HOUSE BILL NO. 308

INTRODUCED BY SQUIRES, MANNING, COBB, WEEDING, WALKER, DAVIS, JOHNSON, COCCHIARELLA, DRISCOLL, THOMAS, JERGESON, HANNAH, STRIZICH

BY REQUEST OF THE DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES AND THE DEPARTMENT OF FAMILY SERVICES

IN THE HOUSE

JANUARY 19, 1989	INTRODUCED AND REFERRED TO COMMITTEE ON HUMAN SERVICES & AGING.
JANUARY 20, 1989	FIRST READING.
FEBRUARY 4, 1989	COMMITTEE RECOMMEND BILL DO PASS AS AMENDED. REPORT ADOPTED.
FEBRUARY 6, 1989	PRINTING REPORT.
FEBRUARY 7, 1989	SECOND READING, DO PASS.
FEBRUARY 8, 1989	ENGROSSING REPORT.
FEBRUARY 9, 1989	THIRD READING, PASSED. AYES, 99; NOES, 0.
	TRANSMITTED TO SENATE.
IN	THE SENATE
FEBRUARY 10, 1989	INTRODUCED AND REFERRED TO COMMITTEE ON PUBLIC HEALTH, WELFARE & SAFETY.
	FIRST READING.
MARCH 7, 1989	COMMITTEE RECOMMEND BILL BE CONCURRED IN AS AMENDED. REPORT ADOPTED.
MARCH 8, 1989	SECOND READING, CONCURRED IN.
MARCH 10, 1989	THIRD READING, CONCURRED IN. AYES, 48; NOES, 0.
	RETURNED TO HOUSE WITH AMENDMENTS.

IN THE HOUSE

MARCH 14, 1989 RECEIVED FROM SENATE.

SECOND READING, AMENDMENTS

CONCURRED IN.

MARCH 15, 1989 THIRD READING, AMENDMENTS

CONCURRED IN.

SENT TO ENROLLING.

REPORTED CORRECTLY ENROLLED.

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BY REQUEST OF THE DEPARTMENT OF SOCIAL AND REMABILITATION 3 SERVICES AND THE DEPARTMENT OF FAMILY SERVICES A BILL FOR AN ACT ENTITLED: "AN ACT TO GENERALLY REVISE THE LAWS RELATING TO COMMUNITY PROGRAMS FOR PERSONS WITH SEVERE DISABILITIES; TO AUTHORIZE THE STATE TO ADMINISTER COMMUNITY 8 PROGRAMS FOR PERSONS WITH SEVERE DISABILITIES UNDER ANY 9 PROVISION OF TITLE VII OF THE FEDERAL REHABILITATION ACT OF 10 1973; TO TRANSFER AUTHORITY FOR LICENSING OF COMMUNITY HOMES 11 FOR PERSONS WITH SEVERE DISABILITIES FROM THE DEPARTMENT OF 12 SOCIAL AND REHABILITATION SERVICES TO THE DEPARTMENT OF 13 FAMILY SERVICES; AMENDING SECTIONS 50-5-101, 50-5-301, 14 53-19-101 THROUGH 53-19-104, 53-19-106, 53-19-110, 15 53-19-112, MCA; REPEALING SECTIONS 53-19-111 AND 53-19-113, 16 MCA; AND PROVIDING EFFECTIVE DATES." 17

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

Section 1. Section 53-19-101, MCA, is amended to read:

"53-19-101. Purpose. The legislature, in recognition

of needs of severely---disabled persons with severe

disabilities and of the desirability of meeting those needs

on a community level to the extent of available funding and

in order to reduce the need for institutional care settings,

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establishes by this part a community program to assist severely-disabled persons with severe disabilities in living and functioning independently. This program implements Title VII7--Part--A7 of the federal Rehabilitation Act of 1973 (29 U.S.C. 796, et seq.), as may be amended; for disabled persons with severe disabilities in Montana. The-legislature further--recognizes-the-need-to-provide-for-the-licensing-of current-community-homes-for-severely-disabled-persons."

Section 2. Section 53-19-102, MCA, is amended to read:

"53-19-102. Definitions. As used in this part, the following definitions apply:

- 12 (1) "Community home for severely-disabled persons with 13 severe disabilities" means a family-oriented-residence-that 14 is-designed-to-provide-residential-services-for-two-to-eight 15 severely-disabled-persons-and-that-does-not-provide--skilled 16 or--intermediate--nursing--care---This--definition--does-not 17 preclude-the-provision-of-skilled--or--intermediate--nursing care--by--third-person--providers. facility licensed by the 18 department of family services, as provided for in [sections 19 20 8 through 12].
 - (2) "Department" means the department of social and rehabilitation services established in 2-15-2201.
 - (3) "Disability" means a permanent physical or mental condition recognized as a disability by Title VII7-Part-A7 of the federal Rehabilitation Act of 1973 (29 U.S.C. 796, et

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seq.), as may be amended).

(4)--"Severely-disabled-person"-means-a-person--with--a
permanent--disability--that--substantially-limits-major-life
activity;--such--as--walking;--self-care;--seeing;--hearing;
speaking;-learning;-reasoning;-judgment;-or-memory;-and-that
can-be-diagnosed-by-a-physician;

- (4) "Person with severe disabilities" means the same as "individual with severe handicaps" as defined in the federal Rehabilitation Act of 1973 (29 U.S.C. 706(15)(B)), as may be amended. The term includes an individual whose ability to function independently in family or community or whose ability to engage or continue in employment is so limited by the severity of his physical or mental disability that the services provided under this part are required in order for the individual to achieve a greater level of independence in functioning in family or community or in engaging in or continuing in employment."
- Section 3. Section 53-19-103, MCA, is amended to read:

 "53-19-103. Department authorized to provide services.

 (1) Subject to available appropriated funds, services

 provided under this part include:
 - (a) vocational and other rehabilitation services that enhance the ability of a severely-disabled person with severe disabilities to live and function independently and to secure-and-maintain engage in or continue in appropriate

1 employment; and

- (b) any services specified in Title VII7-Part-A7 of the federal Rehabilitation Act of 1973 (29 U.S.C. 796, et seq.), as may be amended.
 - (2) To the extent that funds are appropriated and allocated for the purpose of providing services to severely disabled persons with severe disabilities, the department may establish the facilities and services it determines are in the best interest of severely—disabled persons with severe disabilities.
 - (3) The scope, amount, and duration of services made available to severely—disabled persons with severe disabilities under this part are within the discretion of the department to determine."
 - Section 4. Section 53-19-104, MCA, is amended to read:

 "53-19-104. Department contracts for services -governmental units providing for community homes for persons
 with severe disabilities. (1) The department may expend
 money appropriated or available for the purposes of this
 part and may contract for services for eligible severely
 disabled persons with any person or entity providing such
 the services to persons with severe disabilities.
 - (2) Governmental units, including but not limited to counties, municipalities, school districts, or state institutions of higher learning, may at their own expense

provide services, funds, materials, and facilities for services to community homes for severely--disabled persons with severe disabilities."

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- Section 5. Section 53-19-106, MCA, is amended to read:

 "53-19-106. Eligibility for services. (1) The

 department, in its discretion and in accordance with this

 part and Title VII7-Part-A7 of the federal Rehabilitation

 Act of 1973 (29 U.S.C. 796, et seq.), as may be amended),

 may determine eligibility of persons for services under this

 part.
 - (2) To be eligible for services under this part, a person must have a disability of such severity that, to secure and maintain employment or to function independently, he requires more intensive vocational or comprehensive rehabilitation services than—are—available—through—other state—and—federal—programs.
 - (3) Bisabled-persons A person with severe disabilities not receiving other vocational and rehabilitation services provided by the department have has priority for services provided under this part."
- Section 6. Section 53-19-110, MCA, is amended to read:

 "53-19-110. Eligibility for residential services in a

 community home for persons with severe disabilities. (1) The

 department, in its discretion and in accordance with this

 part, may determine eligibility for residential services in

- a community home for the—severely—disabled persons with

 severe disabilities, based on the residential needs of the

 person and on the availability of residential services. Any

 severely—disabled person with a severe disability, as

 defined in (section 9), may be considered for placement in a

 community home, regardless of the source of funding for his

 residential services.
 - (2) A person who has a primary diagnosis of mental illness or who receives mental health services under Title 53, chapter 21, is not eligible for placement in residential services a community home for persons with severe disabilities unless he is eligible for and receiving services under this part and Title VII7-Part-A7 of the federal Rehabilitation Act of 1973 (29 U.S.C. 796, et seq.), as may be amended, or Title XIX of the Social Security Act (42 U.S.C. 1396, et seq.), as may be amended."
 - Section 7. Section 53-19-112, MCA, is amended to read:

 "53-19-112. Rulemaking. (1) For the purposes of providing services to severely-disabled persons with severe disabilities, the department may adopt rules necessary for the administration of the services provided to-severely disabled-persons under this part. Rules adopted may include but are not limited to eligibility for services, licensing, facility design and acquisition, program staffing, staff training, service goals and design, quality of services,

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client placement procedures, client rights and privileges, client grievance procedures, <u>fair hearings</u>, provider grievance procedures, and accounting procedures which include accounting of client financial resources.

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t2)--(a)-The--department--shall; --for--the--purpose--of licensing; --adopt-rules-to-govern-administration; --operation; and-health-and-safety-requirements-for-community--homes--for severely--disabled--persons--in--order-to-protect-residents rights; -The--department--shall--provide--for--temporary--and provisional-licensing;

- (b)--The---department---of---health--and--environmental sciences-shall-provide-advice--and--recommendations--to--the department--concerning-licensing-requirements-for-health-and safety:
- (3)(2) The department shall, in cooperation with the board of nursing, adopt rules under which a properly trained staff member of a facility providing services to severely disabled persons with severe disabilities under this part may supervise and assist a client of a facility in taking a medication if the medication is usually self-administered and if a physician has prescribed the assistance."
- NEW SECTION. Section 8. Purpose. The legislature, in recognition of the needs of persons with severe disabilities and of the desirability of meeting those needs on a community level, establishes in [sections 8 through 12]

- authority for the state to license community homes for persons with severe disabilities. Licensed community homes for persons with severe disabilities are for the purpose of providing residential settings for persons with severe disabilities receiving services funded through state-administered programs who otherwise are unable to live independently and who are determined to be capable of
- 9 <u>NEW SECTION.</u> **Section 9.** Definitions. As used in 10 [sections 8 through 12], the following definitions apply:

residing in noninstitutional settings.

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- (1) "Community home for persons with severe disabilities" means a family-oriented residence that is designed to provide residential services for two to eight persons with severe disabilities and that does not provide skilled or intermediate nursing care. This definition does not preclude the provision of skilled or intermediate nursing care by third-person providers.
- 18 (2) "Department" means the department of family
 19 services established in 2-15-2401.
- 20 (3) "Disability" means a permanent physical or mental 21 condition recognized as a disability by Title VII of the 22 federal Rehabilitation Act of 1973 (29 U.S.C. 796, et seq.), 23 as may be amended.
- 24 (4) "Severe disability" means a permanent disability
 25 that substantially limits major life activity, such as

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- walking, self-care, seeing, hearing, speaking, learning, 1 reasoning, judgment, or memory, and that can be diagnosed by 2
- a physician. The term includes the condition of a person 3
- with severe disabilities as defined in 53-19-102.
- NEW SECTION. Section 10. Licensing. (1) A community 5 home for persons with severe disabilities must be licensed 6 7 annually by the department.
- 8 (2) The department may also issue temporary 9 provisional licenses.
- NEW SECTION. Section 11. Health and safety standards. 10
- (1) A community home for persons with severe disabilities 11
- must be certified annually for fire and life safety by the 12
- state fire marshal. The state fire marshal shall notify the 13
- 14 department whenever a community home has been certified or
- 15 refused certification.
- 16 (2) (a) Local health officers shall inspect a community home for persons with severe disabilities to 17 18 ensure compliance with health and safety standards. If for any reason the local authority cannot complete the 19
- inspection in a timely manner, the department of health and 20
- environmental sciences may make the inspection to ensure 21
- 22 compliance with the standards.
- 23 (b) The inspecting health officer shall notify the department whether a community home is or is not in 24
- 25 compliance with applicable standards.

- (c) A reasonable fee may be charged by health 1 authorities conducting compliance inspections.
- NEW SECTION. Section 12. Rulemaking. The (1) 3 department shall, for the purpose of licensing, adopt rules 4 to govern administration, operation, and health and safety 5 requirements for community homes for persons with severe disabilities in order to protect rights of residents. The 7 department shall provide for temporary and provisional 9 licensing.
 - (2) The department of health and environmental sciences and the state fire marshal shall provide advice and recommendations to the department concerning licensing requirements for health and safety.
- Section 13. Section 50-5-101, MCA, is amended to read: 14 "50-5-101. (Temporary) Definitions. As used in parts 1 15 through 4 of this chapter, unless the context clearly 16 indicates otherwise, the following definitions apply: 17
 - (1) "Accreditation" means a designation of approval.
- means a facility, (2) "Adult day-care center" 19 freestanding or connected to another health care facility, 20 which provides adults, on an intermittent basis, with the 21 care necessary to meet the needs of daily living.
- means an applicant for (3) "Affected person" 23 certificate of need, a member of the public who will be 24 served by the proposal, a health care facility located in 25

the geographic area affected by the application, an agency which establishes rates for health care facilities, a third-party payer who reimburses health care facilities in the area affected by the proposal, or an agency which plans or assists in planning for such facilities.

