WEST VIRGINIA LEGISLATURE

EIGHTY-FIRST LEGISLATURE REGULAR SESSION, 2013

ENROLLED

COMMITTEE SUBSTITUTE

FOR

Senate Bill No. 335

(Senators Yost, Edgell and Fitzsimmons, ORIGINAL SPONSORS)

[Passed April 13, 2013; in effect from passage.]

ENROLLED

COMMITTEE SUBSTITUTE

FOR

Senate Bill No. 335

(SENATORS YOST, EDGELL AND FITZSIMMONS, original sponsors)

[Passed April 13, 2013; in effect from passage.]

AN ACT to amend and reenact §16-2D-4 of the Code of West Virginia, 1931, as amended, relating to permitting certain hospitals to request an exemption from certificates of need for health care facilities in specific instances.

Be it enacted by the Legislature of West Virginia:

That §16-2D-4 of the Code of West Virginia, 1931, as amended, be amended and reenacted to read as follows:

ARTICLE 2D. CERTIFICATE OF NEED.

§16-2D-4. Exemptions from certificate of need program.

- 1 (a) Except as provided in subdivision (9), subsection (b),
- 2 section three of this article, nothing in this article or the rules
- 3 adopted pursuant to this article may be construed to authorize
- 4 the licensure, supervision, regulation or control in any
- 5 manner of the following:

- 6 (1) Private office practice of any one or more health 7 professionals licensed to practice in this state pursuant to 8 chapter thirty of this code: Provided, That such exemption 9 from review of private office practice shall not be construed 10 to include such practices where major medical equipment 11 otherwise subject to review under this article is acquired, 12 offered or developed: Provided, however, That such exemption from review of private office practice shall not be 13 14 construed to include the acquisition, offering or development 15 of one or more health services, including ambulatory surgical 16 facilities or centers, lithotripsy, magnetic resonance imaging 17 and radiation therapy by one or more health professionals. 18 The state agency shall adopt rules pursuant to section eight 19 of this article which specify the health services acquired, 20 offered or developed by health professionals which are subject to certificate of need review; 21
- 22 (2) Dispensaries and first-aid stations located within 23 business or industrial establishments maintained solely for 24 the use of employees: *Provided*, That such facility does not 25 contain inpatient or resident beds for patients or employees 26 who generally remain in the facility for more than 27 twenty-four hours;
- 28 (3) Establishments, such as motels, hotels and 29 boardinghouses, which provide medical, nursing personnel 30 and health-related services;
- 31 (4) The remedial care or treatment of residents or patients 32 in any home or institution conducted only for those who rely 33 solely upon treatment by prayer or spiritual means in 34 accordance with the creed or tenets of any recognized church 35 or religious denomination;

60

61

62

63

64

65

66

67

68

69

36 (5) The creation of new primary care services located in 37 communities that are underserved with respect to primary 38 care services: Provided, That to qualify for this exemption, an applicant must be a community-based nonprofit 39 40 organization with a community board that provides or will 41 provide primary care services to people without regard to 42 ability to pay: *Provided*, *however*, That the exemption from 43 certificate of need review of new primary care services 44 provided by this subdivision shall not include the acquisition, 45 offering or development of major medical equipment 46 otherwise subject to review under this article or to include 47 the acquisition, offering or development of ambulatory 48 surgical facilities, lithotripsy, magnetic resonance imaging or 49 radiation therapy. The Office of Community and Rural 50 Health Services shall define which services constitute 51 primary care services for purposes of this subdivision and 52 shall, to prevent duplication of primary care services, 53 determine whether a community is underserved with respect 54 to certain primary care services within the meaning of this 55 subdivision. Any organization planning to qualify for an 56 exemption pursuant to this subdivision shall submit to the 57 state agency a letter of intent describing the proposed new 58 services and area of service; and

