- 1 SB151
- 2 147908-3
- 3 By Senators Whatley and Ward
- 4 RFD: Judiciary
- 5 First Read: 07-FEB-13

1	147908-3:n	:02/06/2013:FC/th LRS2013-591R1
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8	SYNOPSIS:	Under existing law, the Court of Civil
9		Appeals has ruled that a certificate of need (CON)
10		issued to a business entity not specified in the
11		law for a health care facility or health
12		maintenance organization, or issued for an
13		institutional health service, is generally not
14		transferable by sale, lease, or other transaction.
15		This bill would specify that the transfer of
16		a certificate of need by lease issued to a limited
17		liability company or other legal entity by lease,
18		sale, or other transaction involving an existing
19		health care facility, health maintenance
20		organization, or institutional health service does
21		not require a new or additional CON.
22		The bill would apply retroactively when an
23		amendment to the CON law was enacted which had
24		previously been interpreted as authorizing the
25		transfers without a new CON.
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27		A BILL

1	TO BE ENTITLED
2	AN ACT
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4	To amend Sections 22-21-260, 22-21-263, and
5	22-21-270, Code of Alabama 1975, relating to the issuance of a
6	certificates of need for health care facilities, health
7	maintenance organizations, and the institutional health
8	services; to specify that health care facilities and health
9	maintenance organizations may be organized in limited
10	liability companies and other legal entities; and to provide
11	that this act would be retroactive to July 30, 1979.
12	BE IT ENACTED BY THE LEGISLATURE OF ALABAMA:
13	Section 1. Sections 22-21-260, 22-21-263, and
14	22-21-270, Code of Alabama 1975, are amended to read as
15	follows:
16	" §22-21-260.
17	"As used in this article, the following words and
18	terms, and the plurals thereof, shall have the meanings
19	ascribed to them in this section, unless otherwise required by
20	their respective context:
21	"(1) ACQUISITION. Obtaining the legal equitable
22	title to a freehold or leasehold estate or otherwise obtaining
23	the substantial benefit of such titles or estates, whether by
24	purchase, lease, loan or suffrage, gift, devise, legacy,
25	settlement of a trust or means whatever, and shall include any
26	act of acquisition. The term "acquisition" shall not mean or
27	include any conveyance, or creation of any lien or security

interest by mortgage, deed of trust, security agreement, or similar financing instrument, nor shall it mean or include any transfer of title or rights as a result of the foreclosure, or conveyance or transfer in lieu of the foreclosure, of any such mortgage, deed of trust, security agreement, or similar financing instrument, nor shall it mean or include any gift, devise, legacy, settlement of trust, or other transfer of the legal or equitable title of an interest specified hereinabove by a natural person to any member of such person's immediate family. For the purposes of this section "immediate family" shall mean the spouse of the grantor or transferor and any other person related to the grantor or transferor to the fourth degree of kindred as such degrees are computed according to law.

- "(2) APPLICANT. Any person, as defined in this section, who files an application for a certificate of need.
- "(2.1) CAMPUS. The contiguous real property, contained within a single county, which is owned or leased by a health care facility and upon which is located the buildings and any other real property used by the health care facility to provide existing institutional health services which are subject to review.
- "(3) CAPITAL EXPENDITURE. An expenditure, including a force account expenditure (i.e., an expenditure for a construction project undertaken by the health care facility as its own contractor), which, under generally accepted accounting principles, is not properly chargeable as an

expense of operation and maintenance and which satisfies any of the following:

"a. Exceeds two million dollars (\$2,000,000) indexed annually for inflation for major medical equipment; eight hundred thousand dollars (\$800,000) for new annual operating costs indexed annually for inflation; four million dollars (\$4,000,000) indexed annually for inflation for any other capital expenditure. The index referenced in this paragraph shall be the Consumer Price Index Market Basket Professional Medical Services index as published by the U.S. Department of Labor, Bureau of Labor Statistics. The SHPDA shall publish this index information to the general public.

"b. Changes the bed capacity of the facility with respect to which such expenditure is made.

"c. Substantially changes the health services of the facility with respect to which such expenditure is made.

- "(4) CONSTRUCTION. Actual commencement, with bona fide intention of completing the construction, or completion of the construction, erection, remodeling, relocation, excavation, or fabrication of any real property constituting a facility under this article, and the term construct shall mean and include any act of construction. "Ground breaking ceremony," "receipt of bids," "receipt of quotation," or similar action that will permit unilateral termination without penalty shall not be considered construction.
- "(5) FIRM COMMITMENT or OBLIGATION. Any of the following:

"a. Any executed, enforceable, unconditional written
agreement or contract not subject to unilateral cancellation
for the acquisition or construction of a health care facility
or purchase of equipment therefor.