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- (4) "Ambulatory surgical facility" means a facility, not part of a hospital, which provides surgical treatment to patients not requiring hospitalization. This type of facility may include observation beds for patient recovery from surgery or other treatment.
- (5) "Batch" means those letters of intent to seek approval for new beds or major medical equipment that are accumulated during a single batching period.
- (6) "Batching period" means a period, not exceeding 1 month, established by department rule during which letters of intent to seek approval for new beds or major medical equipment are accumulated pending further processing of all letters of intent within the batch.
- 19 (7) "Board" means the board of health and 20 environmental sciences, provided for in 2-15-2104.
 - (8) "Capital expenditure" means:
 - (a) an expenditure made by or on behalf of a health care facility that, under generally accepted accounting principles, is not properly chargeable as an expense of operation and maintenance; or

- 1 (b) a lease, donation, or comparable arrangement that
 2 would be a capital expenditure if money or any other
 3 property of value had changed hands.
- 4 (9) "Certificate of need" means a written 5 authorization by the department for a person to proceed with 6 a proposal subject to 50-5-301.
- 7 (10) "Challenge period" means a period, not exceeding 1
 8 month, established by department rule during which any
 9 person may apply for comparative review with an applicant
 10 whose letter of intent has been received during the
 11 preceding batching period.
- (11) "Chemical dependency facility" means a facility
 whose function is the treatment, rehabilitation, and
 prevention of the use of any chemical substance, including
 alcohol, which creates behavioral or health problems and
 endangers the health, interpersonal relationships, or
 economic function of an individual or the public health,
 welfare, or safety.
- 19 (12) "Clinical laboratory" means a facility for the
 20 microbiological, serological, chemical, hematological,
 21 radiobioassay, cytological, immunohematological,
 22 pathological, or other examination of materials derived from
 23 the human body for the purpose of providing information for
 24 the diagnosis, prevention, or treatment of any disease or
 25 assessment of a medical condition.

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(13) "College of American pathologists" means the organization nationally recognized by that name with headquarters in Traverse City, Michigan, that surveys clinical laboratories upon their requests and accredits clinical laboratories that it finds meet its standards and requirements.

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- (14) "Comparative review" means a joint review of two or more certificate of need applications which are determined by the department to be competitive in that the granting of a certificate of need to one of the applicants would substantially prejudice the department's review of the other applications.
- (15) "Construction" means the physical erection of a health care facility and any stage thereof, including ground breaking, or remodeling, replacement, or renovation of an existing health care facility.
- 17 (16) "Department" means the department of health and
 18 environmental sciences provided for in Title 2, chapter 15,
 19 part 21.
 - (17) "Federal acts" means federal statutes for the construction of health care facilities.
- 22 (18) "Governmental unit" means the state, a state
 23 agency, a county, municipality, or political subdivision of
 24 the state, or an agency of a political subdivision.
- 25 (19) "Health care facility" or "facility" means any

or public, excluding federal facilities, whether organized
for profit or not, used, operated, or designed to provide
health services, medical treatment, or nursing,
rehabilitative, or preventive care to any person or persons.
The term does not include offices of private physicians or
dentists. The term includes but is not limited to ambulatory
surgical facilities, health maintenance organizations, home
health agencies, hospices, hospitals, infirmaries, kidney
treatment centers, long-term care facilities, medical

institution, building, or agency or portion thereof, private

(20) "Health maintenance organization" means a public or private organization which provides or arranges for health care services to enrollees on a prepaid or other financial basis, either directly through provider employees or through contractual or other arrangements with a provider or group of providers.

assistance facilities, mental health centers, outpatient

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facilities, and adult day-care centers.

20 (21) "Home health agency" means a public agency or
21 private organization or subdivision thereof which is engaged
22 in providing home health services to individuals in the
23 places where they live. Home health services must include
24 the services of a licensed registered nurse and at least one
25 other therapeutic service and may include additional support

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1 services.

- (22) "Hospice" means a coordinated program of home and inpatient health care that provides or coordinates palliative and supportive care to meet the needs of a terminally ill patient and his family arising out of physical, psychological, spiritual, social, and economic stresses experienced during the final stages of illness and dying and that includes formal bereavement programs as an essential component.
- (23) "Hospital" means a facility providing, by or under the supervision of licensed physicians, services for medical diagnosis, treatment, rehabilitation, and care of injured, disabled, or sick persons. Services provided may or may not include obstetrical care, emergency care, or any other service as allowed by state licensing authority. A hospital has an organized medical staff which is on call and available within 20 minutes, 24 hours per day, 7 days per week, and provides 24-hour nursing care by licensed registered nurses. This term includes hospitals specializing in providing health services for psychiatric, mentally retarded, and tubercular patients.
- (24) "Infirmary" means a facility located in a university, college, government institution, or industry for the treatment of the sick or injured, with the following subdefinitions:

- 1 (a) an "infirmary--A" provides outpatient and 2 inpatient care;
- 3 (b) an "infirmary--B" provides outpatient care only.
- 4 (25) "Joint commission on accreditation of hospitals"
 5 means the organization nationally recognized by that name
 6 with headquarters in Chicago, Illinois, that surveys health
 7 care facilities upon their requests and grants accreditation
 8 status to any health care facility that it finds meets its
 9 standards and requirements.
- 10 (26) "Kidney treatment center" means a facility which 11 specializes in treatment of kidney diseases, including 12 freestanding hemodialysis units.
 - (27) (a) "Long-term care facility" means a facility or part thereof which provides skilled nursing care, intermediate nursing care, or intermediate developmental disability care to a total of two or more persons or personal care to more than four persons who are not related to the owner or administrator by blood or marriage. The term does not include adult foster care licensed under 53-5-303, community homes for the developmentally disabled licensed under 53-20-305, community homes for physically disabled persons with severe diabilities licensed under 53-19-111 [section 10], youth care facilities licensed under 41-3-1142, hotels, motels, boardinghouses, roominghouses, or similar accommodations providing for transients, students,

or persons not requiring institutional health care, or juvenile and adult correctional facilities operating under the authority of the department of institutions.

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- (b) "Skilled nursing care" means the provision of nursing care services, health-related services, and social 5 services under the supervision of a licensed registered 6 nurse on a 24-hour basis.
- (c) "Intermediate nursing care" means the provision of nursing care services, health-related services, and social services under the supervision of a licensed nurse to patients not requiring 24-hour nursing care. 11
 - (d) "Intermediate developmental disability care" means the provision of nursing care services, health-related services, and social services for the developmentally disabled, as defined in 53-20-102(4), or persons with related problems.
 - (e) "Personal care" means the provision of services and care which do not require nursing skills to residents needing some assistance in performing the activities of daily living.
 - (28) "Major medical equipment" means a single unit of medical equipment or a single system of components with related functions which is used to provide medical or other health services and costs a substantial sum of money.
 - (29) "Medical assistance facility" means a facility

that:

- (a) provides impatient care to ill or injured persons 3 prior to their transportation to a hospital or provides inpatient medical care to persons needing that care for a period of no longer than 96 hours; and 5
- (b) either is located in a county with fewer than six 6 residents per square mile or is located more than 35 road miles from the nearest hospital.
- (30) "Mental health center" means a facility providing 9 services for the prevention or diagnosis of mental illness, 1.0 the care and treatment of mentally ill patients or the 11 rehabilitation of such persons, or any combination of these 12 services. 13
- (31) "Nonprofit health care facility" means a health 14 1.5 care facility owned or operated by one or more nonprofit 16 corporations or associations.
- 17 (32) "Observation bed" means a bed occupied for not 18 more than 6 hours by a patient recovering from surgery or 19 other treatment.
- (33) "Offer" means the holding out by a health care 20 facility that it can provide specific health services. 21
- 22 (34) "Outpatient facility" means a facility, located in or apart from a hospital, providing, under the direction of 23 a licensed physician, either diagnosis or treatment, or 24 25 both, to ambulatory patients in need of medical, surgical,

- or mental care. An outpatient facility may have observation beds.
- (35) "Patient" means an individual obtaining services,including skilled nursing care, from a health care facility.

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- (36) "Person" means any individual, firm, partnership, association, organization, agency, institution, corporation, trust, estate, or governmental unit, whether organized for profit or not.
- 9 (37) "Public health center" means a publicly owned 10 facility providing health services, including laboratories, 11 clinics, and administrative offices.
 - (38) "Rehabilitation facility" means a facility which is operated for the primary purpose of assisting in the rehabilitation of disabled persons by providing comprehensive medical evaluations and services, psychological and social services, or vocational evaluation and training or any combination of these services and in which the major portion of the services is furnished within the facility.
- 20 (39) "Resident" means a person who is in a long-term
 21 care facility for intermediate or personal care.
- 22 (40) "State health plan" means the plan prepared by the 23 department to project the need for health care facilities 24 within Montana and approved by the statewide health 25 coordinating council and the governor.

- 1 50-5-101. (Effective July 1, 1989) Definitions. As
 2 used in parts 1 through 4 of this chapter, unless the
 3 context clearly indicates otherwise, the following
 4 definitions apply:
- 5 (1) "Accreditation" means a designation of approval.
- 6 (2) "Adult day-care center" means a facility,
 7 freestanding or connected to another health care facility,
- 8 which provides adults, on an intermittent basis, with the
- g care necessary to meet the needs of daily living.
- 10 (3) "Ambulatory surgical facility" means a facility,
- 11 not part of a hospital, which provides surgical treatment to
- 12 patients not requiring hospitalization. This type of
- 13 facility may include observation beds for patient recovery
- 14 from surgery or other treatment.
- 15 (4) "Board" means the board of health and 16 environmental sciences, provided for in 2-15-2104.
- 17 (5) "Chemical dependency facility" means a facility
- 18 whose function is the treatment, rehabilitation, and
- 19 prevention of the use of any chemical substance, including
- 20 alcohol, which creates behavioral or health problems and
- 21 endangers the health, interpersonal relationships, o
- 22 economic function of an individual or the public health,
- 23 welfare, or safety.
- 24 (6) "Clinical laboratory" means a facility for the
 25 microbiological, serological, chemical, hematological,

services under the supervision of a licensed registered
nurse on a 24-hour basis.

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- (c) "Intermediate nursing care" means the provision of nursing care services, health-related services, and social services under the supervision of a licensed nurse to patients not requiring 24-hour nursing care.
- 7 (d) "Intermediate developmental disability care" means
 8 the provision of nursing care services, health-related
 9 services, and social services for the developmentally
 10 disabled, as defined in 53-20-102(4), or persons with
 11 related problems.
 - (e) "Personal care" means the provision of services and care which do not require nursing skills to residents needing some assistance in performing the activities of daily living.
 - (20) "Medical assistance facility" means a facility that:
 - (a) provides inpatient care to ill or injured persons prior to their transportation to a hospital or provides inpatient medical care to persons needing that care for a period of no longer than 96 hours; and
- 22 (b) either is located in a county with fewer than six 23 residents per square mile or is located more than 35 road 24 miles from the nearest hospital.
 - (21) "Mental health center" means a facility providing

- services for the prevention or diagnosis of mental illness,
- 2 the care and treatment of mentally ill patients or the
- 3 rehabilitation of such persons, or any combination of these
- 4 services.
- 5 (22) "Nonprofit health care facility" means a health 6 care facility owned or operated by one or more nonprofit 7 corporations or associations.
- 8 (23) "Observation bed" means a bed occupied for not 9 more than 6 hours by a patient recovering from surgery or 10 other treatment.
- 11 (24) "Offer" means the holding out by a health care 12 facility that it can provide specific health services.
- 13 (25) "Outpatient facility" means a facility, located in 14 or apart from a hospital, providing, under the direction of 15 a licensed physician, either diagnosis or treatment, or 16 both, to ambulatory patients in need of medical, surgical, 17 or mental care. An outpatient facility may have observation 18 beds.
- (26) "Patient" means an individual obtaining services,including skilled nursing care, from a health care facility.
- 21 (27) "Person" means any individual, firm, partnership,
 22 association, organization, agency, institution, corporation,
- 23 trust, estate, or governmental unit, whether organized for
- 24 profit or not.
- 25 (28) "Public health center" means a publicly owned

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facility providing health services, including laboratories. clinics, and administrative offices.

