

SENATE BILL No. 406

DIGEST OF INTRODUCED BILL

Citations Affected: IC 16-18-2-67; IC 16-21-1-9; IC 16-28-1-7; IC 16-29-2; IC 16-29-3-1.

Synopsis: Moratorium on long term care beds. Removes the power of the Indiana health facilities council to adopt rules to implement the certificate of need law. Provides a moratorium on the creation of additional comprehensive long term care beds. Prohibits a hospital from converting certain acute care beds to comprehensive long term care beds. Prohibits the Indiana health facilities council or the state department of health from recommending or approving additional comprehensive care beds until July 1, 2001. Makes conforming amendments.

Effective: July 1, 1998.

Johnson

January 9, 1998, read first time and referred to Committee on Planning and Public Services.

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Second Regular Session 110th General Assembly (1998)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 1997 General Assembly.

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SENATE BILL No. 406



A BILL FOR AN ACT to amend the Indiana Code concerning health.

Be it enacted by the General Assembly of the State of Indiana:

1 SECTION 1. IC 16-21-1-9 IS AMENDED TO READ AS
2 FOLLOWS [EFFECTIVE JULY 1, 1998]: Sec. 9. (a) ~~Except as~~
3 ~~provided in IC 16-29-1-11,~~ The executive board may, upon
4 recommendation by the state health commissioner and for good cause,
5 waive a rule:

- 6 (1) adopted under this chapter; or
- 7 (2) that may be waived under IC 16-28 for a specified time for a
8 hospital based health facility or a hospital licensed under this
9 article.
- 10 (b) Disapproval of waiver requests requires executive board action.
- 11 (c) A waiver may not adversely affect the health, safety, and welfare
12 of the residents or patients.

13 SECTION 2. IC 16-28-1-7 IS AMENDED TO READ AS
14 FOLLOWS [EFFECTIVE JULY 1, 1998]: Sec. 7. The council shall do
15 the following:

- 16 (1) Propose the adoption of rules by the department under
17 IC 4-22-2 governing the following:



- 1 (A) Health and sanitation standards necessary to protect the
- 2 health, safety, security, rights, and welfare of patients.
- 3 (B) Qualifications of applicants for licenses issued under this
- 4 article to assure the proper care of patients.
- 5 (C) Operation, maintenance, management, equipment, and
- 6 construction of facilities required to be licensed under this
- 7 article if jurisdiction is not vested in any other state agency.
- 8 (D) Manner, form, and content of the license, including rules
- 9 governing disclosure of ownership interests.
- 10 (E) Levels of medical staffing and medical services in
- 11 cooperation with the office of Medicaid policy and planning,
- 12 division of family and children, and other agencies authorized
- 13 to pay for the services.
- 14 (2) Recommend to the fire prevention and building safety
- 15 commission fire safety rules necessary to protect the health,
- 16 safety, security, rights, and welfare of patients.
- 17 (3) Classify health facilities in health care categories.
- 18 (4) Encourage the development of social and habilitative
- 19 programs in health facilities, as recommended by the community
- 20 residential facilities council.
- 21 (5) Act as an advisory body for the division, commissioner, and
- 22 state department.

23 ~~(6) Adopt rules under IC 4-22-2, as provided in IC 16-29-1-13.~~

24 SECTION 3. IC 16-29-3-1 IS AMENDED TO READ AS
25 FOLLOWS [EFFECTIVE JULY 1, 1998]: Sec. 1. ~~Notwithstanding~~
26 ~~IC 16-29-1~~, A hospital licensed under IC 16-21-2 may **not** convert

- 27
- 28 ~~(1) beginning January 1, 1986, not more than thirty (30) acute~~
- 29 ~~care beds to skilled care comprehensive long term care beds and~~
- 30 ~~(2) beginning June 1, 1989; not more than an additional twenty~~
- 31 ~~(20) acute care beds to either intermediate care comprehensive~~
- 32 ~~long term care beds or skilled care comprehensive long term care~~
- 33 ~~beds;~~

34 that are to be certified for participation in a state or federal
35 reimbursement program, including programs under Title XVIII or Title
36 XIX of the Social Security Act (42 U.S.C. 1395 et seq. or 42 U.S.C.
37 1396 et seq.); if those beds will function essentially as beds licensed
38 under IC 16-28.

39 SECTION 4. THE FOLLOWING ARE REPEALED [EFFECTIVE
40 JULY 1, 1998]: IC 16-18-2-67; IC 16-29-2.

41 SECTION 5. [EFFECTIVE JULY 1, 1998] **(a) This SECTION**
42 **does not apply to comprehensive care beds for which a certificate**

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1 of need is approved before July 1, 1998.

2 (b) As used in this SECTION, "comprehensive care bed" means
3 a bed in a health facility, hospital, or other facility that:

- 4 (1) is licensed or is to be licensed under IC 16-28-2;
5 (2) functions essentially as a bed licensed under IC 16-28-2; or
6 (3) is used solely for an individual who falls into one (1) of the
7 following categories:

8 (A) An individual who is:

- 9 (i) medically stable twelve (12) to twenty-four (24) hours
10 each day; and
11 (ii) ventilator dependent.

12 (B) An individual who is medically stable and:

- 13 (i) brain or high spinal cord traumatized; or
14 (ii) has a major progressive neuromuscular disease.

15 (C) An individual who is infected by the human
16 immunodeficiency virus (HIV).

17 (c) The:

- 18 (1) Indiana health facilities council may not recommend; and
19 (2) state department of health may not recommend or
20 approve;

21 a certificate of need for additional comprehensive care beds or the
22 certification of comprehensive care beds.

23 (d) Comprehensive care beds may not be added or constructed.

24 (e) Beds in a health facility, hospital, or other facility may not be
25 converted to comprehensive care beds.

26 (f) This SECTION expires July 1, 2001.

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