health services which foster cost containment and serve to promote quality assurance and cost-effectiveness;

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- 4 $((\frac{1}{1}))$ (h) In the case of existing services or facilities, the quality of care provided by such services or facilities in the past;
- 6 (((j) In the case of hospital certificate of need applications,
 7 whether the hospital meets or exceeds the regional average level of
 8 charity care, as determined by the secretary;)) and
 - $((\frac{k}{k}))$ (i) In the case of nursing home applications:

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- 10 (i) The availability of other nursing home beds in the planning 11 area to be served; and
- (ii) The availability of other services in the community to be served. Data used to determine the availability of other services will include but not be limited to data provided by the department of social and health services.
- 16 (3) A certificate of need application of a health maintenance 17 organization or a health care facility which is controlled, directly or 18 indirectly, by a health maintenance organization, shall be approved by 19 the department if the department finds:
- (a) Approval of such application is required to meet the needs of the members of the health maintenance organization and of the new members which such organization can reasonably be expected to enroll; and
 - (b) The health maintenance organization is unable to provide, through services or facilities which can reasonably be expected to be available to the organization, its health services in a reasonable and cost-effective manner which is consistent with the basic method of operation of the organization and which makes such services available on a long-term basis through physicians and other health professionals associated with it.
 - A health care facility, or any part thereof, with respect to which a certificate of need was issued under this subsection may not be sold or leased and a controlling interest in such facility or in a lease of such facility may not be acquired unless the department issues a certificate of need approving the sale, acquisition, or lease.
- (4) ((Until the final expiration of the state health plan as provided under RCW 70.38.919, the decision of the department on a certificate of need application shall be consistent with the state health plan in effect, except in emergency circumstances which pose a

- threat to the public health.)) The department in making its final 1 decision may issue a conditional certificate of need if it finds that 2 the project is justified only under specific circumstances. 3 The 4 conditions shall directly relate to the project being reviewed. The conditions may be released if it can be substantiated that the 5 conditions are no longer valid and the release of such conditions would 6 be consistent with the purposes of this chapter. 7
- 8 (5) Criteria adopted for review in accordance with subsection (2) 9 of this section may vary according to the purpose for which the 10 particular review is being conducted or the type of health service 11 reviewed.
- (6) The department shall specify information to be required for 12 13 certificate of need applications. Within fifteen days of receipt of the application, the department shall request additional information 14 15 considered necessary to the application or start the review process. 16 Applicants may decline to submit requested information through written 17 notice to the department, in which case review starts on the date of receipt of the notice. Applications may be denied or limited because 18 19 of failure to submit required and necessary information.
- 20 (7) Concurrent review is for the purpose of comparative analysis and evaluation of competing or similar projects in order to determine 21 which of the projects may best meet identified needs. Categories of 22 projects subject to concurrent review include at least new health care 23 24 facilities, new services, and expansion of existing health care 25 facilities. The department shall specify time periods for the 26 submission of applications for certificates of need subject to concurrent review, which shall not exceed ninety days. Review of 27 concurrent applications shall start fifteen days after the conclusion 28 29 of the time period for submission of applications subject to concurrent 30 review. Concurrent review periods shall be limited to one hundred 31 fifty days, except as provided for in rules adopted by the department authorizing and limiting amendment during the course of the review, or 32 for an unresolved pivotal issue declared by the department. 33
- 34 (8) Review periods for certificate of need applications other than 35 those subject to concurrent review shall be limited to ninety days. 36 Review periods may be extended up to thirty days if needed by a review 37 agency, and for unresolved pivotal issues the department may extend up 38 to an additional thirty days. A review may be extended in any case if 39 the applicant agrees to the extension.

