HOUSE BILL 1586

State of Washington 52nd Legislature 1991 Regular Session

By Representatives D. Sommers, Prentice, Moyer, Paris, Braddock and Franklin.

Read first time February 4, 1991. Referred to Committee on Health Care.

- 1 AN ACT Relating to continuing care retirement communities; and
- 2 amending RCW 70.38.025 and 70.38.111.
- 3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 4 **Sec. 1.** RCW 70.38.025 and 1989 1st ex.s. c 9 s 602 are each
- 5 amended to read as follows:
- 6 When used in this chapter, the terms defined in this section shall
- 7 have the meanings indicated.
- 8 (1) "Board of health" means the state board of health created
- 9 pursuant to chapter 43.20 RCW.
- 10 (2) "Capital expenditure" is an expenditure, including a force
- 11 account expenditure (i.e., an expenditure for a construction project
- 12 undertaken by a nursing home facility as its own contractor) which,
- 13 under generally accepted accounting principles, is not properly
- 14 chargeable as an expense of operation or maintenance. Where a person
- 15 makes an acquisition under lease or comparable arrangement, or through

- 1 donation, which would have required review if the acquisition had been
- 2 made by purchase, such expenditure shall be deemed a capital
- 3 expenditure. Capital expenditures include donations of equipment or
- 4 facilities to a nursing home facility which if acquired directly by
- 5 such facility would be subject to certificate of need review under the
- 6 provisions of this chapter and transfer of equipment or facilities for
- 7 less than fair market value if a transfer of the equipment or
- 8 facilities at fair market value would be subject to such review. The
- 9 cost of any studies, surveys, designs, plans, working drawings,
- 10 specifications, and other activities essential to the acquisition,
- 11 improvement, expansion, or replacement of any plant or equipment with
- 12 respect to which such expenditure is made shall be included in
- 13 determining the amount of the expenditure.
- 14 (3) "Continuing care retirement community" means an entity which
- 15 provides shelter and services under continuing care contracts with its
- 16 members and which sponsors or includes a health care facility or a
- 17 health service. A "continuing care contract" means a contract to
- 18 provide a person, for the duration of that person's life or for a term
- 19 in excess of one year, shelter along with nursing, medical, health-
- 20 related, or personal care services, which is conditioned upon the
- 21 transfer of property, the payment of an entrance fee to the provider of
- 22 such services, or the payment of periodic charges for the care and
- 23 services involved. A continuing care contract is not excluded from
- 24 this definition because the contract is mutually terminable or because
- 25 shelter and services are not provided at the same location.
- 26 (4) "Department" means the department of health.
- 27 (5) "Expenditure minimum" means, for the purposes of the
- 28 certificate of need program, one million dollars adjusted by the
- 29 department by rule to reflect changes in the United States department

of commerce composite construction cost index; or a lesser amount required by federal law and established by the department by rule.

(6) "Health care facility" means hospices, hospitals, psychiatric 3 4 hospitals, nursing homes, kidney disease treatment centers, ambulatory 5 surgical facilities, ((continuing care retirement communities,)) 6 rehabilitation facilities, and home health agencies, and includes such facilities when owned and operated by a political subdivision or 7 instrumentality of the state and such other facilities as required by 8 9 federal law and implementing regulations, but does not include 10 Christian Science sanatoriums operated, listed, or certified by the First Church of Christ Scientist, Boston, Massachusetts. In addition, 11 12 the term does not include any nonprofit hospital: (a) Which is operated exclusively to provide health care services for children; (b) which 13 14 does not charge fees for such services; and (c) if not contrary to federal law as necessary to the receipt of federal funds by the state. 15 16 ((In addition, the term does not include a continuing care retirement 17 community which: (i) Offers services only to contractual members; and 18 (ii) provides its members a contractually guaranteed range of services 19 from independent living through skilled nursing, including some form of 20 assistance with activities of daily living; and (iii) contractually assumes responsibility for costs of services exceeding the member's 21 22 financial responsibility as stated in contract, so that, with the exception of insurance purchased by the retirement community or its 23 24 members, no third party, including the medicaid program, is liable for 25 costs of care even if the member depletes his or her personal resources; and (iv) has offered continuing care contracts and operated 26 a nursing home continuously since January 1, 1988, or has obtained a 27 28 certificate of need to establish a nursing home; and (v) maintains a 29 binding agreement with the department of social and health services assuring that financial liability for services to members, including 30

