FIRST REGULAR SESSION

SENATE BILL NO. 733

103RD GENERAL ASSEMBLY

INTRODUCED BY SENATOR WEBBER.

KRISTINA MARTIN, Secretary

AN ACT

To repeal sections 197.315 and 198.022, RSMo, and to enact in lieu thereof three new sections relating to long-term care facilities.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section A. Sections 197.315 and 198.022, RSMo, are repealed and three new sections enacted in lieu thereof, to be known as sections 197.315, 198.022, and 198.043, to read as follows:

197.315. 1. Any person who proposes to develop or
offer a new institutional health service within the state
must obtain a certificate of need from the committee prior
to the time such services are offered.

5 2. Only those new institutional health services which are found by the committee to be needed shall be granted a 6 7 certificate of need. Only those new institutional health 8 services which are granted certificates of need shall be 9 offered or developed within the state. No expenditures for new institutional health services in excess of the 10 11 applicable expenditure minimum shall be made by any person unless a certificate of need has been granted. 12

3. After October 1, 1980, no state agency charged by
statute to license or certify health care facilities shall
issue a license to or certify any such facility, or distinct
part of such facility, that is developed without obtaining a
certificate of need.

EXPLANATION-Matter enclosed in bold-faced brackets [thus] in this bill is not enacted and is intended to be omitted in the law.

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4. If any person proposes to develop any new
institutional health care service without a certificate of
need as required by sections 197.300 to 197.366, the
committee shall notify the attorney general, and he shall
apply for an injunction or other appropriate legal action in
any court of this state against that person.

5. After October 1, 1980, no agency of state
government may appropriate or grant funds to or make payment
of any funds to any person or health care facility which has
not first obtained every certificate of need required
pursuant to sections 197.300 to 197.366.

A certificate of need shall be issued only for the
premises and persons named in the application and is not
transferable except by consent of the committee.

32 7. Project cost increases, due to changes in the 33 project application as approved or due to project change 34 orders, exceeding the initial estimate by more than ten 35 percent shall not be incurred without consent of the 36 committee.

8. Periodic reports to the committee shall be required
of any applicant who has been granted a certificate of need
until the project has been completed. The committee may
order the forfeiture of the certificate of need upon failure
of the applicant to file any such report.

9. A certificate of need shall be subject to
forfeiture for failure to incur a capital expenditure on any
approved project within six months after the date of the
order. The applicant may request an extension from the
committee of not more than six additional months based upon
substantial expenditure made.

48 10. Each application for a certificate of need must be49 accompanied by an application fee. The time of filing

50 commences with the receipt of the application and the application fee. The application fee is one thousand 51 52 dollars, or one-tenth of one percent of the total cost of the proposed project, whichever is greater. All application 53 fees shall be deposited in the state treasury. Because of 54 the loss of federal funds, the general assembly will 55 56 appropriate funds to the Missouri health facilities review 57 committee.

58 11. In determining whether a certificate of need 59 should be granted, no consideration shall be given to the 60 facilities or equipment of any other health care facility 61 located more than a fifteen-mile radius from the applying 62 facility.

63 12. When a nursing facility shifts from a skilled to
64 an intermediate level of nursing care, it may return to the
65 higher level of care if it meets the licensure requirements,
66 without obtaining a certificate of need.

67 13. In no event shall a certificate of need be denied
68 because the applicant refuses to provide abortion services
69 or information.

70 14. A certificate of need shall not be required for 71 the transfer of ownership of an existing and operational 72 health facility in its entirety, except for any assisted 73 living facility, intermediate care facility, residential 74 care facility, or skilled nursing facility, as such terms 75 are defined in section 198.006.

76 15. A certificate of need may be granted to a facility 77 for an expansion, an addition of services, a new 78 institutional service, or for a new hospital facility which 79 provides for something less than that which was sought in 80 the application.

81 16. The provisions of this section shall not apply to 82 facilities operated by the state, and appropriation of funds 83 to such facilities by the general assembly shall be deemed in compliance with this section, and such facilities shall 84 85 be deemed to have received an appropriate certificate of need without payment of any fee or charge. The provisions 86 87 of this subsection shall not apply to hospitals operated by the state and licensed under this chapter, except for 88 department of mental health state-operated psychiatric 89 90 hospitals.

91 17. Notwithstanding other provisions of this section, 92 a certificate of need may be issued after July 1, 1983, for 93 an intermediate care facility operated exclusively for the 94 intellectually disabled.

