

Introduced by Senator Price

February 18, 2011

An act to amend Section 1250 of the Health and Safety Code, relating to health facilities.

LEGISLATIVE COUNSEL'S DIGEST

SB 844, as introduced, Price. Health facilities: general acute care hospitals.

Existing law provides for the licensure and regulation of health facilities, including general acute care hospitals, by the State Department of Public Health. A violation of these provisions is a crime. Existing law defines a general acute care hospital as a health facility having a duly constituted governing body with overall administrative and professional responsibility and an organized medical staff that provides 24-hour inpatient care, including the following basic services: medical, nursing, surgical, anesthesia, laboratory, radiology, pharmacy, and dietary services.

This bill would provide that, for the purposes of licensing, dietary services may be provided either at the hospital or in another hospital immediately adjacent to the hospital as long as dedicated facilities are in place to accommodate the delivery of these services. By expanding the definition of a crime, this bill imposes a state-mandated local program.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: yes.

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

1 SECTION 1. Section 1250 of the Health and Safety Code is
2 amended to read:
3 1250. As used in this chapter, “health facility” means any
4 facility, place, or building that is organized, maintained, and
5 operated for the diagnosis, care, prevention, and treatment of
6 human illness, physical or mental, including convalescence and
7 rehabilitation and including care during and after pregnancy, or
8 for any one or more of these purposes, for one or more persons,
9 to which the persons are admitted for a 24-hour stay or longer, and
10 includes the following types:
11 (a) “General acute care hospital” means a health facility having
12 a duly constituted governing body with overall administrative and
13 professional responsibility and an organized medical staff that
14 provides 24-hour inpatient care, including the following basic
15 services: medical, nursing, surgical, anesthesia, laboratory,
16 radiology, pharmacy, and dietary services. *For the purposes of*
17 *this chapter, dietary services may be provided either at the hospital*
18 *or in another hospital immediately adjacent to the hospital as long*
19 *as dedicated facilities are in place to accommodate the delivery*
20 *of these services.* A general acute care hospital may include more
21 than one physical plant maintained and operated on separate
22 premises as provided in Section 1250.8. A general acute care
23 hospital that exclusively provides acute medical rehabilitation
24 center services, including at least physical therapy, occupational
25 therapy, and speech therapy, may provide for the required surgical
26 and anesthesia services through a contract with another acute care
27 hospital. In addition, a general acute care hospital that, on July 1,
28 1983, provided required surgical and anesthesia services through
29 a contract or agreement with another acute care hospital may
30 continue to provide these surgical and anesthesia services through
31 a contract or agreement with an acute care hospital. The general
32 acute care hospital operated by the State Department of
33 Developmental Services at Agnews Developmental Center may,
34 until June 30, 2007, provide surgery and anesthesia services
35 through a contract or agreement with another acute care hospital.

Notwithstanding the requirements of this subdivision, a general acute care hospital operated by the Department of Corrections and Rehabilitation or the Department of Veterans Affairs may provide surgery and anesthesia services during normal weekday working hours, and not provide these services during other hours of the weekday or on weekends or holidays, if the general acute care hospital otherwise meets the requirements of this section.

A “general acute care hospital” includes a “rural general acute care hospital.” However, a “rural general acute care hospital” shall not be required by the department to provide surgery and anesthesia services. A “rural general acute care hospital” shall meet either of the following conditions:

(1) The hospital meets criteria for designation within peer group six or eight, as defined in the report entitled Hospital Peer Grouping for Efficiency Comparison, dated December 20, 1982.

(2) The hospital meets the criteria for designation within peer group five or seven, as defined in the report entitled Hospital Peer Grouping for Efficiency Comparison, dated December 20, 1982, and has no more than 76 acute care beds and is located in a census dwelling place of 15,000 or less population according to the 1980 federal census.

(b) “Acute psychiatric hospital” means a health facility having a duly constituted governing body with overall administrative and professional responsibility and an organized medical staff that provides 24-hour inpatient care for mentally disordered, incompetent, or other patients referred to in Division 5 (commencing with Section 5000) or Division 6 (commencing with Section 6000) of the Welfare and Institutions Code, including the following basic services: medical, nursing, rehabilitative, pharmacy, and dietary services.