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- (29) "Rehabilitation facility" means a facility which is operated for the primary purpose of assisting in the rehabilitation of disabled persons by providing comprehensive medical evaluations and services, psychological and social services, or vocational evaluation and training or any combination of these services and in which the major portion of the services is furnished within the facility.
- 11 (30) "Resident" means a person who is in a long-term 12 care facility for intermediate or personal care.
 - (31) "State health plan" means the plan prepared by the department to project the need for health care facilities within Montana and approved by the statewide health coordinating council and the governor."
 - Section 14. Section 50-5-301, MCA, is amended to read: *50-5-301. (Temporary) When certificate of need is required -- definitions. (1) Unless a person has submitted an application for and is the holder of a certificate of need granted by the department, he may not initiate any of the following:
- 23 (a) the incurring of an obligation by or on behalf of 24 a health care facility for any capital expenditure, other than to acquire an existing health care facility or to 25

- replace major medical equipment with equipment performing 1 substantially the same function and in the same manner, that
- exceeds the expenditure thresholds established in subsection 3
- (4). The costs of any studies, surveys, designs, plans, working drawings, specifications, and other activities
- (including staff effort, consulting, and other services)
- essential to the acquisition, improvement, expansion, or 7
- replacement of any plant or equipment with respect to which
- an expenditure is made must be included in determining if
- the expenditure exceeds the expenditure thresholds. 10
- (b) a change in the bed capacity of a health care 11
- facility through an increase in the number of beds or a 12
- 1.3 relocation of beds from one health care facility or site to
- another, unless: 14
- (i) the number of beds involved is 10 or less or 10% 15
- 16 or less of the licensed beds (if fractional, rounded down to
- the nearest whole number), whichever figure is smaller, in 17
- 18 any 2-year period;
- 19 (ii) a letter of intent is submitted to the department;
- 20 and

- 21 (iii) the department determines the proposal will not
- significantly increase the cost of care provided or exceed 22
- the bed need projected in the state health plan; 23
- (c) the addition of a health service that is offered 24
- by or on behalf of a health care facility which was not 25

offered by or on behalf of the facility within the 12-month period before the month in which the service would be offered and which will result in additional annual operating and amortization expenses of \$150,000 or more;

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- (d) the acquisition by any person of major medical 5 equipment, provided such acquisition would have required a certificate of need pursuant to subsection (1)(a) or (1)(c) of this section if it had been made by or on behalf of a 8 9 health care facility;
 - (e) the incurring of an obligation for a capital expenditure by any person or persons to acquire 50% or more of an existing health care facility unless:
- 13 (i) the person submits the letter of intent required 14 by 50-5-302(2); and
- 15 (ii) the department finds that the acquisition will not significantly increase the cost of care provided or increase bed capacity;
 - (f) the construction, development, other establishment of a health care facility which is being replaced or which did not previously exist, by any person, including another type of health care facility;
- 22 (g) the expansion of the geographical service area of 23 a home health agency; or
- (h) the use of hospital beds to provide services to 24 25 patients or residents needing only skilled nursing care,

- intermediate nursing care, or intermediate developmental disability care, as those levels of care are defined in 3 50-5-101.
- 4 (2) For purposes of subsection (1)(b), a change in bed capacity occurs on the date new or relocated beds are licensed pursuant to part 2 of this chapter and the date a final decision is made to grant a certificate of need for 8 new or relocated beds, unless the certificate of need 9 expires pursuant to 50-5-305.
- 10 (3) For purposes of this part, the following 11 definitions apply:
- (a) "Health care facility" or "facility" means a 12 nonfederal ambulatory surgical facility, home health agency, 13 hospital, long-term care facility, medical assistance 14 facility, mental health center with inpatient services, 15 16 inpatient chemical dependency facility, rehabilitation facility with inpatient services, or personal care facility. 17
- (b) (i) "Long-term care facility" means an entity 18 19 which provides skilled nursing care, intermediate nursing 20 care, or intermediate developmental disability care, as defined in 50-5-101, to a total of two or more persons. 21
- (ii) The term does not include adult foster care 22 licensed under 53-5-303; community homes for 23 the developmentally disabled licensed under 53-20-305; community 24 homes for physically -- disabled persons with severe 25

disabilities licensed under 53-19-111 [section 10]; boarding
or foster homes for children licensed under 41-3-1142;
hotels, motels, boardinghouses, roominghouses, or similar
accommodations providing for transients, students, or
persons not requiring institutional health care; or juvenile
and adult correctional facilities operating under the
authority of the department of institutions.

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- (c) "Obligation for capital expenditure" does not include the authorization of bond sales or the offering or sale of bonds pursuant to the state long-range building program under Title 17, chapter 5, part 4, and Title 18, chapter 2, part 1.
- (d) "Personal care facility" means an entity which provides services and care which do not require nursing skills to more than four persons who are not related to the owner or administrator by blood or marriage and who need some assistance in performing the activities of everyday living. The term does not include those entities excluded from the definition of "long-term care facility" in subsection (b).
- (4) Expenditure thresholds for certificate of need review are established as follows:
- 23 (a) For acquisition of equipment and the construction 24 of any building necessary to house the equipment, the 25 expenditure threshold is \$750,000.

- 1 (b) For construction of health care facilities, the 2 expenditure threshold is \$1,500,000. (Repealed effective 3 July 1, 1989--sec. 9, Ch. 477, L. 1987.)"
- 4 NEW SECTION. Section 15. Repealer. Sections 53-19-111
 5 and 53-19-113, MCA, are repealed.
- NEW SECTION. Section 16. Codification instruction.

 [Sections 8 through 12] are intended to be codified as an integral part of Title 53, chapter 20, and the provisions of Title 53, chapter 20, apply to [sections 8 through 12].
- NEW SECTION. Section 17. Extension of authority. Any existing authority to make rules on the subject of the provisions of [this act] is extended to the provisions of [this act].
- NEW SECTION. Section 18. Effective dates. (1)
 [Section 17 and this section] are effective on passage and
 approval.
- 17 (2) [Sections 1 through 16] are effective July 1, 18 1989.

-End-

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APPROVED BY COMM. ON HUMAN SERVICES AND AGING

1	HOUSE BILL NO. 308
2	INTRODUCED BY SQUIRES, MANNING, COBB, WEEDING, WALKER,
3	DAVIS, JOHNSON, COCCHIARELLA, DRISCOLL, THOMAS,
4	JERGESON, HANNAH, STRIZICH
5	BY REQUEST OF THE DEPARTMENT OF SOCIAL AND REHABILITATION
6	SERVICES AND THE DEPARTMENT OF FAMILY SERVICES
7	
8	A BILL FOR AN ACT ENTITLED: "AN ACT TO GENERALLY REVISE THE
9	LAWS RELATING TO COMMUNITY PROGRAMS FOR PERSONS WITH SEVERE
10	DISABILITIES; TO AUTHORIZE THE STATE TO ADMINISTER COMMUNITY
11	PROGRAMS FOR PERSONS WITH SEVERE DISABILITIES UNDER ANY
12	PROVISION OF TITLE VII OF THE FEDERAL REHABILITATION ACT OF
13	1973; TO TRANSFER AUTHORITY FOR LICENSING OF COMMUNITY HOMES
14	FOR PERSONS WITH SEVERE DISABILITIES FROM THE DEPARTMENT OF
15	SOCIAL AND REHABILITATION SERVICES TO THE DEPARTMENT OF
16	FAMILY SERVICES; AMENDING SECTIONS 50-5-101, 50-5-301,
17	53-19-101 THROUGH 53-19-104, 53-19-106, 53-19-110, AND
18	53-19-112, MCA; REPEALING SECTIONS 53-19-111 AND 53-19-113,
19	MCA; AND PROVIDING EFFECTIVE DATES."
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21	STATEMENT OF INTENT
22	This bill requires a statement of intent because
23	[section 12] requires the department of family services to

adopt administrative rules for the licensing of community

3	designed to assist persons with severe disabilities in
4	living and functioning independently.
5	It is the intent of the legislature that, in adopting
6	rules, the department develop licensing requirements to
7	govern the administration, operation, and health and safety
8	of standards of community homes for persons with severe
9	disabilities. The department of health and environmental
10	sciences and the state fire marshal shall provide advice and
11	recommendations to the department of family services in the
12	adoption of licensing requirements for the health and safety
13	of community homes.
14	The rules for licensing of community homes for persons
15	with severe disabilities may address the following: facility
16	acquisition, facility design, group home staffing, staff
17	training, service goals and design, quality of services,
18	client placement procedure, provider grievance procedure,
19	accounting procedures, including a procedure for the
20	accounting of client personal property and belongings, water
21	and waste disposal, food service, laundry, and fire and life
22	safety standards that are compatible with the residential
23	character of the facility.

community homes are family-oriented residences for persons with severe disabilities who are eligible for services

persons with severe disabilities. Licensed

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BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

HB 308

Section 1. Section 53-19-101, MCA, is amended to read:
*53-19-101. Purpose. The legislature, in recognition
of needs of severelydisabled persons with severe
$\underline{\text{disabilities}}$ and of the desirability of meeting those needs
on a community level to the extent of available funding and
in order to reduce the need for institutional care settings,
establishes by this part a community program to assist
severely-disabled persons with severe disabilities in living
and functioning independently. This program implements Title
VII7-Part-A7 of the federal Rehabilitation Act of 1973 (29
U.S.C. 796, et seq.), as may be amended), for disabled
persons with severe disabilities in Montana. The legislature
further-recognizes-the-need-to-provide-for-the-licensingof
current-community-homes-for-severely-disabled-persons:"

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- Section 2. Section 53-19-102, MCA, is amended to read:
 "53-19-102. Definitions. As used in this part, the following definitions apply:
- (1) "Community home for severely-disabled persons with severe disabilities" means a family-oriented-residence-that is-designed-to-provide-residential-services-for-two-to-eight severely-disabled-persons-and-that-does-not-provide-skilled or-intermediate-nursing-care-This-definition-does-not preclude-the-provision-of-skilled-or-intermediate-nursing care-by-third-person-providers-facility licensed by the department of family services, as provided for in [sections

1 8 through 12].

- (2) "Department" means the department of social and rehabilitation services established in 2-15-2201.
- 4 (3) "Disability" means a permanent physical or mental condition recognized as a disability by Title VII₇--Part--A₇ of the federal Rehabilitation Act of 1973 (29 U.S.C. 796, et seq.), as may be amended.
 - (4)--"Severely--disabled--person"-means-a-person-with-a
 permanent-disability-that-substantially--limits--major--life
 activity;--such--as--walking;--self-care;--seeing;--hearing;
 speaking;-learning;-reasoning;-judgment;-or-memory;-and-that
 can-be-diagnosed-by-a-physician;
 - (4) "Person with severe disabilities" means the same as "individual with severe handicaps" as defined in the federal Rehabilitation Act of 1973 (29 U.S.C. 706(15)(B)), as may be amended. The term includes an individual whose ability to function independently in family or community or whose ability to engage or continue in employment is so limited by the severity of his physical or mental disability that the services provided under this part are required in order for the individual to achieve a greater level of independence in functioning in family or community or in
- Section 3. Section 53-19-103, MCA, is amended to read:

 "53-19-103. Department authorized to provide services.

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engaging in or continuing in employment."

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(1) Subject to available appropriated funds, services provided under this part include:

- (a) vocational and other rehabilitation services that enhance the ability of a severely--disabled person with severe disabilities to live and function independently and to secure-and-maintain engage in or continue in appropriate employment; and
- (b) any services specified in Title VII_T--Part--A₇ of the federal Rehabilitation Act of 1973 (29 U.S.C. 796, et seq.), as may be amended.
 - (2) To the extent that funds are appropriated and allocated for the purpose of providing services to severely disabled persons with severe disabilities, the department may establish the facilities and services it determines are in the best interest of severely--disabled persons with severe disabilities.
- (3) The scope, amount, and duration of services made available to severely---disabled persons with severe disabilities under this part are within the discretion of the department to determine."
- Section 4. Section 53-19-104, MCA, is amended to read:

 "53-19-104. Department contracts for services -
 governmental units providing for community homes for persons

 with severe disabilities. (1) The department may expend

 money appropriated or available for the purposes of this

part and may contract for services for eligible severely
disabled persons with any person or entity providing such
the services to persons with severe disabilities.

- 4 (2) Governmental units, including but not limited to
 5 counties, municipalities, school districts, or state
 6 institutions of higher learning, may at their own expense
 7 provide services, funds, materials, and facilities for
 8 services to community homes for severely-disabled persons
 9 with severe disabilities."
 - Section 5. Section 53-19-106, MCA, is amended to read:

 "53-19-106. Eligibility for services. (1) The department, in its discretion and in accordance with this part and Title VII7-Part-A7 of the federal Rehabilitation Act of 1973 (29 U.S.C. 796, et seq.), as may be amended), may determine eligibility of persons for services under this part.
- 17 (2) To be eligible for services under this part, a
 18 person must have a disability of such severity that, to
 19 secure and maintain employment or to function independently,
 20 he requires more intensive vocational or comprehensive
 21 rehabilitation services than-are-available-through-other
 22 state-and-federal-programs.
 - (3) Bisabled-persons A person with severe disabilities not receiving other vocational and rehabilitation services provided by the department have has priority for services

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provided under this part."

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Section 6. Section 53-19-110, MCA, is amended to read:

"53-19-110. Eligibility for residential services in a community home for persons with severe disabilities. (1) The department, in its discretion and in accordance with this part, may determine eligibility for residential services in a community home for the—severely-disabled persons with severe disabilities, based on the residential needs of the person and on the availability of residential services. Any severely—disabled person with a severe disability, as defined in [section 9], may be considered for placement in a community home, regardless of the source of funding for his residential services.

(2) A person who has a primary diagnosis of mental illness or who receives mental health services under Title 53, chapter 21, is not eligible for placement in residential services a community home for persons with severe disabilities unless he is eligible for and receiving services under this part and Title VII7--Part--A7 of the federal Rehabilitation Act of 1973 (29 U.S.C. 796, et seq.), as may be amended, or Title XIX of the Social Security Act (42 U.S.C. 1396, et seq.), as may be amended."

Section 7. Section 53-19-112, MCA, is amended to read:

"53-19-112. Rulemaking. (1) For the purposes of
providing services to severely-disabled persons with severe

disabilities, the department may adopt rules necessary for
the administration of the services provided to-severely
disabled-persons under this part. Rules adopted may include
but are not limited to eligibility for services, licensing,
facility design and acquisition, program staffing, staff
training, service goals and design, quality of services,
client placement procedures, client rights and privileges,
client grievance procedures, fair hearings, provider
grievance procedures, and accounting procedures which
include accounting of client financial resources.

(2)--(a)-The--department--shall; --for--the--purpose--of licensing; -adopt-rules-to-govern-administration; --operation; and--health--and-safety-requirements-for-community-homes-for severely-disabled-persons-in--order--to--protect--residents-rights; --The--department--shall--provide--for--temporary-and provisional-licensing;

(b)--The--department--of---health---and---environmental aciences--shall--provide--advice--and-recommendations-to-the department-concerning-licensing-requirements-for-health--and safety.

t3)(2) The department shall, in cooperation with the board of nursing, adopt rules under which a properly trained staff member of a facility providing services to severely disabled persons with severe disabilities under this part may supervise and assist a client of a facility in taking a

medication if the medication is usually self-administered and if a physician has prescribed the assistance."

