

WEST VIRGINIA LEGISLATURE

2023 REGULAR SESSION

Introduced

Senate Bill 612

By Senators Barrett and Rucker

[Introduced February 13, 2023; referred
to the Committee on Health and Human Resources]

1 A BILL to amend and reenact §16-2D-8 and §16-2D-11 of the Code of West Virginia, as amended;
 2 and to amend said code by adding thereto a new section, designated §16-2D-11a, all
 3 relating to certificate of need; eliminating birthing centers as a service that requires a
 4 certificate of need; eliminating ambulatory care centers as a service that requires a
 5 certificate of need; eliminating ambulatory surgery centers as a service that requires a
 6 certificate of need; eliminating birthing centers as having an exemption; creating a pilot
 7 project for MRI and CT services; requiring the board make a recommendation to the
 8 Legislature regarding the pilot; and providing that if no such recommendation is made, the
 9 pilot will become permanent.

Be it enacted by the Legislature of West Virginia:

ARTICLE 2D. CERTIFICATE OF NEED.

§16-2D-8. Proposed health services that require a certificate of need.

1 (a) Except as provided in §16-2D-9, §16-2D-10, and §16-2D-11 of this code, the following
 2 proposed health services may not be acquired, offered, or developed within this state except upon
 3 approval of and receipt of a certificate of need as provided by this article:

4 (1) The construction, development, acquisition, or other establishment of a health care
 5 facility;

6 (2) The partial or total closure of a health care facility with which a capital expenditure is
 7 associated;

8 (3) (A) An obligation for a capital expenditure incurred by or on behalf of a health care
 9 facility in excess of the expenditure minimum; or

10 (B) An obligation for a capital expenditure incurred by a person to acquire a health care
 11 facility.

12 (4) An obligation for a capital expenditure is considered to be incurred by or on behalf of a
 13 health care facility:

14 (A) When a valid contract is entered into by or on behalf of the health care facility for the

15 construction, acquisition, lease, or financing of a capital asset;

16 (B) When the health care facility takes formal action to commit its own funds for a
17 construction project undertaken by the health care facility as its own contractor; or

18 (C) In the case of donated property, on the date on which the gift is completed under state
19 law.

20 (5) A substantial change to the bed capacity of a health care facility with which a capital
21 expenditure is associated;

22 (6) The addition of ventilator services by a hospital;

23 (7) The elimination of health services previously offered on a regular basis by or on behalf
24 of a health care facility which is associated with a capital expenditure;

25 (8) (A) A substantial change to the bed capacity or health services offered by or on behalf
26 of a health care facility, whether or not the change is associated with a proposed capital
27 expenditure;

28 (B) If the change is associated with a previous capital expenditure for which a certificate of
29 need was issued; and

30 (C) If the change will occur within two years after the date the activity which was associated
31 with the previously approved capital expenditure was undertaken.

32 (9) The acquisition of major medical equipment;

33 (10) A substantial change in an approved health service for which a certificate of need is in
34 effect;

35 (11) An expansion of the service area for hospice or home health agency regardless of the
36 time period in which the expansion is contemplated or made; and

37 (12) The addition of health services offered by or on behalf of a health care facility which
38 were not offered on a regular basis by or on behalf of the health care facility within the 12-month
39 period prior to the time the services would be offered.

40 (b) The following health services are required to obtain a certificate of need regardless of

41 the minimum expenditure:

- 42 ~~(1) Constructing, developing, acquiring, or establishing a birthing center;~~
43 ~~(2) (1) Providing radiation therapy;~~
44 ~~(3) (2) Providing computed tomography;~~
45 ~~(4) (3) Providing positron emission tomography;~~
46 ~~(5) (4) Providing cardiac surgery;~~
47 ~~(6) (5) Providing fixed magnetic resonance imaging;~~
48 ~~(7) (6) Providing comprehensive medical rehabilitation;~~
49 ~~(8) Establishing an ambulatory care center;~~
50 ~~(9) Establishing an ambulatory surgical center;~~
51 ~~(10) (7) Providing diagnostic imaging;~~
52 ~~(11) (8) Providing cardiac catheterization services;~~
53 ~~(12) (9) Constructing, developing, acquiring, or establishing kidney disease treatment~~
54 ~~centers, including freestanding hemodialysis units;~~
55 ~~(13) (10) Providing megavoltage radiation therapy;~~
56 ~~(14) (11) Providing surgical services;~~
57 ~~(15) (12) Establishing operating rooms;~~
58 ~~(16) (13) Adding acute care beds;~~
59 ~~(17) (14) Providing intellectual developmental disabilities services;~~
60 ~~(18) (15) Providing organ and tissue transplants;~~
61 ~~(19) (16) Establishing an intermediate care facility for individuals with intellectual~~
62 ~~disabilities;~~
63 ~~(20) (17) Providing inpatient services;~~
64 ~~(21) (18) Providing hospice services;~~
65 ~~(22) (19) Establishing a home health agency;~~
66 ~~(23) (20) Providing personal care services; and~~