(c) “Skilled nursing facility” means a health facility that provides skilled nursing care and supportive care to patients whose primary need is for availability of skilled nursing care on an extended basis.

(d) “Intermediate care facility” means a health facility that provides inpatient care to ambulatory or nonambulatory patients who have recurring need for skilled nursing supervision and need supportive care, but who do not require availability of continuous skilled nursing care.

(e) “Intermediate care facility/developmentally disabled habilitative” means a facility with a capacity of 4 to 15 beds that

1 provides 24-hour personal care, habilitation, developmental, and
2 supportive health services to 15 or fewer persons with
3 developmental disabilities who have intermittent recurring needs
4 for nursing services, but have been certified by a physician and
5 surgeon as not requiring availability of continuous skilled nursing
6 care.

7 (f) “Special hospital” means a health facility having a duly
8 constituted governing body with overall administrative and
9 professional responsibility and an organized medical or dental staff
10 that provides inpatient or outpatient care in dentistry or maternity.

11 (g) “Intermediate care facility/developmentally disabled” means
12 a facility that provides 24-hour personal care, habilitation,
13 developmental, and supportive health services to persons with
14 developmental disabilities whose primary need is for
15 developmental services and who have a recurring but intermittent
16 need for skilled nursing services.

17 (h) “Intermediate care facility/developmentally
18 disabled-nursing” means a facility with a capacity of 4 to 15 beds
19 that provides 24-hour personal care, developmental services, and
20 nursing supervision for persons with developmental disabilities
21 who have intermittent recurring needs for skilled nursing care but
22 have been certified by a physician and surgeon as not requiring
23 continuous skilled nursing care. The facility shall serve medically
24 fragile persons with developmental disabilities or who demonstrate
25 significant developmental delay that may lead to a developmental
26 disability if not treated.

27 (i) (1) “Congregate living health facility” means a residential
28 home with a capacity, except as provided in paragraph (4), of no
29 more than 12 beds, that provides inpatient care, including the
30 following basic services: medical supervision, 24-hour skilled
31 nursing and supportive care, pharmacy, dietary, social, recreational,
32 and at least one type of service specified in paragraph (2). The
33 primary need of congregate living health facility residents shall
34 be for availability of skilled nursing care on a recurring,
35 intermittent, extended, or continuous basis. This care is generally
36 less intense than that provided in general acute care hospitals but
37 more intense than that provided in skilled nursing facilities.

38 (2) Congregate living health facilities shall provide one of the
39 following services:

1 (A) Services for persons who are mentally alert, persons with
2 physical disabilities, who may be ventilator dependent.

3 (B) Services for persons who have a diagnosis of terminal
4 illness, a diagnosis of a life-threatening illness, or both. Terminal
5 illness means the individual has a life expectancy of six months
6 or less as stated in writing by his or her attending physician and
7 surgeon. A “life-threatening illness” means the individual has an
8 illness that can lead to a possibility of a termination of life within
9 five years or less as stated in writing by his or her attending
10 physician and surgeon.

11 (C) Services for persons who are catastrophically and severely
12 disabled. A person who is catastrophically and severely disabled
13 means a person whose origin of disability was acquired through
14 trauma or nondegenerative neurologic illness, for whom it has
15 been determined that active rehabilitation would be beneficial and
16 to whom these services are being provided. Services offered by a
17 congregate living health facility to a person who is catastrophically
18 disabled shall include, but not be limited to, speech, physical, and
19 occupational therapy.

20 (3) A congregate living health facility license shall specify which
21 of the types of persons described in paragraph (2) to whom a
22 facility is licensed to provide services.

23 (4) (A) A facility operated by a city and county for the purposes
24 of delivering services under this section may have a capacity of
25 59 beds.

26 (B) A congregate living health facility not operated by a city
27 and county servicing persons who are terminally ill, persons who
28 have been diagnosed with a life-threatening illness, or both, that
29 is located in a county with a population of 500,000 or more persons
30 may have not more than 25 beds for the purpose of serving persons
31 who are terminally ill.