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NEW SECTION. Section 8. Purpose. The legislature, in recognition of the needs of persons with severe disabilities and of the desirability of meeting those needs on a community level, establishes in [sections 8 through 12] authority for the state to license community homes for persons with severe disabilities. Licensed community homes for persons with severe disabilities are for the purpose of providing residential settings for persons with severe disabilities services receiving funded through state-administered programs who otherwise are unable to live independently and who are determined to be capable of residing in noninstitutional settings.

NEW SECTION. Section 9. Definitions. As used in [sections 8 through 12], the following definitions apply:

- (1) "Community home for persons with severe disabilities" means a family-oriented residence that is designed to provide residential services for two to eight persons with severe disabilities and that does not provide skilled or intermediate nursing care. This definition does not preclude the provision of skilled or intermediate nursing care by third-person providers.
- 24 (2) "Department" means the department of family 25 services established in 2-15-2401.

- 1 (3) "Disability" means a permanent physical or mental 2 condition recognized as a disability by Title VII of the 3 federal Rehabilitation Act of 1973 (29 U.S.C. 796, et seq.), 4 as may be amended.
- 5 (4) "Severe disability" means a permanent disability
 6 that substantially limits major life activity, such as
 7 walking, self-care, seeing, hearing, speaking, learning,
 8 reasoning, judgment, or memory, and that can be diagnosed by
 9 a physician. The term includes the condition of a person
 10 with severe disabilities as defined in 53-19-102.
- NEW SECTION. Section 10. Licensing. (1) A community
 home for persons with severe disabilities must be licensed
 annually by the department.
- 14 (2) The department may also issue temporary and provisional licenses.
- NEW SECTION. Section 11. Health and safety standards.

 (1) A community home for persons with severe disabilities

 must be certified annually for fire and life safety by the

 state fire marshal. The state fire marshal shall notify the

 department whenever a community home has been certified or

 refused certification.
- 22 (2) (a) Local health officers shall inspect a 23 community home for persons with severe disabilities to 24 ensure compliance with health and safety standards. If for 25 any reason the local authority cannot complete the

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- inspection in a timely manner, the department of health and
 environmental sciences may make the inspection to ensure
 compliance with the standards.
- 4 (b) The inspecting health officer shall notify the 5 department whether a community home is or is not in 6 compliance with applicable standards.
- 7 (c) A reasonable fee may be charged by health 8 authorities conducting compliance inspections.

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- NEW SECTION. Section 12. Rulemaking. (1) The department shall, for the purpose of licensing, adopt rules to govern administration, operation, and health and safety requirements for community homes for persons with severe disabilities in order to protect rights of residents. The department shall provide for temporary and provisional licensing.
 - (2) The department of health and environmental sciences and the state fire marshal shall provide advice and recommendations to the department concerning licensing requirements for health and safety.
- Section 13. Section 50-5-101, MCA, is amended to read:
- 21 **50-5-101. (Temporary) Definitions. As used in parts 1
 22 through 4 of this chapter, unless the context clearly
 23 indicates otherwise, the following definitions apply:
- 24 (1) "Accreditation" means a designation of approval.
- 25 (2) "Adult day-care center" means a facility,

- freestanding or connected to another health care facility,
 which provides adults, on an intermittent basis, with the
 care necessary to meet the needs of daily living.
- 4 (3) "Affected person" means an applicant for certificate of need, a member of the public who will be served by the proposal, a health care facility located in the geographic area affected by the application, an agency which establishes rates for health care facilities, a third-party payer who reimburses health care facilities in the area affected by the proposal, or an agency which plans or assists in planning for such facilities.
- 12 (4) "Ambulatory surgical facility" means a facility,
 13 not part of a hospital, which provides surgical treatment to
 14 patients not requiring hospitalization. This type of
 15 facility may include observation beds for patient recovery
 16 from surgery or other treatment.
- 17 (5) "Batch" means those letters of intent to seek
 18 approval for new beds or major medical equipment that are
 19 accumulated during a single batching period.
 - (6) "Batching period" means a period, not exceeding 1 month, established by department rule during which letters of intent to seek approval for new beds or major medical equipment are accumulated pending further processing of all letters of intent within the batch.
- 25 (7) "Board" means the board of health and

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environmental sciences, provided for in 2-15-2104.

(8) "Capital expenditure" means:

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- (a) an expenditure made by or on behalf of a health 3 4 care facility that, under generally accepted accounting 5 principles, is not properly chargeable as an expense of 6 operation and maintenance; or
- 7 (b) a lease, donation, or comparable arrangement that 8 would be a capital expenditure if money or any other property of value had changed hands. 9
- (9) "Certificate of need" written 10 means authorization by the department for a person to proceed with 11 12 a proposal subject to 50-5-301.
 - (10) "Challenge period" means a period, not exceeding 1 month, established by department rule during which any person may apply for comparative review with an applicant whose letter of intent has been received during the preceding batching period.
 - (11) "Chemical dependency facility" means a facility whose function is the treatment, rehabilitation, and prevention of the use of any chemical substance, including alcohol, which creates behavioral or health problems and endangers the health, interpersonal relationships, or economic function of an individual or the public health. welfare, or safety.
- (12) "Clinical laboratory" means a facility for the 25

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- microbiological, serological, chemical, hematological,
- 2 radiobioassay, cytological, immunohematological.
- 3 pathological, or other examination of materials derived from
 - the human body for the purpose of providing information for
- the diagnosis, prevention, or treatment of any disease or
- assessment of a medical condition.
- 7 (13) "College of American pathologists" means the organization nationally recognized by that name
- headquarters in Traverse City, Michigan, that surveys
- 10 clinical laboratories upon their requests and accredits
- clinical laboratories that it finds meet its standards and 11
 - requirements.

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- 13 (14) "Comparative review" means a joint review of two
- more certificate of need applications which are 14
- determined by the department to be competitive in that the 15
- granting of a certificate of need to one of the applicants would substantially prejudice the department's review of the 17
- 18 other applications.
- (15) "Construction" means the physical erection of a 19
- health care facility and any stage thereof, including ground 20
- breaking, or remodeling, replacement, or renovation of an 21
- 22 existing health care facility.
- 23 (16) "Department" means the department of health and
- 24 environmental sciences provided for in Title 2, chapter 15,
- 25 part 21.

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(17) "Federal acts" means federal statutes for the construction of health care facilities.

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- 3 (18) "Governmental unit" means the state, a state 4 agency, a county, municipality, or political subdivision of 5 the state, or an agency of a political subdivision.
- 6 (19) "Health care facility" or "facility" means any 7 institution, building, or agency or portion thereof, private я or public, excluding federal facilities, whether organized for profit or not, used, operated, or designed to provide 9 10 health services, medical treatment, nursing, 11 rehabilitative, or preventive care to any person or persons. The term does not include offices of private physicians or 12 13 dentists. The term includes but is not limited to ambulatory 14 surgical facilities, health maintenance organizations, home health agencies, hospices, hospitals, infirmaries, kidney 15 treatment centers, long-term care facilities, medical 16 assistance facilities, mental health centers, outpatient 17 facilities. 18 public health centers. rehabilitation facilities, and adult day-care centers. 19
- 20 (20) "Health maintenance organization" means a public 21 or private organization which provides or arranges for 22 health care services to enrollees on a prepaid or other 23 financial basis, either directly through provider employees 24 or through contractual or other arrangements with a provider 25 or group of providers.

- (21) "Home health agency" means a public agency or private organization or subdivision thereof which is engaged in providing home health services to individuals in the places where they live. Home health services must include the services of a licensed registered nurse and at least one other therapeutic service and may include additional support services.
- (22) "Hospice" means a coordinated program of home and inpatient health care that provides or coordinates palliative and supportive care to meet the needs of a terminally ill patient and his family arising out of physical, psychological, spiritual, social, and economic stresses experienced during the final stages of illness and dying and that includes formal bereavement programs as an essential component.
 - the supervision of licensed physicians, services for medical diagnosis, treatment, rehabilitation, and care of injured, disabled, or sick persons. Services provided may or may not include obstetrical care, emergency care, or any other service as allowed by state licensing authority. A hospital has an organized medical staff which is on call and available within 20 minutes, 24 hours per day, 7 days per week, and provides 24-hour nursing care by licensed registered nurses. This term includes hospitals specializing

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in providing health services for psychiatric, mentally retarded, and tubercular patients.

- 3 (24) "Infirmary" means a facility located in a 4 university, college, government institution, or industry for 5 the treatment of the sick or injured, with the following 6 subdefinitions:
- 7 (a) an "infirmary--A" provides outpatient and 8 inpatient care;
- 9 (b) an "infirmary--B" provides outpatient care only.

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- (25) "Joint commission on accreditation of hospitals" means the organization nationally recognized by that name with headquarters in Chicago, Illinois, that surveys health care facilities upon their requests and grants accreditation status to any health care facility that it finds meets its standards and requirements.
- (26) "Kidney treatment center" means a facility which specializes in treatment of kidney diseases, including freestanding hemodialysis units.
 - (27) (a) "Long-term care facility" means a facility or part thereof which provides skilled nursing care, intermediate nursing care, or intermediate developmental disability care to a total of two or more persons or personal care to more than four persons who are not related to the owner or administrator by blood or marriage. The term does not include adult foster care licensed under

licensed under 53-20-305, community homes for physically
disabled persons with severe diabilities licensed under
53-19-111 [section 10], youth care facilities licensed under
41-3-1142, hotels, motels, boardinghouses, roominghouses, or
similar accommodations providing for transients, students,
or persons not requiring institutional health care, or
juvenile and adult correctional facilities operating under

53-5-303, community homes for the developmentally disabled

10 (b) "Skilled nursing care" means the provision of
11 nursing care services, health-related services, and social
12 services under the supervision of a licensed registered
13 nurse on a 24-hour basis.

the authority of the department of institutions.

- 14 (c) "Intermediate nursing care" means the provision of
 15 nursing care services, health-related services, and social
 16 services under the supervision of a licensed nurse to
 17 patients not requiring 24-hour nursing care.
- (d) "Intermediate developmental disability care" means
 the provision of nursing care services, health-related
 services, and social services for the developmentally
 disabled, as defined in 53-20-102(4), or persons with
 related problems.
- 23 (e) "Personal care" means the provision of services
 24 and care which do not require nursing skills to residents
 25, needing some assistance in performing the activities of

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daily living.

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- 2 (28) "Major medical equipment" means a single unit of 3 medical equipment or a single system of components with related functions which is used to provide medical or other health services and costs a substantial sum of money. 5
- 6 (29) "Medical assistance facility" means a facility that: 7
 - (a) provides inpatient care to ill or injured persons prior to their transportation to a hospital or provides inpatient medical care to persons needing that care for a period of no longer than 96 hours; and
- (b) either is located in a county with fewer than six 12 13 residents per square mile or is located more than 35 road miles from the nearest hospital. 14
- (30) "Mental health center" means a facility providing 15 services for the prevention or diagnosis of mental illness, 16 17 the care and treatment of mentally ill patients or the 18 rehabilitation of such persons, or any combination of these services. 19
- (31) "Nonprofit health care facility" means a health 20 21 care facility owned or operated by one or more nonprofit corporations or associations. 22
- (32) "Observation bed" means a bed occupied for not 23 24 more than 6 hours by a patient recovering from surgery or 25 other treatment.

- 1 (33) "Offer" means the holding out by a health care facility that it can provide specific health services.
- (34) "Outpatient facility" means a facility, located in 3 4 or apart from a hospital, providing, under the direction of a licensed physician, either diagnosis or treatment, or both, to ambulatory patients in need of medical, surgical, 7 or mental care. An outpatient facility may have observation beds.
- 9 (35) "Patient" means an individual obtaining services, 10 including skilled nursing care, from a health care facility.
- 11 (36) "Person" means any individual, firm, partnership, 12 association, organization, agency, institution, corporation, 13 trust, estate, or governmental unit, whether organized for 14 profit or not.
- 15 (37) "Public health center" means a publicly owned 16 facility providing health services, including laboratories, 17 clinics, and administrative offices.
- 18 (38) "Rehabilitation facility" means a facility which 19 is operated for the primary purpose of assisting in the 20 rehabilitation of disabled persons bγ providing 21 comprehensive medical evaluations and services. psychological and social services, or vocational evaluation 22 and training or any combination of these services and in 23 which the major portion of the services is furnished within 24 25

the facility.

(39) "Resident" means a person who is in a long-term care facility for intermediate or personal care.

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- (40) "State health plan" means the plan prepared by the department to project the need for health care facilities within Montana and approved by the statewide health coordinating council and the governor.
- 7 50-5-101. (Effective July 1, 1989) Definitions. As 8 used in parts 1 through 4 of this chapter, unless the 9 context clearly indicates otherwise, the following 10 definitions apply:
- 11 (1) "Accreditation" means a designation of approval.
- 12 (2) "Adult day-care center" means a facility,
 13 freestanding or connected to another health care facility,
 14 which provides adults, on an intermittent basis, with the
 15 care necessary to meet the needs of daily living.
 - (3) "Ambulatory surgical facility" means a facility, not part of a hospital, which provides surgical treatment to patients not requiring hospitalization. This type of facility may include observation beds for patient recovery from surgery or other treatment.
- 21 (4) "Board" means the board of health and 22 environmental sciences, provided for in 2-15-2104.
- 23 (5) "Chemical dependency facility" means a facility
 24 whose function is the treatment, rehabilitation, and
 25 prevention of the use of any chemical substance, including

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- alcohol, which creates behavioral or health problems and endangers the health, interpersonal relationships, or economic function of an individual or the public health, welfare, or safety.
- 5 (6) "Clinical laboratory" means a facility for the
 6 microbiological, serological, chemical, hematological,
 7 radiobioassay, cytological, immunohematological,
 8 pathological, or other examination of materials derived from
 9 the human body for the purpose of providing information for
 10 the diagnosis, prevention, or treatment of any disease or
 11 assessment of a medical condition.
- 12 (7) "College of American pathologists" means the
 13 organization nationally recognized by that name with
 14 headquarters in Traverse City, Michigan, that surveys
 15 clinical laboratories upon their requests and accredits
 16 clinical laboratories that it finds meet its standards and
 17 requirements.
- 18 (8) "Department" means the department of health and
 19 environmental sciences provided for in Title 2, chapter 15,
 20 part 21.
- 21 (9) "Federal acts" means federal statutes for the 22 construction of health care facilities.
- 23 (10) "Governmental unit" means the state, a state 24 agency, a county, municipality, or political subdivision of 25 the state, or an agency of a political subdivision.