67 ~~(24)~~ (21) (A) Establishing no more than six four-bed transitional intermediate care facilities:
68 Provided, That none of the four-bed sites shall be within five miles of another or adjacent to
69 another behavioral health facility. This subdivision terminates upon the approval of the sixth four-
70 bed intermediate care facility.

71 (B) Only individuals living in more restrictive institutional settings, in similar settings
72 covered by state-only dollars, or at risk of being institutionalized will be given the choice to move,
73 and they will be placed on the Individuals with Intellectual and Developmental Disabilities (IDD)
74 Waiver Managed Enrollment List. Individuals already on the IDD Waiver Managed Enrollment List
75 who live in a hospital or are in an out-of-state placement will continue to progress toward home-
76 and community-based waiver status and will also be considered for all other community-based
77 options, including, but not limited to, specialized family care and personal care.

78 (C) The department shall work to find the most integrated placement based upon an
79 individualized assessment. Individuals already on the IDD waiver will not be considered for
80 placement in the 24 new intermediate care beds.

81 (D) A monitoring committee of not more than 10 members, including a designee of
82 Mountain State Justice, a designee of Disability Rights of West Virginia, a designee of the
83 Statewide Independent Living Council, two members or family of members of the IDD waiver, the
84 Developmental Disabilities Council, the Commissioner of the Bureau of Health and Health
85 Facilities, the Commissioner of the Bureau for Medical Services, and the Commissioner of the
86 Bureau for Children and Families. The secretary of the department shall chair the first meeting of
87 the committee at which time the members shall elect a chairperson. The monitoring committee
88 shall provide guidance on the department's transitional plans for residents in the 24 intermediate
89 care facility beds and monitor progress toward home- and community-based waiver status and/or
90 utilizing other community-based options and securing the most integrated setting for each
91 individual.

92 (E) Any savings resulting from individuals moving from more expensive institutional care or

93 out-of-state placements shall be reinvested into home- and community-based services for
94 individuals with intellectual developmental disabilities.

95 (c) A certificate of need previously approved under this article remains in effect unless
96 revoked by the authority.

**§16-2D-11. Exemptions from Certificate of Need which require the submission of
information to the authority.**

1 (a) To obtain an exemption under this section a person shall:

2 (1) File an exemption application; and

3 (2) Provide a statement detailing which exemption applies and the circumstances justifying
4 the exemption.

5 (b) Notwithstanding section eight and ten and except as provided in section nine of this
6 article, the Legislature finds that a need exists and these health services are exempt from the
7 certificate of need process:

8 (1) The acquisition and utilization of one computed tomography scanner with a purchase
9 price up to \$750,000 that is installed in a private office practice where at minimum seventy-five
10 percent of the scans are performed on the patients of the practice. The private office practice shall
11 obtain and maintain accreditation from the American College of Radiology prior to, and at all times
12 during, the offering of this service. The authority may at any time request from the private office
13 practice information relating to the number of patients who have been provided scans and proof of
14 active and continuous accreditation from the American College of Radiology. If a physician owns
15 or operates a private office practice in more than one location, this exemption shall only apply to
16 the physician's primary place of business and if a physician wants to expand the offering of this
17 service to include more than one computed topography scanner, he or she shall be required to
18 obtain a certificate of need prior to expanding this service. All current certificates of need issued
19 for computed tomography services, with a required percentage threshold of scans to be performed
20 on patients of the practice in excess of seventy-five percent, shall be reduced to seventy-five

21 percent: *Provided*, That these limitations on the exemption for a private office practice with more
22 than one location shall not apply to a private office practice with more than twenty locations in the
23 state on April 8, 2017.