(6) The creation of birthing centers by nonprofit primary care centers that have a community board and provide primary care services to people in their community without regard to ability to pay or by nonprofit hospitals with less than one hundred licensed acute care beds: *Provided*, That to qualify for this exemption, an applicant shall be located in an area that is underserved with respect to low-risk obstetrical services: *Provided*, *however*, That if a primary care center attempting to qualify for this exemption is located in the same county as a hospital that is also eligible for this exemption, or if a hospital attempting to qualify for this

83

84

85

86

87

88

89

90

91

70 exemption is located in the same county as a primary care 71 center that is also eligible for this exemption, then at least 72 one primary care center and at least one hospital from that 73 county shall collaborate for the provision of services at a birthing center in order to qualify for this exemption: 74 75 Provided further, That for purposes of this subsection, a "birthing center" is a short-stay ambulatory health care 76 facility designed for low-risk births following normal 77 78 uncomplicated pregnancy. Any primary care center or 79 hospital planning to qualify for an exemption pursuant to this 80 subdivision shall submit to the state agency a letter of intent 81 describing the proposed birthing center and area of service.

- (b) (1) A health care facility is not required to obtain a certificate of need for the acquisition of major medical equipment to be used solely for research, the addition of health services to be offered solely for research or the obligation of a capital expenditure to be made solely for research if the health care facility provides the notice required in subdivision (2) of this subsection and the state agency does not find, within sixty days after it receives such notice, that the acquisition, offering or obligation will or will have the effect to:
- 92 (A) Affect the charges of the facility for the provision of 93 medical or other patient care services other than the services 94 which are included in the research;
- 95 (B) Result in a substantial change to the bed capacity of 96 the facility; or
- 97 (C) Result in a substantial change to the health services 98 of the facility.

- (2) Before a health care facility acquires major medical equipment to be used solely for research, offers a health service solely for research or obligates a capital expenditure solely for research, such health care facility shall notify in writing the state agency of such facility's intent and the use to be made of such medical equipment, health service or capital expenditure.
 - (3) If major medical equipment is acquired, a health service is offered or a capital expenditure is obligated and a certificate of need is not required for such acquisition, offering or obligation as provided in subdivision (1) of this subsection, such equipment or service or equipment or facilities acquired through the obligation of such capital expenditure may not be used in such a manner as to have the effect or to make a change described in paragraphs (A), (B) and (C) of that subdivision unless the state agency issues a certificate of need approving such use.
 - (4) For purposes of this subsection, the term "solely for research" includes patient care provided on an occasional and irregular basis and not as part of a research program.
 - (c) (1) The state agency may adopt rules pursuant to section eight of this article to specify the circumstances under which a certificate of need may not be required for the obligation of a capital expenditure to acquire, either by purchase or under lease or comparable arrangement, an existing health care facility: *Provided*, That a certificate of need is required for the obligation of a capital expenditure to acquire, either by purchase or under lease or comparable arrangement, an existing health care facility if:
 - (A) The notice required by subdivision (2) of this subsection is not filed in accordance with that subdivision with respect to such acquisition; or

146 147

148 149

150

151

152

153154

155

156

157

158

159

160

- 131 (B) The state agency finds, within thirty days after the 132 date it receives a notice in accordance with subdivision (2) of 133 this subsection, with respect to such acquisition, that the 134 services or bed capacity of the facility will be changed by 135 reason of that acquisition.
- 136 (2) Before any person enters into a contractual arrangement to acquire an existing health care facility, such 137 138 person shall notify the state agency of his or her intent to 139 acquire the facility and of the services to be offered in the facility and its bed capacity. Such notice shall be made in 140 141 writing and shall be made at least thirty days before 142 contractual arrangements are entered into to acquire the 143 facility with respect to which the notice is given. The notice 144 shall contain all information the state agency requires.
 - (d) The state agency shall adopt rules pursuant to section eight of this article to specify the circumstances under which and the procedures by which a certificate of need may not be required for shared services between two or more acute care facilities providing services made available through existing technology that can reasonably be mobile. The state agency shall specify the types of items in the rules and under what circumstances mobile MRI and mobile lithotripsy may be so exempted from review. In no case, however, will mobile cardiac catheterization be exempted from certificate of need review. In addition, if the shared services mobile unit proves less cost effective than a fixed unit, the acute care facility will not be exempted from certificate of need review.
 - On a yearly basis, the state agency shall review existing technologies to determine if other shared services should be included under this exemption.
- 161 (e) The state agency shall promulgate rules for legislative 162 approval in accordance with article three, chapter