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- 1 (11) "Health care facility" or "facility" means any 2 institution, building, or agency or portion thereof, private 3 or public, excluding federal facilities, whether organized 4 for profit or not, used, operated, or designed to provide 5 health services. medical treatment, or nursing. 6 rehabilitative, or preventive care to any person or persons. 7 The term does not include offices of private physicians or 8 dentists. The term includes but is not limited to ambulatory 9 surgical facilities, health maintenance organizations, home 10 health agencies, hospices, hospitals, infirmaries, kidney 11 treatment centers, long-term care facilities, medical assistance facilities, mental health centers, outpatient 12 13 facilities, public health centers, rehabilitation 14 facilities, and adult day-care centers.
 - (12) "Health maintenance organization" means a public or private organization that provides or arranges for health care services to enrollees on a prepaid or other financial basis, either directly through provider employees or through contractual or other arrangements with a provider or group of providers.

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21 (13) "Home health agency" means a public agency or
22 private organization or subdivision thereof which is engaged
23 in providing home health services to individuals in the
24 places where they live. Home health services must include
25 the services of a licensed registered nurse and at least one

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- other therapeutic service and may include additional support
 services.
- 3 (14) "Hospice" means a coordinated program of home and
 4 inpatient health care that provides or coordinates
 5 palliative and supportive care to meet the needs of a
 6 terminally ill patient and his family arising out of
 7 physical, psychological, spiritual, social, and economic
 8 stresses experienced during the final stages of illness and
 9 dying and that includes formal bereavement programs as an
 10 essential component.
- (15) "Hospital" means a facility providing, by or under 11 the supervision of licensed physicians, services for medical 12 diagnosis, treatment, rehabilitation, and care of injured, 13 disabled, or sick persons. Services provided may or may not 14 include obstetrical care, emergency care, or any other 15 service as allowed by state licensing authority. A hospital 16 has an organized medical staff which is on call and 17 available within 20 minutes, 24 hours per day, 7 days per 18 and provides 24-hour nursing care by licensed 19 registered nurses. This term includes hospitals specializing 20 in providing health services for psychiatric, mentally 21 22 retarded, and tubercular patients.
 - (16) "Infirmary" means a facility located in a university, college, government institution, or industry for the treatment of the sick or injured, with the following

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subdefinitions:

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2 (a) an "infirmary--A" provides outpatient and 3 inpatient care;

- (b) an "infirmary--B" provides outpatient care only.
- (17) "Joint commission on accreditation of hospitals" means the organization nationally recognized by that name with headquarters in Chicago, Illinois, that surveys health care facilities upon their requests and grants accreditation status to any health care facility that it finds meets its standards and requirements.
- 11 (18) "Kidney treatment center" means a facility which 12 specializes in treatment of kidney diseases, including 13 freestanding hemodialysis units.
 - (19) (a) "Long-term care facility" means a facility or part thereof which provides skilled nursing care, intermediate nursing care, or intermediate developmental disability care to a total of two or more persons or personal care to more than four persons who are not related to the owner or administrator by blood or marriage. The term does not include adult foster care licensed under 53-5-303, community homes for the developmentally disabled licensed under 53-20-305, community homes for physically disabled persons with severe disabilities licensed under 53-19-111 [section 10], youth care facilities licensed under 41-3-1142, hotels, motels, boardinghouses, roominghouses, or

- 1 similar accommodations providing for transients, students,
- 2 or persons not requiring institutional health care, or
- 3 juvenile and adult correctional facilities operating under
- 4 the authority of the department of institutions.
- 5 (b) "Skilled nursing care" means the provision of 6 nursing care services, health-related services, and social 7 services under the supervision of a licensed registered 8 nurse on a 24-hour basis.
- 9 (c) "Intermediate nursing care" means the provision of
 10 nursing care services, health-related services, and social
 11 services under the supervision of a licensed nurse to
 12 patients not requiring 24-hour nursing care.
- (d) "Intermediate developmental disability care" means
 the provision of nursing care services, health-related
 services, and social services for the developmentally
 disabled, as defined in 53-20-102(4), or persons with
 related problems.
- 18 (e) "Personal care" means the provision of services
 19 and care which do not require nursing skills to residents
 20 needing some assistance in performing the activities of
 21 daily living.
- 22 (20) "Medical assistance facility" means a facility
 23 that:
- 24 (a) provides inpatient care to ill or injured persons 25 prior to their transportation to a hospital or provides

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inpatient medical care to persons needing that care for a
period of no longer than 96 hours; and

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- (b) either is located in a county with fewer than six residents per square mile or is located more than 35 road miles from the nearest hospital.
- 6 (21) "Mental health center" means a facility providing
 7 services for the prevention or diagnosis of mental illness,
 8 the care and treatment of mentally ill patients or the
 9 rehabilitation of such persons, or any combination of these
 10 services.
- (22) "Nonprofit health care facility" means a health care facility owned or operated by one or more nonprofit corporations or associations.
- 14 (23) "Observation bed" means a bed occupied for not
 15 more than 6 hours by a patient recovering from surgery or
 16 other treatment.
- 17 (24) "Offer" means the holding out by a health care 18 facility that it can provide specific health services.
- 19 (25) "Outpatient facility" means a facility, located in 20 or apart from a hospital, providing, under the direction of 21 a licensed physician, either diagnosis or treatment, or 22 both, to ambulatory patients in need of medical, surgical, 23 or mental care. An outpatient facility may have observation 24 beds.
- 25 (26) "Patient" means an individual obtaining services,

including skilled nursing care, from a health care facility.

2 (27) "Person" means any individual, firm, partnership,
3 association, organization, agency, institution, corporation,
4 trust, estate, or governmental unit, whether organized for
5 profit or not.

- 6 (28) "Public health center" means a publicly owned
 7 facility providing health services, including laboratories,
 8 clinics, and administrative offices.
 - (29) "Rehabilitation facility" means a facility which is operated for the primary purpose of assisting in the providing rehabilitation of disabled persons by medical evaluations and services, comprehensive psychological and social services, or vocational evaluation and training or any combination of these services and in which the major portion of the services is furnished within the facility.
- 17 (30) "Resident" means a person who is in a long-term
 18 care facility for intermediate or personal care.
- 19 (31) "State health plan" means the plan prepared by the
 20 department to project the need for health care facilities
 21 within Montana and approved by the statewide health
 22 coordinating council and the governor."
 - Section 14. Section 50-5-301, MCA, is amended to read:

 "50-5-301. (Temporary) When certificate of need is

 required -- definitions. (1) Unless a person has submitted

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an application for and is the holder of a certificate of need granted by the department, he may not initiate any of the following:

- (a) the incurring of an obligation by or on behalf of 4 a health care facility for any capital expenditure, other 5 than to acquire an existing health care facility or to 6 replace major medical equipment with equipment performing 7 8 substantially the same function and in the same manner, that exceeds the expenditure thresholds established in subsection 9 (4). The costs of any studies, surveys, designs, plans, 10 working drawings, specifications, and other activities 11 (including staff effort, consulting, and other services) 12 13 essential to the acquisition, improvement, expansion, or replacement of any plant or equipment with respect to which 14 an expenditure is made must be included in determining if 15 the expenditure exceeds the expenditure thresholds. 16
- 17 (b) a change in the bed capacity of a health care
 18 facility through an increase in the number of beds or a
 19 relocation of beds from one health care facility or site to
 20 another, unless:
- 21 (i) the number of beds involved is 10 or less or 10%
 22 or less of the licensed beds (if fractional, rounded down to
 23 the nearest whole number), whichever figure is smaller, in
 24 any 2-year period;
- 25 (ii) a letter of intent is submitted to the department;

2 (iii) the department determines the proposal will not 3 significantly increase the cost of care provided or exceed

the bed need projected in the state health plan;

- by or on behalf of a health care facility which was not offered by or on behalf of the facility within the 12-month period before the month in which the service would be offered and which will result in additional annual operating and amortization expenses of \$150,000 or more;
- 11 (d) the acquisition by any person of major medical 12 equipment, provided such acquisition would have required a 13 certificate of need pursuant to subsection (1)(a) or (1)(c) 14 of this section if it had been made by or on behalf of a 15 health care facility;
- 16 (e) the incurring of an obligation for a capital
 17 expenditure by any person or persons to acquire 50% or more
 18 of an existing health care facility unless:
- 19 (i) the person submits the letter of intent required 20 by 50-5-302(2); and
- 21 (ii) the department finds that the acquisition will not 22 significantly increase the cost of care provided or increase 23 bed capacity;
- 24 (f) the construction, development, or other 25 establishment of a health care facility which is being

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replaced or which did not previously exist, by any person, including another type of health care facility:

(g) the expansion of the geographical service area of a home health agency; or

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- 5 (h) the use of hospital beds to provide services to
 6 patients or residents needing only skilled nursing care,
 7 intermediate nursing care, or intermediate developmental
 8 disability care, as those levels of care are defined in
 9 50-5-101.
- 10 (2) For purposes of subsection (1)(b), a change in bed
 11 capacity occurs on the date new or relocated beds are
 12 licensed pursuant to part 2 of this chapter and the date a
 13 final decision is made to grant a certificate of need for
 14 new or relocated beds, unless the certificate of need
 15 expires pursuant to 50-5-305.
- 16 (3) For purposes of this part, the following 17 definitions apply:
- 18 (a) "Health care facility" or "facility" means a
 19 nonfederal ambulatory surgical facility, home health agency,
 20 hospital, long-term care facility, medical assistance
 21 facility, mental health center with inpatient services,
 22 inpatient chemical dependency facility, rehabilitation
 23 facility with inpatient services, or personal care facility.
 24 (b) (i) "Long-term care facility" means an entity

which provides skilled nursing care, intermediate nursing

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- care, or intermediate developmental disability care, as defined in 50-5-101, to a total of two or more persons.
- (ii) The term does not include adult foster care 3 licensed under 53-5-303; community homes for developmentally disabled licensed under 53-20-305; community homes for physically---disabled persons with severe 6 7 disabilities licensed under 53-19-111 [section 10]; boarding or foster homes for children licensed under 41-3-1142; hotels, motels, boardinghouses, roominghouses, or similar 9 accommodations providing for transients, students, or 10 persons not requiring institutional health care; or juvenile adult correctional facilities operating under the 12 13 authority of the department of institutions.
- 14 (c) "Obligation for capital expenditure" does not
 15 include the authorization of bond sales or the offering or
 16 sale of bonds pursuant to the state long-range building
 17 program under Title 17, chapter 5, part 4, and Title 18,
 18 chapter 2, part 1.
 - (d) "Personal care facility" means an entity which provides services and care which do not require nursing skills to more than four persons who are not related to the owner or administrator by blood or marriage and who need some assistance in performing the activities of everyday living. The term does not include those entities excluded from the definition of "long-term care facility" in

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- 1 subsection (b).
- 2 (4) Expenditure thresholds for certificate of need
 3 review are established as follows:
- 4 (a) For acquisition of equipment and the construction 5 of any building necessary to house the equipment, the 6 expenditure threshold is \$750,000.
- 7 (b) For construction of health care facilities, the 8 expenditure threshold is \$1,500,000. (Repealed effective 9 July 1, 1989--sec. 9, Ch. 477, L. 1987.)"
- NEW SECTION. Section 15. Repealer. Sections 53-19-111 and 53-19-113, MCA, are repealed.
- 12 <u>NEW-SECTION---Section-16.--Codification----instruction-</u>
 13 {Sections--8--through--12}-are-intended-to-be-codified-as-an
 14 integral-part-of-Title-537-chapter-207-and-the-provisions-of
 15 Title-537-chapter-207-apply-to-{sections-8-through-12}-
- NEW SECTION. Section 16. Extension of authority. Any existing authority to make rules on the subject of the provisions of [this act] is extended to the provisions of [this act].
- NEW SECTION. Section 17. Effective dates. (1)
 [Section ±7 16 and this section] are effective on passage and approval.
- 23 (2) [Sections 1 through $\frac{16}{15}$] are effective July 1, 24 1989.