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- 1 (9) The department or its designee, shall conduct a public hearing 2 on a certificate of need application if requested unless the review is 3 expedited or subject to emergency review. The department by rule shall 4 specify the period of time within which a public hearing must be 5 requested and requirements related to public notice of the hearing, 6 procedures, recordkeeping and related matters.
 - (10)(a) Any applicant denied a certificate of need or whose certificate of need has been suspended or revoked has the right to an adjudicative proceeding. The proceeding is governed by chapter 34.05 RCW, the Administrative Procedure Act.
- (b) Any health care facility or health maintenance organization 11 (i) Provides services similar to the services provided by the 12 13 applicant and under review pursuant to this subsection; (ii) is located within the applicant's health service area; and (iii) testified or 14 15 submitted evidence at a public hearing held pursuant to subsection (9) 16 of this section, shall be provided an opportunity to present oral or 17 written testimony and argument in a proceeding under this subsection: That the health care facility or health maintenance 18 PROVIDED, 19 organization had, in writing, requested to be informed of the 20 department's decisions.
- (c) If the department desires to settle with the applicant prior to the conclusion of the adjudicative proceeding, the department shall so inform the health care facility or health maintenance organization and afford them an opportunity to comment, in advance, on the proposed settlement.
- 26 (11) An amended certificate of need shall be required for the 27 following modifications of an approved project:
 - ((\(\frac{1}{a}\)) A new service requiring review under this chapter;
- 29 (b) An expansion of a service subject to review beyond that 30 originally approved;
- 31 (c) An increase in bed capacity;

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(d))) A significant reduction in the scope of a nursing home 32 project without a commensurate reduction in the cost of the nursing 33 home project, or a cost increase (as represented in bids on a nursing 34 35 home construction project or final cost estimates acceptable to the person to whom the certificate of need was issued) if the total of such 36 37 increases exceeds twelve percent or fifty thousand dollars, whichever is greater, over the maximum capital expenditure approved. The review 38 39 of reductions or cost increases shall be restricted to the continued

conformance of the nursing home project with the review criteria pertaining to financial feasibility and cost containment.

- (12) An application for a certificate of need for a nursing home capital expenditure which is determined by the department to be required to eliminate or prevent imminent safety hazards or correct violations of applicable licensure and accreditation standards shall be approved.
- (13)(a) Replacement of existing nursing home beds in the same planning area by an existing licensee who has operated the beds for at least one year shall not require a certificate of need under this chapter. The licensee shall give written notice of its intent to replace the existing nursing home beds to the department and shall provide the department with information as may be required pursuant to rule. Replacement of the beds by a party other than the licensee is subject to certificate of need review under this chapter, except as otherwise permitted by subsection (14) of this section.
- (b) When an entire nursing home ceases operation, the licensee or any other party who has secured an interest in the beds may reserve his or her interest in the beds for eight years or until a certificate of need to replace them is issued, whichever occurs first. However, the nursing home, licensee, or any other party who has secured an interest in the beds must give notice of its intent to retain the beds to the department of health no later than thirty days after the effective date of the facility's closure. Certificate of need review shall be required for any party who has reserved the nursing home beds except that the need criteria shall be deemed met when the applicant is the licensee who had operated the beds for at least one year, who has operated the beds for at least one year immediately preceding the reservation of the beds, and who is replacing the beds in the same planning area.
- (14) In the event that a licensee, who has provided the department with notice of his or her intent to replace nursing home beds under subsection (13)(a) of this section, engages in unprofessional conduct or becomes unable to practice with reasonable skill and safety by reason of mental or physical condition, pursuant to chapter 18.130 RCW, or dies, the building owner shall be permitted to complete the nursing home bed replacement project, provided the building owner has secured an interest in the beds.

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- 1 **Sec. 4.** RCW 70.38.135 and 1989 1st ex.s. c 9 s 607 are each 2 amended to read as follows:
- 3 The secretary shall have authority to:
- (1) ((Provide when needed)) Contract for temporary or intermittent services of experts or consultants or organizations ((thereof, by contract, when such services are to be performed on a part time or feefor-service basis));
- 8 (2) Make or cause to be made such on-site surveys of health care or 9 medical facilities as may be necessary for the administration of the 10 certificate of need program;
- 11 (3) ((Upon review of recommendations, if any, from the board of 12 health:
- (a))) Promulgate rules under which health care ((facilities))
 providers doing business within the state shall submit to the
 department such data ((related to health and health care)) as the
 department finds necessary to the performance of its functions under
 this chapter;
- ((\(\frac{(\frac{b}{b})}{D}\))) (4) Promulgate rules pertaining to the maintenance and operation of medical facilities which receive federal assistance under the provisions of Title XVI;
- (((c))) (5) Promulgate rules in implementation of the provisions of this chapter, including the establishment of procedures for public hearings for predecisions and post-decisions on applications for certificate of need; and
- $((\frac{d}{d}))$ (6) Promulgate rules providing circumstances and procedures of expedited certificate of need review if there has not been a significant change in existing health facilities of the same type or in the need for such health facilities and services ($\dot{\tau}$
- 29 (4) Grant allocated state funds to qualified entities, as defined 30 by the department, to fund not more than seventy-five percent of the 31 costs of regional planning activities, excluding costs related to 32 review of applications for certificates of need, provided for in this 33 chapter or approved by the department; and
- (5) Contract with and provide reasonable reimbursement for qualified entities to assist in determinations of certificates of need)).
- NEW SECTION. **Sec. 5.** (1) The enactment of this act shall not have the effect of terminating, or in any way modifying, the validity of any