- twenty-nine-a of this code to specify the circumstances under
- which, and the procedures by which, a certificate of need
- may not be required for the construction, development,
- acquisition or other establishment by a hospital of an
- ambulatory health care facility. Certificate of need may not
- 168 be required if:
- 169 (1) (A) The ambulatory health care facility is located in
- the same county as the hospital; or
- (B) The ambulatory health care facility is located in the
- same zip code as the hospital, and the hospital is located in
- a zip code that crosses a county line, the hospital is the only
- hospital in the county, the hospital is located less than
- one-half mile from the county line in which it is located and
- 176 the hospital is located less than one mile from a state
- 177 bordering West Virginia;
- 178 (2) Employs five or less physicians licensed to practice
- in this state pursuant to either article three or article fourteen,
- 180 chapter thirty of this code;
- 181 (3) The total capital expenditure does not exceed the
- 182 expenditure minimum set forth in subsection two of this
- 183 section; and
- 184 (4) The construction, development, acquisition or other
- 185 establishment of an ambulatory health care facility is not
- opposed by an affected person after substantive public notice
- pursuant to article three, chapter fifty-nine of this code has
- been given by the Health Care Authority.
- (f) The Health Care Authority shall provide at least thirty
- days' notice to the public of the intent of a health care facility
- 191 to construct, acquire or develop an ambulatory health care

- 192 facility. The Health Care Authority shall cause a Class II 193 legal advertisement to be published in a qualified newspaper 194 of general circulation where the construction, acquisition or 195 development of the ambulatory health care facility is or will be geographically located. The thirty-day notice shall 196 commence with the first date of publication. Additionally, if 197 198 the county in which the ambulatory health care facility is or 199 will be geographically located contains a daily newspaper, a 200 legal advertisement shall also be placed at least once in the 201 daily newspaper. Any public notice shall include the name 202 of the hospital seeking to develop, acquire or construct an 203 ambulatory health care facility, the kind of practice to be 204 developed, acquired or constructed, the geographic location of the ambulatory health care facility and the address where 205 206 protests may be submitted or filed.
- 207 (g) The state agency shall promulgate emergency rules 208 pursuant to chapter twenty-nine-a of this code by July 1, 209 2009, to establish an exemption process for such projects.
- 210 (h) The acquisition, development or establishment of a 211 certified interoperable electronic health record or electronic 212 medical record system is not subject to certificate of need 213 review.
- 214 (i) A health care facility is not required to obtain a 215 certificate of need for any nonhealth-related project that does 216 not exceed:
- 217 (1) \$5 million for a hospital with less than one hundred 218 licensed acute care beds;
- 219 (2) \$10 million for a hospital with one hundred or more 220 licensed acute care beds; or

- 221 (3) \$5 million for any other project.
- 222 (j) A certificate of need is not required for a psychiatric 223 hospital operated by state government for the purpose of 224 constructing forensic beds.
- 225 (k) Any behavioral health care service selected by the 226 Department of Health and Human Resources in response to 227 its request for application for services intended to return 228 children currently placed in out-of-state facilities to the state 229 or to prevent placement of children in out-of-state facilities 230 is not subject to a certificate of need.

The Joint Committee on Enrolled Bills hereby certifies that the foregoing bill is correctly enrolled.

Chairman Senate Committee
Chairman House Committee
Originated in the Senate.
In effect from passage.
Clerk of the Senate
Clerk of the House of Delegates
President of the Senate
Speaker of the House of Delegates
The within this the
Day of, 2013.
Governor