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"b. Actual construction of facilities peculiarly adapted to the furnishing of one or more particular services and with the bona fide intention of furnishing such service or services.

"c. Any executed, unconditional written agreement not subject to unilateral cancellation for the bona fide purpose of furnishing one or more services.

"(6) HEALTH CARE FACILITY. General and specialized hospitals, including tuberculosis, psychiatric, long-term care, and other types of hospitals, and related facilities such as, laboratories, out-patient clinics, and central service facilities operated in connection with hospitals; skilled nursing facilities; intermediate care facilities; skilled or intermediate care units operated in veterans' nursing homes and veterans' homes, owned or operated by the State Department of Veterans' Affairs, as these terms are described in Chapter 5A (commencing with Section 31-5A-1) of Title 31, rehabilitation centers; public health centers; facilities for surgical treatment of patients not requiring hospitalization; kidney disease treatment centers, including free-standing hemodialysis units; community mental health centers and related facilities; alcohol and drug abuse facilities; facilities for the developmentally disabled;

1 hospice service providers; and home health agencies and health 2 maintenance organizations. The term health care facility shall not include the offices of private physicians or dentists, 3 whether for individual or group practices and regardless of ownership, or Christian Science sanatoriums operated or listed 5 6 and certified by the First Church of Christ, Scientist, 7 Boston, Massachusetts, or a veterans' nursing home or veterans' home owned or operated by the State Department of 8 Veterans' Affairs, not to exceed 150 beds to be built in Bay 9 10 Minette, Alabama, and a veterans' nursing home or veterans' home owned or operated by the State Department of Veterans' 11 12 Affairs not to exceed 150 beds to be built in Huntsville, 13 Alabama, for which applications for federal funds under 14 federal law are being considered by the U.S. Department of Veterans' Affairs prior to March 18, 1993. 15

"(7) HEALTH SERVICE AREA. A geographical area designated by the Governor, as being appropriate for effective planning and development of health services.

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"(8) HEALTH SERVICES. Clinically related (i.e., diagnostic, curative, or rehabilitative) services, including alcohol, drug abuse, and mental health services customarily furnished on either an in-patient or out-patient basis by health care facilities, but not including the lawful practice of any profession or vocation conducted independently of a health care facility and in accordance with applicable licensing laws of this state.

"(9) INSTITUTIONAL HEALTH SERVICES. Health services provided in or through health care facilities or health maintenance organizations, including the entities in or through which such services are provided.

- "(9.1) MAJOR MEDICAL EQUIPMENT. Medical clinical equipment intended for use in the diagnosis or treatment of medical conditions, which is used to provide institutional health services of a health care facility which are subject to review, and which expenditure exceeds the thresholds referenced in this section and in Section 22-21-263.
- "(10) MODERNIZATION. The alteration, repair, remodeling, and renovation of existing buildings, including equipment within the existing buildings. Modernization does not include the replacement of existing buildings which are used by a health care facility to provide institutional health services which are subject to review and does not include the replacement of major medical equipment.
- "(11) PERSON. Any person, firm, partnership, association, joint venture, or corporation, limited liability company, or other legal entity, the State of Alabama and its political subdivisions or parts thereof, and any agencies or instrumentalities and any combination of persons herein specified, but person shall not include the United States or any agency or instrumentality thereof, except in the case of voluntary submission to the regulations established by this article.

"(12) RURAL HEALTH CARE PROVIDER/APPLICANT/HOSPITAL.

A provider or applicant or hospital which is designated by the

United States government Health Care Financing Administration

as rural.

"(13) STATE HEALTH PLAN. A comprehensive plan which is prepared triennially and reviewed at least annually and revised as necessary by the Statewide Health Coordinating Council, with the assistance of the State Health Planning and Development Agency, and approved by the Governor.

"The Statewide Health Coordinating Council shall meet at least annually to determine whether revisions for the State Health Plan are necessary. If the Statewide Health Coordinating Council fails to meet and to review or revise the State Health Plan on an annual basis, there shall be no fees required on all certificate of need applications filed with the Certificate of Need Review Board until the Statewide Health Coordinating Council meets and reviews or revises the State Health Plan. For purposes of this paragraph, the annual meeting of the Statewide Health Coordinating Council shall occur on or before August 1 of each calendar year.

"The State Health Plan shall provide for the development of health programs and resources to assure that quality health services will be available and accessible in a manner which assures continuity of care, at reasonable costs, for all residents of the state. Nothing in this section should be construed as permitting expenditures for facilities,

services, or equipment which are inconsistent with the State

Health Plan.

"(14) STATE HEALTH PLANNING AND DEVELOPMENT AGENCY (SHPDA). An agency of the State of Alabama which is designated by the Governor as the sole State Health Planning and Development Agency, which shall consist of three consumers, three providers, and three representatives of the Governor who all shall serve staggered terms and all be appointed by the Governor. Where used in this article, the terms, "state agency," and the "SHPDA," shall be synonymous and may be used interchangeably.