24 ~~(2) (A) A birthing center established by a nonprofit primary care center that has a~~
25 ~~community board and provides primary care services to people in their community without regard~~
26 ~~to ability to pay; or~~

27 ~~(B) A birthing center established by a nonprofit hospital with less than one hundred~~
28 ~~licensed acute care beds.~~

29 ~~(i) To qualify for this exemption, an applicant shall be located in an area that is underserved~~
30 ~~with respect to low-risk obstetrical services; and~~

31 ~~(ii) Provide a proposed health service area~~

32 ~~(3) (2) (A) A health care facility acquiring major medical equipment, adding health services~~
33 ~~or obligating a capital expenditure to be used solely for research;~~

34 ~~(B) To qualify for this exemption, the health care facility shall show that the acquisition,~~
35 ~~offering or obligation will not:~~

36 ~~(i) Affect the charges of the facility for the provision of medical or other patient care~~
37 ~~services other than the services which are included in the research;~~

38 ~~(ii) Result in a substantial change to the bed capacity of the facility; or~~

39 ~~(iii) Result in a substantial change to the health services of the facility.~~

40 ~~(C) For purposes of this subdivision, the term "solely for research" includes patient care~~
41 ~~provided on an occasional and irregular basis and not as part of a research program;~~

42 ~~(4) (3) The obligation of a capital expenditure to acquire, either by purchase, lease or~~
43 ~~comparable arrangement, the real property, equipment or operations of a skilled nursing facility:~~

44 *Provided*, That a skilled nursing facility developed pursuant to subdivision (17) of this section and
45 subsequently acquired pursuant to this subdivision may not transfer or sell any of the skilled
46 nursing home beds of the acquired skilled nursing facility until the skilled nursing facility has been

47 in operation for at least ten years.

48 ~~(5)~~ (4) Shared health services between two or more hospitals licensed in West Virginia
49 providing health services made available through existing technology that can reasonably be
50 mobile. This exemption does not include providing mobile cardiac catheterization;

51 ~~(6)~~ (5) The acquisition, development or establishment of a certified interoperable electronic
52 health record or electronic medical record system;

53 ~~(7)~~ (6) The addition of forensic beds in a health care facility;

54 ~~(8)~~ (7) A behavioral health service selected by the Department of Health and Human
55 Resources in response to its request for application for services intended to return children
56 currently placed in out-of-state facilities to the state or to prevent placement of children in out-of-
57 state facilities is not subject to a certificate of need;

58 ~~(9)~~ (8) The replacement of major medical equipment with like equipment, only if the
59 replacement major medical equipment cost is more than the expenditure minimum;

60 ~~(10)~~ (9) Renovations within a hospital, only if the renovation cost is more than the
61 expenditure minimum. The renovations may not expand the health care facility's current square
62 footage, incur a substantial change to the health services, or a substantial change to the bed
63 capacity;

64 ~~(11)~~ (10) Renovations to a skilled nursing facility;

65 ~~(12)~~ (11) The donation of major medical equipment to replace like equipment for which a
66 certificate of need has been issued and the replacement does not result in a substantial change to
67 health services. This exemption does not include the donation of major medical equipment made
68 to a health care facility by a related organization;

69 ~~(13)~~ (12) A person providing specialized foster care personal care services to one
70 individual and those services are delivered in the provider's home;

71 ~~(14)~~ (13) A hospital converting the use of beds except a hospital may not convert a bed to a
72 skilled nursing home bed and conversion of beds may not result in a substantial change to health

73 services provided by the hospital;

74 ~~(15)~~ (14) The construction, renovation, maintenance or operation of a state owned
75 veterans skilled nursing facilities established pursuant to the provisions of article one-b of this
76 chapter;

77 ~~(16)~~ (15) To develop and operate a skilled nursing facility with no more than thirty-six beds
78 in a county that currently is without a skilled nursing facility;

79 ~~(17)~~ (16) A critical access hospital, designated by the state as a critical access hospital,
80 after meeting all federal eligibility criteria, previously licensed as a hospital and subsequently
81 closed, if it reopens within ten years of its closure;