- 1 certificate of need that shall already have been issued before January 2 1, 1999.
- 3 (2) Any certificate of need application that was submitted and 4 declared complete, but upon which final action had not been taken
- 5 before January 1, 1999, shall be reviewed and action taken based on
- 6 chapter 70.38 RCW as in effect before January 1, 1999.
- 7 <u>NEW SECTION.</u> **Sec. 6.** The legislature finds that ambulatory
- 8 surgical centers have provided the citizens of Washington state access
- 9 to various routine surgical and similar invasive medical procedures not
- 10 requiring hospitalization, resulting in reduced health care costs
- 11 consistent with the intent of health care reform. However, the
- 12 delivery of these services may put patients at risk due to the invasive
- 13 nature of the procedures performed or the use of general anesthesia and
- 14 the short patient recovery time prior to discharge.
- 15 It is the intent of the legislature to protect the citizens of
- 16 Washington state by licensing ambulatory surgical centers and by
- 17 adopting and enforcing minimum standards for ambulatory surgical
- 18 centers. Standards established are intended to be the minimum
- 19 necessary to ensure a safe environment for the performance of surgical
- 20 procedures and to ensure safe and competent care of patients.
- 21 <u>NEW SECTION.</u> **Sec. 7.** The definitions in this section apply
- 22 throughout this chapter unless the context clearly requires otherwise.
- 23 (1) "Ambulatory surgical center" means any freestanding distinct 24 entity that operates primarily for the purpose of performing surgical
- 25 procedures to treat patients not requiring in-patient hospital care
- 26 under normal circumstances, except:
- 27 (a) A health care facility otherwise licensed and regulated by the
- 28 department to provide surgical services, including an ambulatory
- 29 surgical facility operated by a hospital and regulated by the
- 30 department according to chapter 70.41 RCW;
- 31 (b) A facility in the offices of either an individual or group
- 32 practice of physicians or other health care practitioners regulated
- 33 under Title 18 RCW, who are providing services within their scope of
- 34 practice, including a facility that is physically separate from the
- 35 practice, if the privilege of using the facility is not extended to
- 36 regulated practitioners outside the individual or group practice.
- 37 However, such a facility may request licensure as an ambulatory surgery

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- 1 center if the facility meets the requirements of this chapter and rules
 2 adopted under this chapter; and
- 3 (c) A facility in which the services are provided solely by 4 dentists licensed under chapter 18.32 RCW and persons assisting or 5 under the supervision of dentists. However, such a facility may 6 request licensure as an ambulatory surgical center if the facility 7 meets the requirements of this chapter and rules adopted under this 8 chapter.
- 9 (2) "Department" means the department of health.
- 10 (3) "Person" means an individual, firm, partnership, corporation, 11 company, association, joint stock association, and the legal successor 12 thereof.
- 13 (4) "Surgical procedure" means an invasive medical procedure that:
- 14 (a) Utilizes surgical instruments, laser, cautery, cryogenics, or 15 chemicals; and
- 16 (b) Removes, corrects, or facilitates the diagnosis or cure of a 17 disease, condition, or injury through that branch of medicine that 18 treats diseases, injuries, and deformities by manual or operative 19 methods.
- NEW SECTION. Sec. 8. (1) Nothing in this chapter shall be construed in any manner to change, limit, or expand the scope of practice of a health care practitioner.
- 23 (2) Nothing in this chapter shall be construed to limit an 24 ambulatory surgical center to performing only surgical procedures.
- NEW SECTION. **Sec. 9.** After June 30, 1999, no person shall operate or maintain an ambulatory surgical center or advertise by using the term "licensed ambulatory surgery center," "licensed day surgery center," "licensed surgery center," or other words conveying similar meaning without first obtaining an ambulatory surgical center license from the department.
- NEW SECTION. Sec. 10. An applicant for an ambulatory surgical center license shall:
- 33 (1) Submit to the department a written application on a form 34 provided by the department, including a list of surgical specialties 35 offered;