- 1 nursing home services, shall not fall upon the department of social and
- 2 health services; and (vi) does not operate, and has not undertaken, a
- 3 project which would result in a number of nursing home beds in excess
- 4 of one for every four living units operated by the continuing care
- 5 retirement community, exclusive of nursing home beds; and (vii) has
- 6 undertaken no increase in the total number of nursing home beds after
- 7 January 1, 1988, unless a professional review of pricing and long-term
- 8 solvency was obtained by the retirement community within the prior five
- 9 years and fully disclosed to members.))
- 10 (7) "Health maintenance organization" means a public or private
- 11 organization, organized under the laws of the state, which:
- 12 (a) Is a qualified health maintenance organization under Title
- 13 XIII, section 1310(d) of the Public Health Services Act; or
- 14 (b)(i) Provides or otherwise makes available to enrolled
- 15 participants health care services, including at least the following
- 16 basic health care services: Usual physician services, hospitalization,
- 17 laboratory, x-ray, emergency, and preventive services, and out-of-area
- 18 coverage; (ii) is compensated (except for copayments) for the
- 19 provision of the basic health care services listed in (b)(i) to
- 20 enrolled participants by a payment which is paid on a periodic basis
- 21 without regard to the date the health care services are provided and
- 22 which is fixed without regard to the frequency, extent, or kind of
- 23 health service actually provided; and (iii) provides physicians'
- 24 services primarily (A) directly through physicians who are either
- 25 employees or partners of such organization, or (B) through arrangements
- 26 with individual physicians or one or more groups of physicians
- 27 (organized on a group practice or individual practice basis).
- 28 (8) "Health services" means clinically related (i.e., preventive,
- 29 diagnostic, curative, rehabilitative, or palliative) services and

- 1 includes alcoholism, drug abuse, and mental health services and as
- 2 defined in federal law.
- 3 (9) "Health service area" means a geographic region appropriate for
- 4 effective health planning which includes a broad range of health
- 5 services.
- 6 (10) "Person" means an individual, a trust or estate, a
- 7 partnership, a corporation (including associations, joint stock
- 8 companies, and insurance companies), the state, or a political
- 9 subdivision or instrumentality of the state, including a municipal
- 10 corporation or a hospital district.
- 11 (11) "Provider" generally means a health care professional or an
- 12 organization, institution, or other entity providing health care but
- 13 the precise definition for this term shall be established by rule of
- 14 the department, consistent with federal law.
- 15 (12) "Public health" means the level of well-being of the general
- 16 population; those actions in a community necessary to preserve,
- 17 protect, and promote the health of the people for which government is
- 18 responsible; and the governmental system developed to guarantee the
- 19 preservation of the health of the people.
- 20 (13) "Secretary" means the secretary of health or the secretary's
- 21 designee.
- 22 (14) "Tertiary health service" means a specialized service that
- 23 meets complicated medical needs of people and requires sufficient
- 24 patient volume to optimize provider effectiveness, quality of service,
- 25 and improved outcomes of care.
- 26 (15) "Hospital" means any health care institution which is required
- 27 to qualify for a license under RCW 70.41.020(2); or as a psychiatric
- 28 hospital under chapter 71.12 RCW.

- 1 Sec. 2. RCW 70.38.111 and 1989 1st ex.s. c 9 s 604 are each
- 2 amended to read as follows:
- 3 (1) The department shall not require a certificate of need for the
- 4 offering of an inpatient tertiary health service by:
- 5 (a) A health maintenance organization or a combination of health
- 6 maintenance organizations if (i) the organization or combination of
- 7 organizations has, in the service area of the organization or the
- 8 service areas of the organizations in the combination, an enrollment of
- 9 at least fifty thousand individuals, (ii) the facility in which the
- 10 service will be provided is or will be geographically located so that
- 11 the service will be reasonably accessible to such enrolled individuals,
- 12 and (iii) at least seventy-five percent of the patients who can
- 13 reasonably be expected to receive the tertiary health service will be
- 14 individuals enrolled with such organization or organizations in the
- 15 combination;
- 16 (b) A health care facility if (i) the facility primarily provides
- 17 or will provide inpatient health services, (ii) the facility is or will
- 18 be controlled, directly or indirectly, by a health maintenance
- 19 organization or a combination of health maintenance organizations which
- 20 has, in the service area of the organization or service areas of the
- 21 organizations in the combination, an enrollment of at least fifty
- 22 thousand individuals, (iii) the facility is or will be geographically
- 23 located so that the service will be reasonably accessible to such
- 24 enrolled individuals, and (iv) at least seventy-five percent of the
- 25 patients who can reasonably be expected to receive the tertiary health
- 26 service will be individuals enrolled with such organization or
- 27 organizations in the combination; or
- 28 (c) A health care facility (or portion thereof) if (i) the facility
- 29 is or will be leased by a health maintenance organization or
- 30 combination of health maintenance organizations which has, in the