-End-

homes

1	HOUSE BILL NO. 308
2	INTRODUCED BY SQUIRES, MANNING, COBB, WEEDING, WALKER,
3	DAVIS, JOHNSON, COCCHIARELLA, DRISCOLL, THOMAS,
4	JERGESON, HANNAH, STRIZICH
5	BY REQUEST OF THE DEPARTMENT OF SOCIAL AND REHABILITATION
6	SERVICES AND THE DEPARTMENT OF FAMILY SERVICES
7	
8	A BILL FOR AN ACT ENTITLED: "AN ACT TO GENERALLY REVISE THE
9	LAWS RELATING TO COMMUNITY PROGRAMS FOR PERSONS WITH SEVERE
10	DISABILITIES; TO AUTHORIZE THE STATE TO ADMINISTER COMMUNITY
11	PROGRAMS FOR PERSONS WITH SEVERE DISABILITIES UNDER ANY
12	PROVISION OF TITLE VII OF THE FEDERAL REHABILITATION ACT OF
13	1973; TO TRANSFER AUTHORITY FOR LICENSING OF COMMUNITY HOMES
14	FOR PERSONS WITH SEVERE DISABILITIES FROM THE DEPARTMENT OF
15	SOCIAL AND REHABILITATION SERVICES TO THE DEPARTMENT OF
16	FAMILY SERVICES; AMENDING SECTIONS 50-5-101, 50-5-301,
17	53-19-101 THROUGH 53-19-104, 53-19-106, 53-19-110, AND
18	53-19-112, MCA; REPEALING SECTIONS 53-19-111 AND 53-19-113,
19	MCA; AND PROVIDING EFFECTIVE DATES."
20	
21	STATEMENT OF INTENT
22	This bill requires a statement of intent because
23	[section 12] requires the department of family services to
24	adopt administrative rules for the licensing of community

There are no changes in HB 308 and due to length will not be reprinted. Please refer to second reading (yellow) copy for complete text.

persons with severe disabilities. Licensed

SENATE STANDING CONNITTEE REPORT

page 1 of 2 March 6, 1989

MR. PRESIDENT:

We, your committee on Public Health, Welfare, and Safety, having had under consideration HB 308 (third reading copy -- blue). respectfully report that HB 308 be amended and as so amended be concurred in:

Sponsor: Squires (Manning)

Page 33, line 10.

Following: line 9

Insert: "NEW SECTION. Section 15. Coordination requirements -consolidation of programs authorized. (1) The governor shall assure that services under Title 53, chapter 19, part 1, are coordinated with programs and services in Title 53, chapter 7, parts 1 through 3, that are administered by the department of social and rehabilitation services with funds provided under the federal Rehabilitation Act of 1973 (29 U.S.C. 701, et seq.), as amended

- (2) The governor may consolidate services under Title 53, chapter 19, part 1, with other programs and services in order to maximize coordination of services as required in subsection (1) and to prevent overlapping and duplication of services within state government.
- (3) The governor may transfer employees, appropriations, and spending authority necessary to accomplish the coordination of services as mandated by this section. The authority contained in this subsection is limited to the programs and services described in subsection (1). This subsection supercedes any restrictions on the transfer of employees, appropriations, and spending authority contained in [House Bill No. 100]." Renumber: subsequent sections

Page 33, line 16.

Following: line 15

Insert: "NEW SECTION. Section 17. Codification instruction. [Sections 8 through 12] are intended to be codified as an integral part of Title 53, and the provisions of Title 53 apply to (sections 8 through 121."

Renumber: subsequent sections

SENATE COMMITTEE ON PUBLIC HEALTH, HB 308 page 2 of 2

3. Page 33, line 21. Strike: "16" Insert: "18"

4. Page 33, line 23. Strike: "15" Insert: "17"

AND AS AMENDED BE CONCURRED IN

Signed:

SENATE

scrhb308.306 HB 308

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HB 308

homes

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2	INTRODUCED BY SQUIRES, MANNING, COBB, WEEDING, WALKER,
3	DAVIS, JOHNSON, COCCHIARELLA, DRISCOLL, THOMAS,
4	JERGESON, HANNAH, STRIZICH
5	BY REQUEST OF THE DEPARTMENT OF SOCIAL AND REHABILITATION
6	SERVICES AND THE DEPARTMENT OF FAMILY SERVICES
7	
8	A BILL FOR AN ACT ENTITLED: "AN ACT TO GENERALLY REVISE THE
9	LAWS RELATING TO COMMUNITY PROGRAMS FOR PERSONS WITH SEVERE
10	DISABILITIES; TO AUTHORIZE THE STATE TO ADMINISTER COMMUNITY
11	PROGRAMS FOR PERSONS WITH SEVERE DISABILITIES UNDER ANY
12	PROVISION OF TITLE VII OF THE FEDERAL REHABILITATION ACT OF
13	1973; TO TRANSFER AUTHORITY FOR LICENSING OF COMMUNITY HOMES
14	FOR PERSONS WITH SEVERE DISABILITIES FROM THE DEPARTMENT OF
15	SOCIAL AND REHABILITATION SERVICES TO THE DEPARTMENT OF
16	FAMILY SERVICES; AMENDING SECTIONS 50-5-101, 50-5-301,
17	53-19-101 THROUGH 53-19-104, 53-19-106, 53-19-110, AND
18	53-19-112, MCA; REPEALING SECTIONS 53-19-111 AND 53-19-113,
19	MCA; AND PROVIDING EFFECTIVE DATES."
20	
21	STATEMENT OF INTENT
22	This bill requires a statement of intent because
23	[section 12] requires the department of family services to
24	adopt administrative rules for the licensing of community

HOUSE BILL NO. 308

with severe disabilities who are eligible for services 2 designed to assist persons with severe disabilities in 3 living and functioning independently. It is the intent of the legislature that, in adopting 5 rules, the department develop licensing requirements to 7 govern the administration, operation, and health and safety of standards of community homes for persons with severe disabilities. The department of health and environmental 10 sciences and the state fire marshal shall provide advice and recommendations to the department of family services in the 11 12 adoption of licensing requirements for the health and safety 13 of community homes. The rules for licensing of community homes for persons 14 with severe disabilities may address the following: facility 15 acquisition, facility design, group home staffing, staff 16 17 training, service goals and design, quality of services, client placement procedure, provider grievance procedure, 18 accounting procedures, including a procedure for the 19 20 accounting of client personal property and belongings, water and waste disposal, food service, laundry, and fire and life 21 22 safety standards that are compatible with the residential 23 character of the facility. 24

community homes are family-oriented residences for persons

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persons with severe disabilities. Licensed

1	Section 1. Section 53-19-101, MCA, is amended to read:
2	*53-19-101. Purpose. The legislature, in recognition
3	of needs of severelydisabled persons with severe
4	disabilities and of the desirability of meeting those needs
5	on a community level to the extent of available funding and
6	in order to reduce the need for institutional care settings,
7	establishes by this part a community program to assist
8	severely-disabled persons with severe disabilities in living
9	and functioning independently. This program implements Title
10	VII7-Part-A7 of the federal Rehabilitation Act of 1973 (29
11	U.S.C. 796, et seq.), as may be amended to for disabled
12	persons with severe disabilities in Montana. The-legislature
13	further-recognizes-the-need-to-provide-for-the-licensingof
14	current-community-homes-for-severely-disabled-persons+"

Section 2. Section 53-19-102, MCA, is amended to read: *53-19-102. Definitions. As used in this part, the following definitions apply:

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(1) "Community home for severely-disabled persons with severe disabilities" means a family-oriented-residence--that is-designed-to-provide-residential-services-for-two-to-eight severely--disabled-persons-and-that-does-not-provide-skilled or-intermediate--nursing--care---This--definition--does--not preclude -- the -- provision -- of -skilled-or-intermediate-nursing care-by-third-person-providers: facility licensed by the department of family services, as provided for in [sections 1 8 through 12].

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- 2 (2) "Department" means the department of social and 3 rehabilitation services established in 2-15-2201.
- (3) "Disability" means a permanent physical or mental condition recognized as a disability by Title VII7--Part--A7 5 of the federal Rehabilitation Act of 1973 (29 U.S.C. 796, et seq.), as may be amended .
 - (4)-- Severely--disabled--person"-means-a-person-with-a permanent-disability-that-substantially--limits--major--life activity;--such--as--walking;--self-care;--seeing;--hearing; speaking;-learning;-reasoning;-judgment;-or-memory;-and-that can-be-diagnosed-by-a-physician-
- (4) "Person with severe disabilities" means the same 13 as "individual with severe handicaps" as defined in the federal Rehabilitation Act of 1973 (29 U.S.C. 706(15)(B)), 16 as may be amended. The term includes an individual whose ability to function independently in family or community or 18 whose ability to engage or continue in employment is so 19 limited by the severity of his physical or mental disability 20 that the services provided under this part are required in 21 order for the individual to achieve a greater level of 22 independence in functioning in family or community or in 23 engaging in or continuing in employment."
- 24 Section 3. Section 53-19-103, MCA, is amended to read: 25 "53-19-103. Department authorized to provide services.

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(1) Subject to available appropriated funds, services provided under this part include:

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- (a) vocational and other rehabilitation services that enhance the ability of a severely--disabled person with severe disabilities to live and function independently and to secure-and-maintain engage in or continue in appropriate employment; and
- 8 (b) any services specified in Title VII_T--Part--A_T of
 9 the federal Rehabilitation Act of 1973 (29 U.S.C. 796, et
 10 seq.), as may be amended.
 - (2) To the extent that funds are appropriated and allocated for the purpose of providing services to severely disabled persons with severe disabilities, the department may establish the facilities and services it determines are in the best interest of severely--disabled persons with severe disabilities.
 - (3) The scope, amount, and duration of services made available to severely---disabled persons with severe disabilities under this part are within the discretion of the department to determine."
- Section 4. Section 53-19-104, MCA, is amended to read:

 "53-19-104. Department contracts for services -
 governmental units providing for community homes for persons

 with severe disabilities. (1) The department may expend

 money appropriated or available for the purposes of this

- part and may contract for services for eligible severely

 disabled persons with any person or entity providing such

 the services to persons with severe disabilities.
- 4 (2) Governmental units, including but not limited to
 5 counties, municipalities, school districts, or state
 6 institutions of higher learning, may at their own expense
 7 provide services, funds, materials, and facilities for
 8 services to community homes for severely-disabled persons
 9 with severe disabilities."
 - Section 5. Section 53-19-106, MCA, is amended to read:

 "53-19-106. Eligibility for services. (1) The department, in its discretion and in accordance with this part and Title VII7-Part-A7 of the federal Rehabilitation Act of 1973 (29 U.S.C. 796, et seq.), as may be amended, may determine eligibility of persons for services under this part.
- 17 (2) To be eligible for services under this part, a
 18 person must have a disability of such severity that, to
 19 secure and maintain employment or to function independently,
 20 he requires more intensive vocational or comprehensive
 21 rehabilitation services than--are--available-through-other
 22 state-and-federal-programs.
 - (3) Disabled-persons A person with severe disabilities not receiving other vocational and rehabilitation services provided by the department have has priority for services

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provided under this part."

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Section 6. Section 53-19-110, MCA, is amended to read:

"53-19-110. Eligibility for residential services in a community home for persons with severe disabilities. (1) The department, in its discretion and in accordance with this part, may determine eligibility for residential services in a community home for the--severely-disabled persons with severe disabilities, based on the residential needs of the person and on the availability of residential services. Any severely--disabled person with a severe disability, as defined in [section 9], may be considered for placement in a community home, regardless of the source of funding for his residential services.

(2) A person who has a primary diagnosis of mental illness or who receives mental health services under Title 53, chapter 21, is not eligible for placement in residential services a community home for persons with severe disabilities unless he is eligible for and receiving services under this part and Title VII7--Part--A7 of the federal Rehabilitation Act of 1973 (29 U.S.C. 796, et seq.), as may be amended, or Title XIX of the Social Security Act (42 U.S.C. 1396, et seq.), as may be amended."

Section 7. Section 53-19-112, MCA, is amended to read:

"53-19-112. Rulemaking. (1) For the purposes of
providing services to severely-disabled persons with severe

disabilities, the department may adopt rules necessary for
the administration of the services provided to-severely
disabled-persons under this part. Rules adopted may include
but are not limited to eligibility for services, licensing;
facility design and acquisition, program staffing, staff
training, service goals and design, quality of services,
client placement procedures, client rights and privileges,
client grievance procedures, fair hearings, provider
grievance procedures, and accounting procedures which
include accounting of client financial resources.

(2)--(a)-The--department--shall;--for--the--purpose--of licensing;-adopt-rules-to-govern-administration;--operation; and--health--and-safety-requirements-for-community-homes-for severely-disabled-persons-in--order--to--protect--residents-rights---The--department--shall--provide--for--temporary-and provisional-licensing-

(b)--The--department--of---health---and---environmental sciences--shall--provide--advice--and-recommendations-to-the department-concerning-licensing-requirements-for-health--and safety-

(3)(2) The department shall, in cooperation with the board of nursing, adopt rules under which a properly trained staff member of a facility providing services to severely disabled persons with severe disabilities under this part may supervise and assist a client of a facility in taking a

medication if the medication is usually self-administered
and if a physician has prescribed the assistance."

NEW SECTION. Section 8. Purpose. The legislature, in 3 recognition of the needs of persons with severe disabilities 4 5 and of the desirability of meeting those needs on a community level, establishes in [sections 8 through 12] 6 authority for the state to license community homes for 7 persons with severe disabilities. Licensed community homes 9 for persons with severe disabilities are for the purpose of 10 providing residential settings for persons with severe 11 disabilities receiving services funded through 12 state-administered programs who otherwise are unable to live 13 independently and who are determined to be capable of residing in noninstitutional settings. 14

NEW SECTION. Section 9. Definitions. As used in [sections 8 through 12], the following definitions apply:

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- (1) "Community home for persons with severe disabilities" means a family-oriented residence that is designed to provide residential services for two to eight persons with severe disabilities and that does not provide skilled or intermediate nursing care. This definition does not preclude the provision of skilled or intermediate nursing care by third-person providers.
- 24 (2) "Department" means the department of family
 25 services established in 2-15-2401.