- 1 (2) Submit to the department for review and approval building plans 2 for new construction, alterations other than minor alterations, and 3 additions to existing facilities prior to licensure and occupancy as 4 prescribed by the department;
- 5 (3) Demonstrate ability to comply with this chapter and rules 6 adopted under this chapter;
- 7 (4) Cooperate with the department during on-site surveys prior to 8 licensure or renewal of licensure;
- 9 (5) Provide such proof as the department may require concerning 10 organizational and governance structure, and the identity of the 11 applicant, officers, directors, partners, managing employees, or owners 12 of ten percent or more of the applicant's assets;
- 13 (6) Pay to the department a license fee and building plan review 14 fee as prescribed by the department under the authority of RCW 15 43.70.110 and 43.70.250; and
- 16 (7) Provide any other information the department may reasonably 17 require.
- 18 NEW SECTION. Sec. 11. If the department determines that an applicant complies with the provisions of this chapter and rules 19 adopted under this chapter, the department shall issue a license to the 20 applicant. A license, unless suspended or revoked, is effective for a 21 period of two years, however an initial license is only effective for 22 23 twelve months. The department shall conduct at least one on-site 24 survey within each licensure period, except as provided for in section 25 15 of this act.
- NEW SECTION. Sec. 12. The department shall establish and adopt such minimum standards and rules pertaining to the construction, maintenance, and operation of ambulatory surgical centers as are necessary for the safe and adequate care and treatment of patients: PROVIDED, That such minimum standards are no greater than federal medicare program standards as they existed on January 1, 1995, unless authorized by other state statute.
- NEW SECTION. Sec. 13. The department may, at any time, conduct an on-site survey of a licensee in order to determine compliance with this chapter and rules adopted under this chapter.

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- NEW SECTION. Sec. 14. The department may deny, suspend, or revoke a license under this chapter or, in lieu thereof or in addition thereto, assess civil monetary penalties in any case in which it finds
- 4 the applicant or licensee:
- 5 (1) Failed or refused to comply with the requirements of this 6 chapter or rules adopted under this chapter;
- 7 (2) Was the holder of a license issued according to this chapter 8 that was revoked for cause and never reissued by the department, or 9 that was suspended for cause and the terms of the suspension were not 10 fulfilled, and the licensee has continued to operate;
- 11 (3) Has knowingly or with reason to know made a false statement of 12 material fact in the application for the license or any data attached 13 thereto or in any record required by this chapter or matter under 14 investigation by the department;
- 15 (4) Refused to allow representatives of the department to inspect 16 any portion of the licensee's premises, or any book, record, or file 17 required by this chapter to be maintained;
- (5) Willfully prevented, interfered with, or attempted to impede in any way the work of any representative of the department and the lawful enforcement of any provision of this chapter;
- 21 (6) Willfully prevented, interfered with, or attempted to impede in 22 any way any representative of the department in the preservation of 23 evidence of any violation of this chapter or rules adopted under this 24 chapter;
- 25 (7) Failed to pay any civil monetary penalty assessed by the 26 department according to this chapter within ten days after the 27 assessment becomes final;
- 28 (8) Used advertising that is false, fraudulent, or misleading;
- 29 (9) Has repeated incidents of personnel performing services beyond 30 their scope of practice; or
- 31 (10) Misrepresented or was fraudulent in any aspect of the conduct 32 of the licensee's business.
- NEW SECTION. Sec. 15. (1) An ambulatory surgical center that is certified or accredited as an ambulatory surgical center by the federal medicare program or any private accrediting organization shall be granted the applicable renewal license without the necessity of an onsite state licensure survey if:

