

## Senate Bill No. 2011

### CHAPTER 413

An act to amend Sections 1339.32, 1339.33, 1339.34, and 1339.35 of, and to repeal Section 1339.37 of, the Health and Safety Code, relating to health.

[Approved by Governor August 17, 1996. Filed with Secretary of State August 19, 1996.]

#### LEGISLATIVE COUNSEL'S DIGEST

SB 2011, Killea. Hospice pilot project.

Existing law creates a Special Hospital: Hospice Pilot Project to be established and administered by the State Department of Health Services to determine the need of hospice patients for acute inpatient hospital care. Existing law repeals these provisions on January 1, 1997, except for certain reporting requirements that are repealed on January 1, 1998.

This bill would delete these repeal dates and delete the reference to "pilot" within those provisions.

*The people of the State of California do enact as follows:*

SECTION 1. Section 1339.32 of the Health and Safety Code is amended to read:

1339.32. A special hospital: hospice shall be deemed to provide acute palliative care. All patients receiving inpatient care in a Special Hospital: Hospice Project shall be admitted by, and under the supervision of, a physician member of the organized medical staff.

SEC. 2. Section 1339.33 of the Health and Safety Code is amended to read:

1339.33. Notwithstanding any other provisions of law, in order to be licensed as a special hospital: hospice, each project facility shall meet the requirements of Sections 70101 to 70137, inclusive, 70201 to 70219, inclusive, 70241 to 70279, inclusive, 70701 to 70707, inclusive, and 70708 to 70765, inclusive, of Title 22 of the California Code of Regulations; Sections 2-1001A to 2-1015A, inclusive, Section 2-1018A, Sections 2-1020A to 2-1024A, inclusive, Sections 2-1026A to 2-1028A, inclusive, Section 2-1040A, Section 2-1044A, and Section 2-1051A of Title 24 of the California Code of Regulations. In addition to complying with these regulations in Titles 22 and 24 of the California Code of Regulations, each facility shall meet, for the duration of the project, the hospice standards used by the Medicare program (42 C.F.R., Part 418, Sections 418.1 to 418.405, inclusive) the Medi-Cal program (subdivision (e) of Sections 51003 to 51543, inclusive, of Title

22, California Code of Regulations), and the Joint Commission on the Accreditation of Healthcare Organizations' "Hospice Standards Manual."

Each facility licensed as a special hospital: hospice shall maintain a transfer agreement with a general acute care hospital.

SEC. 3. Section 1339.34 of the Health and Safety Code is amended to read:

1339.34. (a) Each facility that is part of the project shall report to the Legislature at the end of each year of operation on all of the following factors:

- (1) Acuity levels of patients using the project facilities; relative cost-effectiveness of these facilities.
- (2) Quality of care in the facilities.
- (3) Utilization of the facilities.
- (4) Staffing requirements of the facilities.

(b) Reports shall be submitted to the Legislature no later than three months after the close of the 12-month period for which the report is made. However, the Legislature may approve requests to extend this deadline that are submitted no later than 30 days prior to the deadline and that state the reason for the delay and corrective measures that have been taken to avoid future delays. No report deadline will be extended for more than three months beyond the original report date.

SEC. 4. Section 1339.35 of the Health and Safety Code is amended to read:

1339.35. The project shall commence on January 1, 1990. However, the State Department of Health Services may establish an earlier commencement date for any one of the facilities if that facility has been licensed as a special hospital: hospice prior to January 1, 1990.

SEC. 5. Section 1339.37 of the Health and Safety Code is repealed.