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- 1 (3) "Disability" means a permanent physical or mental
 2 condition recognized as a disability by Title VII of the
 3 federal Rehabilitation Act of 1973 (29 U.S.C. 796, et seq.),
 4 as may be amended.
- 5 (4) "Severe disability" means a permanent disability
 6 that substantially limits major life activity, such as
 7 walking, self-care, seeing, hearing, speaking, learning,
 8 reasoning, judgment, or memory, and that can be diagnosed by
 9 a physician. The term includes the condition of a person
 10 with severe disabilities as defined in 53-19-102.
- NEW SECTION. Section 10. Licensing. (1) A community
 home for persons with severe disabilities must be licensed
 annually by the department.
- 14 (2) The department may also issue temporary and 15 provisional licenses.
- 16 NEW SECTION. Section 11. Health and safety standards.
- 17 (1) A community home for persons with severe disabilities
- 18 must be certified annually for fire and life safety by the
- 19 state fire marshal. The state fire marshal shall notify the
- 20 department whenever a community home has been certified or
- 21 refused certification.
- 22 (2) (a) Local health officers shall inspect a
 23 community home for persons with severe disabilities to
 24 ensure compliance with health and safety standards. If for
 25 any reason the local authority cannot complete the

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inspection in a timely manner, the department of health and environmental sciences may make the inspection to ensure compliance with the standards.

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- (b) The inspecting health officer shall notify the department whether a community home is or is not in compliance with applicable standards.
- 7 (c) A reasonable fee may be charged by health 8 authorities conducting compliance inspections.
 - NEW SECTION. Section 12. Rulemaking. (1) The department shall, for the purpose of licensing, adopt rules to govern administration, operation, and health and safety requirements for community homes for persons with severe disabilities in order to protect rights of residents. The department shall provide for temporary and provisional licensing.
 - (2) The department of health and environmental sciences and the state fire marshal shall provide advice and recommendations to the department concerning licensing requirements for health and safety.
- Section 13. Section 50-5-101, MCA, is amended to read:

 "50-5-101. (Temporary) Definitions. As used in parts 1

 through 4 of this chapter, unless the context clearly indicates otherwise, the following definitions apply:
 - (1) "Accreditation" means a designation of approval.
- 25 (2) "Adult day-care center" means a facility,

- freestanding or connected to another health care facility, which provides adults, on an intermittent basis, with the care necessary to meet the needs of daily living.
- means an applicant for (3) "Affected person" certificate of need, a member of the public who will be 5 served by the proposal, a health care facility located in 6 the geographic area affected by the application, an agency 7 which establishes rates for health care facilities, a 8 third-party payer who reimburses health care facilities in 9 10 the area affected by the proposal, or an agency which plans or assists in planning for such facilities. 11
- 12 (4) "Ambulatory surgical facility" means a facility,
 13 not part of a hospital, which provides surgical treatment to
 14 patients not requiring hospitalization. This type of
 15 facility may include observation beds for patient recovery
 16 from surgery or other treatment.
 - (5) "Batch" means those letters of intent to seek approval for new beds or major medical equipment that are accumulated during a single batching period.
 - (6) "Batching period" means a period, not exceeding 1 month, established by department rule during which letters of intent to seek approval for new beds or major medical equipment are accumulated pending further processing of all letters of intent within the batch.
- 25 (7) "Board" means the board of health and

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1 environmental sciences, provided for in 2-15-2104.

(B) "Capital expenditure" means:

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- 3 (a) an expenditure made by or on behalf of a health 4 care facility that, under generally accepted accounting principles, is not properly chargeable as an expense of 5 operation and maintenance; or
- 7 (b) a lease, donation, or comparable arrangement that A would be a capital expenditure if money or any other 9 property of value had changed hands.
- 10 (9) "Certificate of need" written means authorization by the department for a person to proceed with 11 12 a proposal subject to 50-5-301.
 - (10) "Challenge period" means a period, not exceeding 1 month, established by department rule during which any person may apply for comparative review with an applicant whose letter of intent has been received during the preceding batching period.
 - (11) "Chemical dependency facility" means a facility whose function is the treatment, rehabilitation, and prevention of the use of any chemical substance, including alcohol, which creates behavioral or health problems and endangers the health, interpersonal relationships, economic function of an individual or the public health, welfare, or safety.
- 25 (12) "Clinical laboratory" means a facility for the

1 microbiological, serological, chemical, hematological.

2 immunohematological, radiobioassay, cytological,

3 pathological, or other examination of materials derived from

the human body for the purpose of providing information for

the diagnosis, prevention, or treatment of any disease or

assessment of a medical condition.

- 7 (13) "College of American pathologists" means the organization nationally recognized by that name headquarters in Traverse City, Michigan, that surveys 10 clinical laboratories upon their requests and accredits 11 clinical laboratories that it finds meet its standards and 12 requirements.
- 13 (14) "Comparative review" means a joint review of two 14 more certificate of need applications which are 15 determined by the department to be competitive in that the 16 granting of a certificate of need to one of the applicants would substantially prejudice the department's review of the 17 other applications. 18
- 19 (15) "Construction" means the physical erection of a 20 health care facility and any stage thereof, including ground 21 breaking, or remodeling, replacement, or renovation of an 22 existing health care facility.
- (16) "Department" means the department of health and 23 environmental sciences provided for in Title 2, chapter 15, 24

25 part 21.

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(17) "Federal acts" means federal statutes for the construction of health care facilities.

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- (18) "Governmental unit" means the state, a state agency, a county, municipality, or political subdivision of the state, or an agency of a political subdivision.
- (19) "Health care facility" or "facility" means any institution, building, or agency or portion thereof, private or public, excluding federal facilities, whether organized for profit or not, used, operated, or designed to provide health services, medical treatment. nursing. rehabilitative, or preventive care to any person or persons. The term does not include offices of private physicians or dentists. The term includes but is not limited to ambulatory surgical facilities, health maintenance organizations, home health agencies, hospices, hospitals, infirmaries, kidney treatment centers, long-term care facilities, medical assistance facilities, mental health centers, outpatient rehabilitation facilities, public health centers. facilities, and adult day-care centers.
- (20) "Health maintenance organization" means a public or private organization which provides or arranges for health care services to enrollees on a prepaid or other financial basis, either directly through provider employees or through contractual or other arrangements with a provider or group of providers.

- 1 (21) "Home health agency" means a public agency or
 2 private organization or subdivision thereof which is engaged
 3 in providing home health services to individuals in the
 4 places where they live. Home health services must include
 5 the services of a licensed registered nurse and at least one
 6 other therapeutic service and may include additional support
 7 services.
 - (22) "Hospice" means a coordinated program of home and inpatient health care that provides or coordinates palliative and supportive care to meet the needs of a terminally ill patient and his family arising out of physical, psychological, spiritual, social, and economic stresses experienced during the final stages of illness and dying and that includes formal bereavement programs as an essential component.
 - (23) "Hospital" means a facility providing, by or under the supervision of licensed physicians, services for medical diagnosis, treatment, rehabilitation, and care of injured, disabled, or sick persons. Services provided may or may not include obstetrical care, emergency care, or any other service as allowed by state licensing authority. A hospital has an organized medical staff which is on call and available within 20 minutes, 24 hours per day, 7 days per week, and provides 24-hour nursing care by licensed registered nurses. This term includes hospitals specializing

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in providing health services for psychiatric, mentally 1 2 retarded, and tubercular patients.

- (24) "Infirmary" means a facility located in a 3 university, college, government institution, or industry for 5 the treatment of the sick or injured, with the following 6 subdefinitions:
- "infirmary--A" provides outpatient and 7 (a) an 8 inpatient care:
- (b) an "infirmary--B" provides outpatient care only. 9

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- (25) "Joint commission on accreditation of hospitals" means the organization nationally recognized by that name with headquarters in Chicago, Illinois, that surveys health care facilities upon their requests and grants accreditation status to any health care facility that it finds meets its standards and requirements.
- (26) "Kidney treatment center" means a facility which specializes in treatment of kidney diseases, including freestanding hemodialysis units.
- (27) (a) "Long-term care facility" means a facility or part thereof which provides skilled nursing care, intermediate nursing care, or intermediate developmental 22 disability care to a total of two or more persons or 23 personal care to more than four persons who are not related 24 to the owner or administrator by blood or marriage. The 25 term does not include adult foster care licensed under

licensed under 53-20-305, community homes for physically disabled persons with severe diabilities licensed under 3 53-19-11 [section 10], youth care facilities licensed under 41-3-1142, hotels, motels, boardinghouses, roominghouses, or similar accommodations providing for transients, students, 6 7 or persons not requiring institutional health care, or

53-5-303, community homes for the developmentally disabled

juvenile and adult correctional facilities operating under

10 (b) "Skilled nursing care" means the provision of nursing care services, health-related services, and social 11 12 services under the supervision of a licensed registered nurse on a 24-hour basis. 13

the authority of the department of institutions.

- (c) "Intermediate nursing care" means the provision of 14 15 nursing care services, health-related services, and social 16 services under the supervision of a licensed nurse to 17 patients not requiring 24-hour nursing care.
- 18 (d) "Intermediate developmental disability care" means 19 the provision of nursing care services, health-related 20 services, and social services for the developmentally 21 disabled, as defined in 53-20-102(4), or persons with 22 related problems.
- 23 (e) "Personal care" means the provision of services and care which do not require nursing skills to residents 24 25 needing some assistance in performing the activities of

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- 2 (28) "Major medical equipment" means a single unit of 3 medical equipment or a single system of components with 4 related functions which is used to provide medical or other 5 health services and costs a substantial sum of money.
- 6 (29) "Medical assistance facility" means a facility 7 that:
 - (a) provides inpatient care to ili or injured persons prior to their transportation to a hospital or provides inpatient medical care to persons needing that care for a period of no longer than 96 hours; and
 - (b) either is located in a county with fewer than six residents per square mile or is located more than 35 road miles from the nearest hospital.
 - (30) "Mental health center" means a facility providing services for the prevention or diagnosis of mental illness, the care and treatment of mentally ill patients or the rehabilitation of such persons, or any combination of these services.
 - (31) "Nonprofit health care facility" means a health care facility owned or operated by one or more nonprofit corporations or associations.
- 23 (32) "Observation bed" means a bed occupied for not 24 more than 6 hours by a patient recovering from surgery or 25 other treatment.

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(33) "Offer" means the holding out by a health care 1 facility that it can provide specific health services.

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- (34) "Outpatient facility" means a facility, located in 3 or apart from a hospital, providing, under the direction of a licensed physician, either diagnosis or treatment, or both, to ambulatory patients in need of medical, surgical, or mental care. An outpatient facility may have observation beds.
 - (35) "Patient" means an individual obtaining services, including skilled nursing care, from a health care facility.
- (36) "Person" means any individual, firm, partnership, 11 association, organization, agency, institution, corporation, 12 13 trust, estate, or governmental unit, whether organized for 14 profit or not.
- (37) "Public health center" means a publicly owned 15 facility providing health services, including laboratories, 16 17 clinics, and administrative offices.
- (38) "Rehabilitation facility" means a facility which is operated for the primary purpose of assisting in the rehabilitation of disabled persons bν providing comprehensive medical evaluations and services, psychological and social services, or vocational evaluation 22 23 and training or any combination of these services and in 24 which the major portion of the services is furnished within the facility. 25

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1 (39) "Resident" means a person who is in a long-term
2 care facility for intermediate or personal care.

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- (40) "State health plan" means the plan prepared by the department to project the need for health care facilities within Montana and approved by the statewide health coordinating council and the governor.
- 7 50-5-101. (Effective July 1, 1989) Definitions. As 8 used in parts 1 through 4 of this chapter, unless the 9 context clearly indicates otherwise, the following 10 definitions apply:
 - "Accreditation" means a designation of approval.
- 12 (2) "Adult day-care center" means a facility,
 13 freestanding or connected to another health care facility,
 14 which provides adults, on an intermittent basis, with the
 15 care necessary to meet the needs of daily living.
 - (3) "Ambulatory surgical facility" means a facility, not part of a hospital, which provides surgical treatment to patients not requiring hospitalization. This type of facility may include observation beds for patient recovery from surgery or other treatment.
- 21 (4) "Board" means the board of health and 22 environmental sciences, provided for in 2-15-2104.
- 23 (5) "Chemical dependency facility" means a facility
 24 whose function is the treatment, rehabilitation, and
 25 prevention of the use of any chemical substance, including

- alcohol, which creates behavioral or health problems and endangers the health, interpersonal relationships, or economic function of an individual or the public health, welfare, or safety.
- (6) "Clinical laboratory" means a facility for the 5 microbiological, serological, chemical, hematological, 7 radiobioassay, cytological, immunohematological, pathological, or other examination of materials derived from 9 the human body for the purpose of providing information for 10 the diagnosis, prevention, or treatment of any disease or 11 assessment of a medical condition.
- 12 (7) "College of American pathologists" means the
 13 organization nationally recognized by that name with
 14 headquarters in Traverse City, Michigan, that surveys
 15 clinical laboratories upon their requests and accredits
 16 clinical laboratories that it finds meet its standards and
 17 requirements.
- 18 (8) "Department" means the department of health and
 19 environmental sciences provided for in Title 2, chapter 15,
 20 part 21.
- 21 (9) "Federal acts" means federal statutes for the 22 construction of health care facilities.
- 23 (10) "Governmental unit" means the state, a state
 24 agency, a county, municipality, or political subdivision of
 25 the state, or an agency of a political subdivision.

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(11) "Health care facility" or "facility" means any institution, building, or agency or portion thereof, private or public, excluding federal facilities, whether organized for profit or not, used, operated, or designed to provide health services. medical treatment, or nursing. rehabilitative, or preventive care to any person or persons. The term does not include offices of private physicians or dentists. The term includes but is not limited to ambulatory surgical facilities, health maintenance organizations, home health agencies, hospices, hospitals, infirmaries, kidney treatment centers, long-term care facilities, medical assistance facilities, mental health centers, outpatient facilities, public health centers, rehabilitation facilities, and adult day-care centers.