- 1 (a) The department determines that the applicable survey standards 2 of the certification or accreditation program are substantially 3 equivalent to those required by this chapter;
- 4 (b) An on-site survey has been conducted for the purposes of certification or accreditation during the previous twenty-four months; 6 and
- 7 (c) The department receives directly from the certifying or 8 accrediting entity or from the licensee or applicant copies of the 9 initial and subsequent survey reports and other relevant reports or 10 findings that indicate compliance with licensure requirements.
- (2) In reviewing whether the federal medicare program or any 11 private accrediting organization has survey standards that are of 12 13 substantial equivalency to those set forth in this chapter, the department is directed to provide the most liberal interpretation 14 15 consistent with the intent of this chapter. In the event the 16 department determines at any time that the survey standards are not 17 substantially equivalent to those required by this chapter, the department is directed to notify the affected licensees. 18 The 19 notification shall contain a detailed description of the deficiencies 20 in the alternative survey process, as well as an explanation concerning the risk to the consumer. The determination of substantial equivalency 21 for an alternative survey process and lack of substantial equivalency 22 are agency actions and subject to the provisions of chapter 34.05 RCW. 23
- (3) Ambulatory surgical centers receiving a license without an onsite survey by the department under this chapter shall pay the same licensure fee as other ambulatory surgical centers.
- 27 (4) This section does not affect the department's enforcement 28 authority for licensed ambulatory surgical centers.
- NEW SECTION. Sec. 16. An ambulatory surgical center licensed by the department shall comply with the charity care delivery requirements found in RCW 70.170.060 (1), (5), and (6) for the care it provides in its center.
- NEW SECTION. Sec. 17. The health care delivery system in Washington has experienced a dramatic migration from a hospital based to a nonhospital based system. Technological advances in the provision of care and changes to health insurance reimbursement have transformed how may people receive medical care. Services previously performed in

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- 1 hospitals on an inpatient basis increasingly are provided as
- 2 outpatient, or "ambulatory," procedures in hospitals, emergency
- 3 departments, and freestanding ambulatory surgery centers. The state of
- 4 Washington does not currently have the capacity to analyze the cost,
- 5 quality, and access to health care services that are increasingly
- 6 occurring in the nonhospital setting.
- 7 National standards for ambulatory data exist. These standards
- 8 focus on collecting data regarding ambulatory services at sites
- 9 including hospital-based ambulatory surgery, ambulatory surgery
- 10 performed in freestanding clinics, and services delivered in hospital
- 11 emergency departments and hospital outpatient clinics.
- 12 The department of health shall study the feasibility of updating,
- 13 designing, and expanding the comprehensive hospital abstract reporting
- 14 system to include ambulatory data. The department shall submit a
- 15 preliminary report to the legislature by December 31, 1998, and a final
- 16 report July 1, 1999. The report shall be done in conjunction with
- 17 potential and current data providers and shall include a cost/benefit
- 18 analysis, data standards and reporting requirements, financing
- 19 alternatives, data access and dissemination requirements,
- 20 prioritization of data needs, and proposed implementation phases.
- 21 <u>NEW SECTION.</u> Sec. 18. If any part of this act is found to be in
- 22 conflict with federal requirements that are a prescribed condition to
- 23 the allocation of federal funds to the state, the conflicting part of
- 24 this act is inoperative solely to the extent of the conflict and with
- 25 respect to the agencies directly affected, and this finding does not
- 26 affect the operation of the remainder of this act in its application to
- 27 the agencies concerned. Rules adopted under this act must meet federal
- 28 requirements that are a necessary condition to the receipt of federal
- 29 funds by the state.
- 30 <u>NEW SECTION.</u> **Sec. 19.** RCW 70.38.155, 70.38.156, 70.38.157,
- 31 70.38.914, 70.38.915, 70.38.916, 70.38.917, 70.38.918, and 70.38.919
- 32 are each decodified.
- 33 <u>NEW SECTION.</u> **Sec. 20.** RCW 70.38.095 and 1979 ex.s. c 161 s 9 are
- 34 each repealed.

- 1 <u>NEW SECTION.</u> **Sec. 21.** If any provision of this act or its
- 2 application to any person or circumstance is held invalid, the
- 3 remainder of the act or the application of the provision to other
- 4 persons or circumstances is not affected.
- 5 <u>NEW SECTION.</u> **Sec. 22.** This act takes effect January 1, 1999.
- 6 <u>NEW SECTION.</u> **Sec. 23.** Sections 6 through 16 of this act 7 constitute a new chapter in Title 70 RCW.

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