"(15) STATEWIDE HEALTH COORDINATING COUNCIL. A council, appointed by the Governor, established pursuant to Sections 22-4-7 and 22-4-8 to advise the State Health Planning and Development Agency on matters relating to health planning and resource development and to perform other functions as may be delegated to it, to include an annual review of the State Health Plan.

"(16) TO OFFER. When used in connection with health services, a health care facility or health maintenance organization that holds itself out as capable of providing, or as having the means for the provision of, specified health services.

"§22-21-263.

"(a) All new institutional health services which are subject to this article and which are proposed to be offered or developed within the state shall be subject to review under

this article. No institutional health services which are
subject to this article shall be permitted which are
inconsistent with the State Health Plan. For the purposes of
this article, new institutional health services shall include
any of the following:

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"(1) The construction, development, acquisition through lease or purchase, or other establishment of a new health care facility or health maintenance organization. A transaction involving the sale, lease, or other transfer or change of control of an existing health care facility, existing health maintenance organization, or existing institutional health service is not subject to certificate of need review or approval under this article unless the transaction also involves implementing one or more of the new institutional health services described in subdivision (2), (3), or (4). The two immediately preceding sentences are applicable to all transactions occurring on or after July 30, 1979. Notwithstanding anything to the contrary in this article, expenditures incurred in the sale, lease, or other transfer of an existing health care facility or existing health maintenance organization or existing institutional health service shall not be subject to subdivision (2).

"(2) Any expenditure by or on behalf of a health care facility or health maintenance organization which, under generally accepted accounting principles consistently applied, is a capital expenditure in excess of two million dollars (\$2,000,000) indexed annually for inflation for major medical

1 equipment; in excess of eight hundred thousand dollars 2 (\$800,000) for new annual operating costs indexed annually for inflation; in excess of four million dollars (\$4,000,000) 3 indexed annually for inflation for any other capital expenditure by or on behalf of a health care facility or a 5 health maintenance organization. The index referenced in this 6 7 subdivision shall be the Consumer Price Index Market Basket Professional Medical Services index as published by the U.S. 8 Department of Labor, Bureau of Labor Statistics. The SHPDA 9 10 shall publish this index information to the general public.

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"(3) A change in the existing bed capacity of a health care facility or health maintenance organization through the addition of new beds, the relocation of one or more beds from one physical facility to another, or reallocation among services of existing beds through the conversion of one or more beds from one category to another within the following bed categories: general medical surgical, inpatient psychiatric, inpatient/residential alcohol and drug abuse or inpatient rehabilitation beds, or long-term care beds including skilled nursing care, intermediate care, transitional care, and swing beds. Notwithstanding any provision of this subdivision to the contrary, any health care facility or health maintenance organization in which at least 65 percent of the beds are dedicated or used exclusively for acute care services, general medical surgical, or nonspecialized services may reallocate existing beds within the following specialized bed categories: inpatient

psychiatric, inpatient/residential alcohol and drug
rehabilitation beds, to acute care services, or general
medical surgical beds without first obtaining a certificate of
need from the SHPDA.

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"(4) Health services proposed to be offered in or through a health care facility or health maintenance organization, and which were not offered on a regular basis in or through such health care facility or health maintenance organization within the 12 month period prior to the time such services would be offered. Health services, other than those health services involving long-term care services, including without limitation, skilled and intermediate nursing home care, swing beds services, or transitional care services, provided directly by acute care hospitals classified as rural by the U.S. Bureau of Census/Office of Management and Budget, United States government Health Care Financing Administration or acute care hospitals with less than 105 beds that are located over 20 miles from the nearest acute health care facility located within Alabama shall not be subject to this subdivision but shall be subject to the other subdivisions of this subsection. Provided, however, that the exemption from this subdivision herein established shall not apply to home health services provided outside of the county in which the hospital is located.

"(b) The four conditions of new institutional health services listed in this section shall be mutually exclusive.

"(c) Notwithstanding all other provisions of this article to the contrary, those facilities and distinct units operated by the Department of Mental Health and Mental Retardation and those facilities and distinct units operating under contract or subcontract with the Department of Mental Health and Mental Retardation where the contract constitutes the primary source of income to the facility shall not be subject to review under this article.