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- (12) "Health maintenance organization" means a public or private organization that provides or arranges for health care services to enrollees on a prepaid or other financial basis, either directly through provider employees or through contractual or other arrangements with a provider or group of providers.
- (13) "Home health agency" means a public agency or private organization or subdivision thereof which is engaged in providing home health services to individuals in the places where they live. Home health services must include the services of a licensed registered nurse and at least one

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- other therapeutic service and may include additional support
- (14) "Hospice" means a coordinated program of home and inpatient health care that provides or coordinates palliative and supportive care to meet the needs of a terminally ill patient and his family arising out of physical, psychological, spiritual, social, and economic stresses experienced during the final stages of illness and dying and that includes formal bereavement programs as an essential component.
- (15) "Hospital" means a facility providing, by or under the supervision of licensed physicians, services for medical diagnosis, treatment, rehabilitation, and care of injured, disabled, or sick persons. Services provided may or may not include obstetrical care, emergency care, or any other service as allowed by state licensing authority. A hospital has an organized medical staff which is on call and available within 20 minutes, 24 hours per day, 7 days per week, and provides 24-hour nursing care by licensed registered nurses. This term includes hospitals specializing in providing health services for psychiatric, mentally retarded, and tubercular patients.
- (16) "Infirmary" means a facility located in a university, college, government institution, or industry for the treatment of the sick or injured, with the following

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1 subdefinitions:

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- 2 (a) an "infirmary--A" provides outpatient and 3 inpatient care;
- (b) an "infirmary--B" provides outpatient care only.
- (17) "Joint commission on accreditation of hospitals" means the organization nationally recognized by that name with headquarters in Chicago, Illinois, that surveys health care facilities upon their requests and grants accreditation status to any health care facility that it finds meets its standards and requirements.
- 11 (18) "Kidney treatment center" means a facility which 12 specializes in treatment of kidney diseases, including 13 freestanding hemodialysis units.
- 14 (19) (a) "Long-term care facility" means a facility or 15 part thereof which provides skilled nursing care. 16 intermediate nursing care, or intermediate developmental 17 disability care to a total of two or more persons or 18 personal care to more than four persons who are not related 19 to the owner or administrator by blood or marriage. The 20 term does not include adult foster care licensed under 21 53-5-303, community homes for the developmentally disabled licensed under 53-20-305, community homes for physically 22 23 disabled persons with severe disabilities licensed under 24 53-19-111 [section 10], youth care facilities licensed under 25 41-3-1142, hotels, motels, boardinghouses, roominghouses, or

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- similar accommodations providing for transients, students, or persons not requiring institutional health care, or juvenile and adult correctional facilities operating under the authority of the department of institutions.
- 5 (b) "Skilled nursing care" means the provision of
 6 nursing care services, health-related services, and social
 7 services under the supervision of a licensed registered
 8 nurse on a 24-hour basis.
- 9 (c) "Intermediate nursing care" means the provision of
 10 nursing care services, health-related services, and social
 11 services under the supervision of a licensed nurse to
 12 patients not requiring 24-hour nursing care.
- (d) "Intermediate developmental disability care" means
 the provision of nursing care services, health-related
 services, and social services for the developmentally
 disabled, as defined in 53-20-102(4), or persons with
 related problems.
- 18 (e) "Personal care" means the provision of services
 19 and care which do not require nursing skills to residents
 20 needing some assistance in performing the activities of
 21 daily living.
- 22 (20) "Medical assistance facility" means a facility
 23 that:
- (a) provides inpatient care to ill or injured personsprior to their transportation to a hospital or provides

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inpatient medical care to persons needing that care for a period of no longer than 96 hours; and

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- (b) either is located in a county with fewer than six residents per square mile or is located more than 35 road miles from the nearest hospital.
- (21) "Mental health center" means a facility providing services for the prevention or diagnosis of mental illness, the care and treatment of mentally ill patients or the rehabilitation of such persons, or any combination of these services.
- (22) "Nonprofit health care facility" means a health care facility owned or operated by one or more nonprofit corporations or associations.
- (23) "Observation bed" means a bed occupied for not more than 6 hours by a patient recovering from surgery or other treatment.
 - (24) "Offer" means the holding out by a health care facility that it can provide specific health services.
 - (25) "Outpatient facility" means a facility, located in or apart from a hospital, providing, under the direction of a licensed physician, either diagnosis or treatment, or both, to ambulatory patients in need of medical, surgical, or mental care. An outpatient facility may have observation beds.
- 25 (26) "Patient" means an individual obtaining services,

- 1 including skilled nursing care, from a health care facility.
- (27) "Person" means any individual, firm, partnership,
 association, organization, agency, institution, corporation,
- 4 trust, estate, or governmental unit, whether organized for
- 5 profit or not.

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- (28) "Public health center" means a publicly owned
 facility providing health services, including laboratories,
 clinics, and administrative offices.
- (29) "Rehabilitation facility" means a facility which 9 is operated for the primary purpose of assisting in the 10 disabled 11 rehabilitation of persons by providing 12 comprehensive medical evaluations and services, psychological and social services, or vocational evaluation 13 and training or any combination of these services and in 14 which the major portion of the services is furnished within 15 16 the facility.
 - (30) "Resident" means a person who is in a long-term care facility for intermediate or personal care.
- 19 (31) "State health plan" means the plan prepared by the
 20 department to project the need for health care facilities
 21 within Montana and approved by the statewide health
 22 coordinating council and the governor."
- Section 14. Section 50-5-301, MCA, is amended to read:

 "50-5-301. (Temporary) When certificate of need is

 required -- definitions. (1) Unless a person has submitted

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and

an application for and is the holder of a certificate of need granted by the department, he may not initiate any of the following:

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- (a) the incurring of an obligation by or on behalf of a health care facility for any capital expenditure, other than to acquire an existing health care facility or to replace major medical equipment with equipment performing substantially the same function and in the same manner, that exceeds the expenditure thresholds established in subsection (4). The costs of any studies, surveys, designs, plans, working drawings, specifications, and other activities (including staff effort, consulting, and other services) essential to the acquisition, improvement, expansion, or replacement of any plant or equipment with respect to which an expenditure is made must be included in determining if the expenditure exceeds the expenditure thresholds.
- 17 (b) a change in the bed capacity of a health care
 18 facility through an increase in the number of beds or a
 19 relocation of beds from one health care facility or site to
 20 another, unless:
- 21 (i) the number of beds involved is 10 or less or 10%
 22 or less of the licensed beds (if fractional, rounded down to
 23 the nearest whole number), whichever figure is smaller, in
 24 any 2-year period;
- 25 (ii) a letter of intent is submitted to the department:

2 (iii) the department determines the proposal will not 3 significantly increase the cost of care provided or exceed 4 the bed need projected in the state health plan;

- 5 (c) the addition of a health service that is offered 6 by or on behalf of a health care facility which was not 7 offered by or on behalf of the facility within the 12-month 8 period before the month in which the service would be 9 offered and which will result in additional annual operating 10 and amortization expenses of \$150,000 or more:
- 11 (d) the acquisition by any person of major medical 12 equipment, provided such acquisition would have required a 13 certificate of need pursuant to subsection (1)(a) or (1)(c) 14 of this section if it had been made by or on behalf of a 15 health care facility;
- 16 (e) the incurring of an obligation for a capital 17 expenditure by any person or persons to acquire 50% or more 18 of an existing health care facility unless:
- 19 (i) the person submits the letter of intent required 20 by 50-5-302(2); and
- 21 (ii) the department finds that the acquisition will not 22 significantly increase the cost of care provided or increase 23 bed capacity;
- 24 (f) the construction, development, or other
 25 establishment of a health care facility which is being

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replaced or which did not previously exist, by any person, including another type of health care facility;

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- (g) the expansion of the geographical service area of a home health agency; or
 - (h) the use of hospital beds to provide services to patients or residents needing only skilled nursing care, intermediate nursing care, or intermediate developmental disability care, as those levels of care are defined in 50-5-101.
 - (2) For purposes of subsection (1)(b), a change in bed capacity occurs on the date new or relocated beds are licensed pursuant to part 2 of this chapter and the date a final decision is made to grant a certificate of need for new or relocated beds, unless the certificate of need expires pursuant to 50-5-305.
- 16 (3) For purposes of this part, the following 17 definitions apply:
 - (a) "Health care facility" or "facility" means a nonfederal ambulatory surgical facility, home health agency, hospital, long-term care facility, medical assistance facility, mental health center with inpatient services, inpatient chemical dependency facility, rehabilitation facility with inpatient services, or personal care facility.
- 24 (b) (i) "Long-term care facility" means an entity
 25 which provides skilled nursing care, intermediate nursing

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- care, or intermediate developmental disability care, as defined in 50-5-101, to a total of two or more persons.
- 3 (ii) The term does not include adult foster care licensed under 53-5-303; community homes for developmentally disabled licensed under 53-20-305; community homes for physically --- disabled persons with severe disabilities licensed under 53-19-111 [section 10]; boarding or foster homes for children licensed under 41-3-1142: 9 hotels, motels, boardinghouses, roominghouses, or similar 10 accommodations providing for transients, students, or persons not requiring institutional health care; or juvenile 11 and adult correctional facilities operating under the 12 authority of the department of institutions. 13
- (c) "Obligation for capital expenditure" does not include the authorization of bond sales or the offering or sale of bonds pursuant to the state long-range building program under Title 17, chapter 5, part 4, and Title 18, chapter 2, part 1.
 - (d) "Personal care facility" means an entity which provides services and care which do not require nursing skills to more than four persons who are not related to the owner or administrator by blood or marriage and who need some assistance in performing the activities of everyday living. The term does not include those entities excluded from the definition of "long-term care facility" in

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1 subsection (b).

- 2 (4) Expenditure thresholds for certificate of need
 3 review are established as follows:
- 4 (a) For acquisition of equipment and the construction 5 of any building necessary to house the equipment, the 6 expenditure threshold is \$750,000.
- 7 (b) For construction of health care facilities, the 8 expenditure threshold is \$1,500,000. (Repealed effective 9 July 1, 1989--sec. 9, Ch. 477, L. 1987.)
- 10 NEW SECTION. SECTION 15. COORDINATION REQUIREMENTS -
 11 CONSOLIDATION OF PROGRAMS AUTHORIZED. (1) THE GOVERNOR

 12 SHALL ASSURE THAT SERVICES UNDER TITLE 53, CHAPTER 19, PART

 13 1, ARE COORDINATED WITH PROGRAMS AND SERVICES IN TITLE 53,
- 14 CHAPTER 7, PARTS 1 THROUGH 3, THAT ARE ADMINISTERED BY THE
- 15 <u>DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES WITH FUNDS</u>
- PROVIDED UNDER THE FEDERAL REHABILITATION ACT OF 1973 (29
- U.S.C. 701, ET SEQ.), AS AMENDED.
- 18 (2) THE GOVERNOR MAY CONSOLIDATE SERVICES UNDER TITLE

 19 53, CHAPTER 19, PART 1, WITH OTHER PROGRAMS AND SERVICES IN
- 20 ORDER TO MAXIMIZE COORDINATION OF SERVICES AS REQUIRED IN
- 21 SUBSECTION (1) AND TO PREVENT OVERLAPPING AND DUPLICATION OF
- 22 SERVICES WITHIN STATE GOVERNMENT.
- 23 (3) THE GOVERNOR MAY TRANSFER EMPLOYEES,
- 24 APPROPRIATIONS, AND SPENDING AUTHORITY NECESSARY T
- 25 ACCOMPLISH THE COORDINATION OF SERVICES AS MANDATED BY THIS

- 1 SECTION. THE AUTHORITY CONTAINED IN THIS SUBSECTION IS
- 2 LIMITED TO THE PROGRAMS AND SERVICES DESCRIBED IN SUBSECTION
- 3 (1). THIS SUBSECTION SUPERSEDES ANY RESTRICTIONS ON THE
- 4 TRANSPER OF EMPLOYEES, APPROPRIATIONS, AND SPENDING
- 5 AUTHORITY CONTAINED IN [HOUSE BILL NO. 100].
- 6 NEW SECTION. Section 16. Repealer. Sections 53-19-111
- 7 and 53-19-113, MCA, are repealed.
- 8 NEW-SECTION. -- Section-15. -- Codification --- instructionr
- 9 {Sections-8-through-12}-are-intended-to-be--codified--as--an
- 10 integral-part-of-Title-537-chapter-207-and-the-provisions-of
- 11 Title-537-chapter-207-apply-to-fsections-8-through-12}+
- 12 NEW SECTION. SECTION 17. CODIFICATION INSTRUCTION.
- 13 [SECTIONS 8 THROUGH 12] ARE INTENDED TO BE CODIFIED AS AN
- 14 INTEGRAL PART OF TITLE 53, AND THE PROVISIONS OF TITLE 53
- 15 APPLY TO [SECTIONS 8 THROUGH 12].
- 16 <u>NEW SECTION.</u> Section 18. Extension of authority. Any
- 17 existing authority to make rules on the subject of the
- 18 provisions of [this act] is extended to the provisions of
- 19 (this act).
- 20 NEW SECTION. Section 19. Effective dates. (1)
- 21 [Section 17 16 18 and this section] are effective on passage
- 22 and approval.
- (2) [Sections 1 through $\frac{16}{25}$ $\frac{17}{17}$] are effective July
- 24 1, 1989.

-End-

-34~

-33- HB 308

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