82 ~~(18)~~ (17) The establishing of a health care facility or offering of health services for children
83 under one year of age suffering from Neonatal Abstinence Syndrome;

84 ~~(19)~~ (18) The construction, development, acquisition or other establishment of community
85 mental health and intellectual disability facility;

86 ~~(20)~~ (19) Providing behavioral health facilities and services;

87 ~~(21)~~ (20) The construction, development, acquisition or other establishment of kidney
88 disease treatment centers, including freestanding hemodialysis units but only to a medically
89 underserved population;

90 ~~(22)~~ (21) The transfer, purchase or sale of intermediate care or skilled nursing beds from a
91 skilled nursing facility or a skilled nursing unit of an acute care hospital to a skilled nursing facility
92 providing intermediate care and skilled nursing services. The Department of Health and Human
93 Resources may not create a policy which limits the transfer, purchase or sale of intermediate care
94 or skilled nursing beds from a skilled nursing facility or a skilled nursing unit of an acute care
95 hospital. The transferred beds shall retain the same certification status that existed at the nursing
96 home or hospital skilled nursing unit from which they were acquired. If construction is required to
97 place the transferred beds into the acquiring nursing home, the acquiring nursing home has one
98 year from the date of purchase to commence construction;

99 ~~(23)~~ (22) The construction, development, acquisition or other establishment by a health
 100 care facility of a nonhealth related project, only if the nonhealth related project cost is more than
 101 the expenditure minimum;

102 ~~(24)~~ (23) The construction, development, acquisition or other establishment of an alcohol
 103 or drug treatment facility and drug and alcohol treatment services unless the construction,
 104 development, acquisition or other establishment is an opioid treatment facility or programs as set
 105 forth in subdivision (4) of section nine of this article;

106 ~~(25)~~ (24) Assisted living facilities and services;

107 ~~(26)~~ (25) The creation, construction, acquisition or expansion of a community-based
 108 nonprofit organization with a community board that provides or will provide primary care services
 109 to people without regard to ability to pay and receives approval from the Health Resources and
 110 Services Administration; and

111 ~~(27)~~ (26) The acquisition and utilization of one computed tomography scanner and/or one
 112 magnetic resonance imaging scanner with a purchase price of up to \$750,000 by a hospital.

§16-2D-11a. Pilot program exempt from certificate of need.

1 Notwithstanding §16-2D-8 and §16-2D-10 of this code, and except as provided in §16-2D-
 2 9 of this code, the Legislature finds that a need exists to study the provision of expanding access to
 3 magnetic resonance imaging (MRI) and computed tomography (CT) imaging services in an
 4 ambulatory health care facility as defined in §16-2D-2 of this code. Certificate of need regulations
 5 are associated with 3.93 more MRI scans and 3.52 CT scans occurring out-of-state. Since
 6 certificate of need regulations appear to cause patients to travel out-of-state more often than
 7 patients living in non-CON states, a three-year pilot program for these services shall be initiated on
 8 a statewide basis to evaluate whether allowing the acquiring, offering or developing of MRI and CT
 9 services in the State of West Virginia in an ambulatory health care setting will drive down the need
 10 for West Virginia residents to travel out-of-state for these services thereby enhancing patient care
 11 and reducing the cost of such care. At the end of the three-year period, the board will present the

12 Legislative Oversight Commission on Health and Human Resources Accountability with a
13 recommendation regarding whether the pilot program should be terminated, become permanent,
14 or that further study is needed. The recommendation should be based upon data collected during
15 the pilot period, including, but not limited to, the number of patients served during the pilot
16 timeframe, where they were serviced, and the cost of the service. If the board makes no
17 recommendation, then the pilot program shall become permanent.

NOTE: The purpose of this bill is to eliminate birthing centers, ambulatory surgery centers, and ambulatory care centers, from certificate of need review. The bill eliminates birthing centers from exemptions; creates a three-year pilot program for MRI and CT; and directs the board to make a recommendation regarding the pilot program. In the absence of a recommendation, the pilot program will become permanent.

Strike-throughs indicate language that would be stricken from a heading or the present law and underscoring indicates new language that would be added.