- 1 service area of the organization or the service areas of the
- 2 organizations in the combination, an enrollment of at least fifty
- 3 thousand individuals and, on the date the application is submitted
- 4 under subsection (2) of this section, at least fifteen years remain in
- 5 the term of the lease, (ii) the facility is or will be geographically
- 6 located so that the service will be reasonably accessible to such
- 7 enrolled individuals, and (iii) at least seventy-five percent of the
- 8 patients who can reasonably be expected to receive the tertiary health
- 9 service will be individuals enrolled with such organization;
- 10 if, with respect to such offering or obligation by a nursing home, the
- 11 department has, upon application under subsection (2) of this section,
- 12 granted an exemption from such requirement to the organization,
- 13 combination of organizations, or facility.
- 14 (2) A health maintenance organization, combination of health
- 15 maintenance organizations, or health care facility shall not be exempt
- 16 under subsection (1) of this section from obtaining a certificate of
- 17 need before offering a tertiary health service unless:
- 18 (a) It has submitted at least thirty days prior to the offering of
- 19 services reviewable under RCW 70.38.105(4)(d) an application for such
- 20 exemption; and
- 21 (b) The application contains such information respecting the
- 22 organization, combination, or facility and the proposed offering or
- 23 obligation by a nursing home as the department may require to determine
- 24 if the organization or combination meets the requirements of subsection
- 25 (1) of this section or the facility meets or will meet such
- 26 requirements; and
- (c) The department approves such application. The department shall
- 28 approve or disapprove an application for exemption within thirty days
- 29 of receipt of a completed application. In the case of a proposed
- 30 health care facility (or portion thereof) which has not begun to

- 1 provide tertiary health services on the date an application is
- 2 submitted under this subsection with respect to such facility (or
- 3 portion), the facility (or portion) shall meet the applicable
- 4 requirements of subsection (1) of this section when the facility first
- 5 provides such services. The department shall approve an application
- 6 submitted under this subsection if it determines that the applicable
- 7 requirements of subsection (1) of this section are met.
- 8 (3) A health care facility (or any part thereof) with respect to
- 9 which an exemption was granted under subsection (1) of this section may
- 10 not be sold or leased and a controlling interest in such facility or in
- 11 a lease of such facility may not be acquired and a health care facility
- 12 described in (1)(c) which was granted an exemption under subsection (1)
- 13 of this section may not be used by any person other than the lessee
- 14 described in (1)(c) unless:
- 15 (a) The department issues a certificate of need approving the sale,
- 16 lease, acquisition, or use; or
- 17 (b) The department determines, upon application, that (i) the
- 18 entity to which the facility is proposed to be sold or leased, which
- 19 intends to acquire the controlling interest, or which intends to use
- 20 the facility is a health maintenance organization or a combination of
- 21 health maintenance organizations which meets the requirements of
- 22 (1)(a)(i), and (ii) with respect to such facility, meets the
- 23 requirements of (1)(a) (ii) or (iii) or the requirements of (1)(b) (i)
- 24 and (ii).
- 25 (4) In the case of a health maintenance organization, an ambulatory
- 26 care facility, or a health care facility, which ambulatory or health
- 27 care facility is controlled, directly or indirectly, by a health
- 28 maintenance organization or a combination of health maintenance
- 29 organizations, the department may under the program apply its
- 30 certificate of need requirements only to the offering of inpatient

- 1 tertiary health services and then only to the extent that such offering
- 2 is not exempt under the provisions of this section.
- 3 (5)(a) The department shall not require a certificate of need for
- 4 the construction, development, or other establishment of a nursing
- 5 home, or the addition of beds to an existing nursing home by a
- 6 continuing care retirement community that:
- 7 (i) Offers services only to contractual members;
- 8 (ii) Provides its members a contractually guaranteed range of
- 9 services from independent living through skilled nursing, including
- 10 some assistance with daily living activities;
- 11 <u>(iii) Contractually assumes responsibility for the cost of services</u>
- 12 exceeding the member's financial responsibility under the contract, so
- 13 that no third party, with the exception of insurance purchased by the
- 14 retirement community or its members, but including the medicaid
- 15 program, is liable for costs of care even if the member depletes his or
- 16 her personal resources;
- 17 <u>(iv) Has offered continuing care contracts and operated a nursing</u>
- 18 home continuously since January 1, 1988, or has obtained a certificate
- 19 of need to establish a nursing home;
- 20 (v) Maintains a binding agreement with the department assuring that
- 21 financial liability for services to members, including nursing home
- 22 <u>services</u>, will not fall upon the department;
- 23 (vi) Does not operate, and has not undertaken a project that would
- 24 result in a number of nursing home beds in excess of one for every four
- 25 living units operated by the continuing care retirement community,
- 26 exclusive of nursing home beds; and
- 27 (vii) Has obtained a professional review of pricing and long-term
- 28 solvency within the prior five years which was fully disclosed to
- 29 <u>members</u>.

- 1 (b) A continuing care retirement community shall not be exempt
- 2 under this subsection from obtaining a certificate of need unless:
- 3 (i) It has submitted an application for exemption at least thirty
- 4 days prior to commencing construction of, is submitting an application
- 5 for the licensure of, or is commencing operation of a nursing home,
- 6 whichever comes first; and
- 7 (ii) The application documents to the department that the
- 8 continuing care retirement community qualifies for exemption.
- 9 <u>(c) The sale, lease, acquisition, or use of part or all of a</u>
- 10 continuing care retirement community nursing home that qualifies for
- 11 exemption under this subsection shall require prior certificate of need
- 12 approval unless the department determines such sale, lease,
- 13 acquisition, or use is by a continuing care retirement community that
- 14 meets the conditions of (a) of this subsection.