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SENATE BILL 6671

State of Washington 61st Legislature 2010 Regular Session

By Senators Pflug, Marr, and Keiser

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Read first time 01/20/10. Referred to Committee on Health & Long-Term Care.

AN ACT Relating to emergency departments that are not physically connected to a hospital; amending RCW 70.38.025; reenacting and amending RCW 70.38.105; adding a new section to chapter 70.38 RCW; and creating a new section.

5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

NEW SECTION. Sec. 1. The legislature finds that freestanding emergency rooms are a growing phenomenon across the country and in this state, as hospital networks seek to expand emergency outpatient services into growing suburban communities.

The legislature further finds that hospital networks can use freestanding emergency rooms to grow market share in rapidly growing communities with an eye toward future development plans.

The legislature further finds that overdevelopment of freestanding emergency departments could potentially undermine community hospitals in the same service area that also serve many uninsured and underinsured patients and may suffer a disparate impact based on referral patterns and other business practices of the freestanding emergency room.

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The legislature further finds that there is a clear public interest in subjecting freestanding emergency room plans to the certificate of need process to ensure that an adequate health planning process can occur, being mindful of existing community-based health care facilities as well as the vital needs of rapidly growing communities for both inpatient and outpatient health care services.

- 7 Sec. 2. RCW 70.38.105 and 2009 c 315 s 1 and 2009 c 242 s 3 are 8 each reenacted and amended to read as follows:
- 9 (1) The department is authorized and directed to implement the 10 certificate of need program in this state pursuant to the provisions of 11 this chapter.
 - (2) There shall be a state certificate of need program which is administered consistent with the requirements of federal law as necessary to the receipt of federal funds by the state.
 - (3) No person shall engage in any undertaking which is subject to certificate of need review under subsection (4) of this section without first having received from the department either a certificate of need or an exception granted in accordance with this chapter.
 - (4) The following shall be subject to certificate of need review under this chapter:
 - (a) The construction, development, or other establishment of a new health care facility including, but not limited to, a hospital constructed, developed, or established by a health maintenance organization or by a combination of health maintenance organizations except as provided in subsection (7)(a) of this section;
 - (b) The sale, purchase, or lease of part or all of any existing hospital as defined in RCW 70.38.025 including, but not limited to, a hospital sold, purchased, or leased by a health maintenance organization or by a combination of health maintenance organizations except as provided in subsection (7)(b) of this section;
 - (c) The construction, development, or other establishment of a freestanding emergency room, including the continued operation any existing freestanding emergency room that was established before July 1, 2010, upon the next relicensing period;
- 35 (d) The sale, purchase, or lease of part or all of any existing
 36 freestanding emergency room;

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- (e) 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;
- $((\frac{d}{d}))$ (f) 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), $((\frac{d}{d}))$ (e), 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;
- 13 (ii) Mechanical, electrical, ventilation, heating, and air 14 conditioning systems;
 - (iii) Energy conservation systems;

- (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 $((\frac{d}{d}))$ (f) (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 areas, kitchen, laundry, therapy areas, and support facilities, by an existing licensee who has operated the beds for at least one year;
 - (vii) Acquisition of land; and
 - (viii) Refinancing of existing debt;
 - (((e))) <u>(g)</u> 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

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nursing home care if the bed redistribution is to be effective for a period in excess of six months. A health care facility certified as a critical access hospital under 42 U.S.C. 1395i-4 may increase its total number of licensed beds to the total number of beds permitted under 42 U.S.C. 1395i-4 for acute care and may redistribute beds permitted under 42 U.S.C. 1395i-4 among acute care and nursing home care without being subject to certificate of need review. If there is a nursing home licensed under chapter 18.51 RCW within twenty-seven miles of the critical access hospital, the critical access hospital is subject to certificate of need review except for:

- (i) Critical access hospitals which had designated beds to provide nursing home care, in excess of five swing beds, prior to December 31, 2003;
 - (ii) Up to five swing beds; or

(iii) Up to twenty-five swing beds for critical access hospitals which do not have a nursing home licensed under chapter 18.51 RCW within the same city or town limits. Up to one-half of the additional beds designated for swing bed services under this subsection $(4)((\frac{1}{2}))$ (g)(iii) may be so designated before July 1, 2010, with the balance designated on or after July 1, 2010.

Critical access hospital beds not subject to certificate of need review under this subsection $(4)((\frac{1}{2}))$ (g) will not be counted as either acute care or nursing home care for certificate of need review purposes. If a health care facility ceases to be certified as a critical access hospital under 42 U.S.C. 1395i-4, the hospital may revert back to the type and number of licensed hospital beds as it had when it requested critical access hospital designation;

 $((\frac{f}{f}))$ (h) Any new tertiary health services which are offered in or through a health care facility 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))) <u>(i)</u> 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 <u>this</u> subsection (4) ((of this section)) and any arrangement or commitment made for financing such undertaking.