32 (C) A congregate living health facility not operated by a city
33 and county serving persons who are catastrophically and severely
34 disabled, as defined in subparagraph (C) of paragraph (2) that is
35 located in a county of 500,000 or more persons may have not more
36 than 12 beds for the purpose of serving persons who are
37 catastrophically and severely disabled.

38 (5) A congregate living health facility shall have a
39 noninstitutional, homelike environment.

(j) (1) “Correctional treatment center” means a health facility operated by the Department of Corrections and Rehabilitation, the Department of Corrections and Rehabilitation, Division of Juvenile Facilities, or a county, city, or city and county law enforcement agency that, as determined by the state department, provides inpatient health services to that portion of the inmate population who do not require a general acute care level of basic services. This definition shall not apply to those areas of a law enforcement facility that houses inmates or wards that may be receiving outpatient services and are housed separately for reasons of improved access to health care, security, and protection. The health services provided by a correctional treatment center shall include, but are not limited to, all of the following basic services: physician and surgeon, psychiatrist, psychologist, nursing, pharmacy, and dietary. A correctional treatment center may provide the following services: laboratory, radiology, perinatal, and any other services approved by the state department.

(2) Outpatient surgical care with anesthesia may be provided, if the correctional treatment center meets the same requirements as a surgical clinic licensed pursuant to Section 1204, with the exception of the requirement that patients remain less than 24 hours.

(3) Correctional treatment centers shall maintain written service agreements with general acute care hospitals to provide for those inmate physical health needs that cannot be met by the correctional treatment center.

(4) Physician and surgeon services shall be readily available in a correctional treatment center on a 24-hour basis.

(5) It is not the intent of the Legislature to have a correctional treatment center supplant the general acute care hospitals at the California Medical Facility, the California Men’s Colony, and the California Institution for Men. This subdivision shall not be construed to prohibit the Department of Corrections and Rehabilitation from obtaining a correctional treatment center license at these sites.

(k) “Nursing facility” means a health facility licensed pursuant to this chapter that is certified to participate as a provider of care either as a skilled nursing facility in the federal Medicare Program under Title XVIII of the federal Social Security Act or as a nursing

1 facility in the federal Medicaid Program under Title XIX of the
2 federal Social Security Act, or as both.

3 (l) Regulations defining a correctional treatment center described
4 in subdivision (j) that is operated by a county, city, or city and
5 county, the Department of Corrections and Rehabilitation, or the
6 Department of Corrections and Rehabilitation, Division of Juvenile
7 Facilities, shall not become effective prior to, or if effective, shall
8 be inoperative until January 1, 1996, and until that time these
9 correctional facilities are exempt from any licensing requirements.

10 (m) “Intermediate care facility/developmentally
11 disabled-continuous nursing (ICF/DD-CN)” means a homelike
12 facility with a capacity of four to eight, inclusive, beds that
13 provides 24-hour personal care, developmental services, and
14 nursing supervision for persons with developmental disabilities
15 who have continuous needs for skilled nursing care and have been
16 certified by a physician and surgeon as warranting continuous
17 skilled nursing care. The facility shall serve medically fragile
18 persons who have developmental disabilities or demonstrate
19 significant developmental delay that may lead to a developmental
20 disability if not treated. ICF/DD-CN facilities shall be subject to
21 licensure under this chapter upon adoption of licensing regulations
22 in accordance with Section 1275.3. A facility providing continuous
23 skilled nursing services to persons with developmental disabilities
24 pursuant to Section 14132.20 or 14495.10 of the Welfare and
25 Institutions Code shall apply for licensure under this subdivision
26 within 90 days after the regulations become effective, and may
27 continue to operate pursuant to those sections until its licensure
28 application is either approved or denied.

29 SEC. 2. No reimbursement is required by this act pursuant to
30 Section 6 of Article XIII B of the California Constitution because
31 the only costs that may be incurred by a local agency or school
32 district will be incurred because this act creates a new crime or
33 infraction, eliminates a crime or infraction, or changes the penalty
34 for a crime or infraction, within the meaning of Section 17556 of
35 the Government Code, or changes the definition of a crime within
36 the meaning of Section 6 of Article XIII B of the California
37 Constitution.