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"(d) For the purposes of this article, and notwithstanding all other provisions of this article to the contrary and notwithstanding any and all provisions of the State Health Plan on September 1, 2003, relating to lithotripsy, magnetic resonance imaging, and positron emission tomography, new institutional health services, which are subject to this article, shall not include any health services provided by a mobile or fixed-based extracorporeal shock wave lithotripter, mobile or fixed-based magnetic resonance imaging, or positron emission tomography proposed to be offered in or through a health care facility or health maintenance organization. The SHPDA, after consultation with and the advice of the Statewide Health Coordinating Council, in accordance with the Alabama Administrative Procedure Act and within 60 days of September 1, 2003, shall cause the State Health Plan to be amended to repeal and delete all sections of the Alabama State Health Plan relating to mobile and fixed-based lithotripters, mobile and fixed-based magnetic resonance imaging, and positron emission tomography, and cause

the amendment and repeal of any other SHPDA rules and regulations inconsistent with this article.

"\$22-21-270.

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"(a) A certificate of need issued under subsection (a) of Section 22-21-265 and Section 22-21-268 shall be valid for a period not to exceed 12 months and may be subject to one extension not to exceed 12 months, provided the criteria for extension as set forth in the rules and regulations of the SHPDA are met. Applications for an extension filed under this section shall be accompanied by a filing fee to be established by rule, not to exceed 25 percent of the original CON application fee. If no obligation has occurred within such period, the certificate of need shall be considered terminated and shall be null and void. Should the obligation be incurred within such valid period, the certificate of need shall be continued in effect for a period not to exceed one year or the completion of the construction project, whichever shall be later, or the inauguration of the service or the actual purchase of equipment.

"(b) Failure to commence the construction project within the time period stated in the construction contract or to complete the construction project within the time period specified in the construction contract, which may be extended by mutual agreement of the parties to the contract, shall render the certificate of need null and void, unless tolled or extended pursuant to statute or SHPDA rule or regulation.

Provided, the SHPDA, or an administrative law judge appointed

by the Governor on appeal for a fair hearing, may for causes beyond the control of the applicant, continue the certificate of need in force if commencement of the construction project is delayed for a period not to exceed 60 days or if during the specified construction period the construction work should cease for not more than six months, or in the event of default in the construction contract by the contractor, or if, for any cause, the construction work has not ceased or otherwise been stopped for a period exceeding 60 consecutive days.

- "(c) Applicants who held valid certificates of need which were terminated under this section may file a new application for a certificate pursuant to and subject to the provisions of this article.
- "(d) Upon completion of the construction and issuance of a certificate of completion or the receipt of proof of purchase of equipment or inauguration of a new health service, the certificate of need shall be vested in and continued in force and effect as a part of the health care facility and shall survive changes of control and changes of ownership of the health care facility without further certificate of need approval by this agency.
- "(e) A Prior to becoming vested under subsection

 (d), a certificate of need shall not be transferable,

 assignable, or convertible other than between members of a

 parent-subsidiary controlled corporate group as defined in

 Internal Revenue Code, 26 U.S.C. \$1563 (a)(1), and shall be

 valid solely to the person and purpose named thereon, except

name or merger with another corporation to an entity under common ownership and control. As used in this subsection only, "ownership and control" means ownership, directly or through one or more affiliates, of 50 percent or more of the shares of stock entitled to vote for the election of directors, in the case of a corporation, or 50 percent or more of the voting equity interests in the case of any other type of legal entity, or status as a general partner in any partnership, or any other arrangement whereby an entity including, without limitation, any governmental entity, controls has the right to control the selection of 50 percent or more of the board of directors, managing members, or equivalent governing body of a legal entity. An "affiliate" under the preceding sentence means any corporation, limited liability company, partnership, or other legal entity that directly or indirectly controls or is controlled by or is under common control with such entity. Any agreement entered into by an applicant, prior to the issuance of a certificate of need, to transfer ownership or control of such health care facility to another person after the certificate becomes vested shall be disclosed to SHPDA prior to a decision by the Certificate of Need Review Board to grant or deny such certificate. "(f) The Notwithstanding any other provisions of

to such other member of the controlled group, or by change of

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"(f) The Notwithstanding any other provisions of this article, the transfer of stock equity interests in, or change of name or merger of, a corporation any legal entity which holds a certificate of need shall not constitute a

1	transfer, assignment, or conversion of the certificate <u>of</u>
2	need. The transaction is not subject to certificate of need
3	approval under this article unless the transaction also
4	involves implementing one or more of the new institutional
5	health services or a new health care facility or health
6	maintenance organization described in subdivisions (2), (3),
7	or (4) of Section 22-21-263(a). The preceding sentence is
8	applicable to all transactions occurring on or after July 30,
9	<u>1979</u> .
10	"(q) SHPDA may adopt rules requiring the submission
11	of informational filings relating to a transfer of control or
12	ownership interests under subsections (d), (e), and (f).
13	"(h) The provisions of this section are applicable
14	to all transactions occurring on or after July 30, 1979.
15	Section 2. This act shall become effective
16	immediately following its passage and approval by the
17	Governor, or its otherwise becoming law.