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- 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
 - $((\frac{h}{h}))$ <u>(j)</u> Any increase in the number of dialysis stations in a kidney disease center.

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- (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.
- (6) No person may divide a project in order to avoid review requirements under any of the thresholds specified in this section.
- (7)(a) The requirement that a health maintenance organization obtain a certificate of need under subsection (4)(a) of this section for the construction, development, or other establishment of a hospital does not apply to a health maintenance organization operating a group practice that has been continuously licensed as a health maintenance organization since January 1, 2009;
- (b) The requirement that a health maintenance organization obtain a certificate of need under subsection (4)(b) of this section to sell, purchase, or lease a hospital does not apply to a health maintenance organization operating a group practice that has been continuously licensed as a health maintenance organization since January 1, 2009.
- NEW SECTION. Sec. 3. A new section is added to chapter 70.38 RCW to read as follows:
- To promote the stability of Washington's health care delivery system, by January 1, 2011, the department of health shall adopt rules establishing criteria for the issuance of a certificate of need for freestanding emergency rooms, as provided in RCW 70.38.105.
- 32 **Sec. 4.** RCW 70.38.025 and 2000 c 175 s 22 are each amended to read 33 as follows:
- When used in this chapter, the terms defined in this section shall have the meanings indicated.

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(1) "Board of health" means the state board of health created pursuant to chapter 43.20 RCW.

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- (2) "Capital expenditure" is an expenditure, including a force 3 4 account expenditure (i.e., an expenditure for a construction project undertaken by a nursing home facility as its own contractor) which, 5 6 under generally accepted accounting principles, is not properly 7 chargeable as an expense of operation or maintenance. Where a person 8 makes an acquisition under lease or comparable arrangement, or through 9 donation, which would have required review if the acquisition had been by purchase, such expenditure shall be deemed a 10 11 expenditure. Capital expenditures include donations of equipment or 12 facilities to a nursing home facility which if acquired directly by 13 such facility would be subject to certificate of need review under the provisions of this chapter and transfer of equipment or facilities for 14 15 less than fair market value if a transfer of the equipment or facilities at fair market value would be subject to such review. 16 cost of any studies, surveys, designs, plans, working drawings, 17 18 specifications, and other activities essential to the acquisition, 19 improvement, expansion, or replacement of any plant or equipment with 20 respect to which such expenditure is made shall be included in 21 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

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of commerce composite construction cost index; or a lesser amount required by federal law and established by the department by rule.

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- (6) "Health care facility" means hospices, hospice care centers, 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 accordance with the creed or tenets of any well-recognized church or religious denomination, or any health facility or institution operated for the exclusive care of members of a convent as defined in RCW 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 any nonprofit hospital: (a) Which is operated exclusively to provide health care services for children; (b) which does not charge fees for such services; and (c) if not contrary to federal law as necessary to the receipt of federal funds by the state.
 - (7) "Health maintenance organization" means a public or private organization, organized under the laws of the state, which:
 - (a) Is a qualified health maintenance organization under Title XIII, section 1310(d) of the Public Health Services Act; or
 - Provides or otherwise makes available to enrolled participants health care services, including at least the following basic health care services: Usual physician services, hospitalization, laboratory, X-ray, emergency, and preventive services, and out-of-area coverage; (ii) is compensated (except for copayments) for the provision of the basic health care services listed in (b)(i) to enrolled 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 fixed without regard to the frequency, extent, or kind of health service actually provided; and (iii) provides physicians' services primarily (A) directly through physicians who are either employees or partners of such organization, or (B) through arrangements with individual physicians or one or more groups of physicians (organized on a group practice or individual practice basis).

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1 (8) "Health services" means clinically related (i.e., preventive, 2 diagnostic, curative, rehabilitative, or palliative) services and 3 includes alcoholism, drug abuse, and mental health services and as 4 defined in federal law.

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- (9) "Health service area" means a geographic region appropriate for effective health planning which includes a broad range of health services.
- (10) "Person" means an individual, a trust or estate, a partnership, a corporation (including associations, joint stock companies, and insurance companies), the state, or a political subdivision or instrumentality of the state, including a municipal corporation or a hospital district.
- (11) "Provider" generally means a health care professional or an organization, institution, or other entity providing health care but the precise definition for this term shall be established by rule of the department, consistent with federal law.
- (12) "Public health" means the level of well-being of the general population; those actions in a community necessary to preserve, protect, and promote the health of the people for which government is responsible; and the governmental system developed to guarantee the preservation of the health of the people.
- 22 (13) "Secretary" means the secretary of health or the secretary's designee.
 - (14) "Tertiary health service" means a specialized service that meets complicated medical needs of people and requires sufficient patient volume to optimize provider 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 $70.41.020((\frac{2}{1}))$ (4); or as a psychiatric hospital under chapter 71.12 RCW.
- 31 (16) "Freestanding emergency room" means an emergency department 32 that is not physically connected or adjacent to a hospital licensed 33 under chapter 70.41 RCW.

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