95 18. To assure the safe, appropriate, and cost-96 effective transfer of new medical technology throughout the 97 state, a certificate of need shall not be required for the 98 purchase and operation of:

99 (1)Research equipment that is to be used in a 100 clinical trial that has received written approval from a 101 duly constituted institutional review board of an accredited school of medicine or osteopathy located in Missouri to 102 establish its safety and efficacy and does not increase the 103 104 bed complement of the institution in which the equipment is 105 to be located. After the clinical trial has been completed, a certificate of need must be obtained for continued use in 106 107 such facility; or

108 (2) Equipment that is to be used by an academic health
109 center operated by the state in furtherance of its research
110 or teaching missions.

198.022. 1. Upon receipt of an application for a2 license to operate a facility, the department shall review

3 the application, investigate the applicant and the 4 statements sworn to in the application for license and 5 conduct any necessary inspections. A license shall be 6 issued if the following requirements are met:

7 (1) The application discloses all facility owners,
8 facility trustees, and companies that provide the facility
9 or operator with administrative, clinical, and financial
10 services, including real estate investment trusts;

11 (2) The statements in the application are true and 12 correct;

13 [(2)] (3) The facility and the operator are in
14 substantial compliance with the provisions of sections
15 198.003 to 198.096 and the standards established thereunder;

16 [(3)] (4) The applicant has the financial capacity to 17 operate the facility;

18 [(4)] (5) The administrator of an assisted living 19 facility, a skilled nursing facility, or an intermediate 20 care facility is currently licensed under the provisions of 21 chapter 344;

22 [(5)] (6) Neither the operator nor any principals in the operation of the facility have ever been convicted of a 23 felony offense concerning the operation of a long-term 24 health care facility or other health care facility or ever 25 knowingly acted or knowingly failed to perform any duty 26 which materially and adversely affected the health, safety, 27 28 welfare or property of a resident, while acting in a 29 management capacity. The operator of the facility or any principal in the operation of the facility shall not be 30 31 under exclusion from participation in the Title XVIII (Medicare) or Title XIX (Medicaid) program of any state or 32 33 territory;

34 [(6)] (7) Neither the operator nor any principals 35 involved in the operation of the facility have ever been 36 convicted of a felony in any state or federal court arising 37 out of conduct involving either management of a long-term 38 care facility or the provision or receipt of health care; and

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[(7)] (8) All fees due to the state have been paid.
2. Upon denial of any application for a license, the department shall so notify the applicant in writing, setting

42 forth therein the reasons and grounds for denial.
43 3. The department may inspect any facility and any

records and may make copies of records, at the facility, at 44 the department's own expense, required to be maintained by 45 sections 198.003 to 198.096 or by the rules and regulations 46 promulgated thereunder at any time if a license has been 47 issued to or an application for a license has been filed by 48 the operator of such facility. Copies of any records 49 50 requested by the department shall be prepared by the staff of such facility within two business days or as determined 51 52 by the department. The department shall not remove or disassemble any medical record during any inspection of the 53 facility, but may observe the photocopying or may make its 54 55 own copies if the facility does not have the technology to make the copies. In accordance with the provisions of 56 57 section 198.525, the department shall make at least one 58 inspection per year, which shall be unannounced to the 59 operator. The department may make such other inspections, 60 announced or unannounced, as it deems necessary to carry out the provisions of sections 198.003 to 198.136. 61

4. Whenever the department has reasonable grounds to
believe that a facility required to be licensed under
sections 198.003 to 198.096 is operating without a license,
and the department is not permitted access to inspect the

facility, or when a licensed operator refuses to permit 66 access to the department to inspect the facility, the 67 68 department shall apply to the circuit court of the county in which the premises is located for an order authorizing entry 69 70 for such inspection, and the court shall issue the order if 71 it finds reasonable grounds for inspection or if it finds 72 that a licensed operator has refused to permit the 73 department access to inspect the facility.

5. Whenever the department is inspecting a facility in response to an application from an operator located outside of Missouri not previously licensed by the department, the department may request from the applicant the past five years compliance history of all facilities owned by the applicant located outside of this state.

198.043. 1. As used in this section, the following 2 terms mean:

3 (1) "Certified nursing assistant", the same meaning
4 given to the term in section 198.082;

5 (2) "Charge nurse", a registered professional nurse 6 who oversees the operations of the nurse's specific nursing 7 unit during a set period;

8 (3) "CMS", the Centers for Medicare and Medicaid
9 Services;

10 (4) "Hours per resident day", the total number of
11 hours worked by each type of staff divided by the total
12 number of residents;

(5) "Registered professional nurse" or "registered
nurse", the same meanings given to the terms in section
335.016.

Assisted living facilities shall have sufficient
 nursing staff with the appropriate competencies and skill
 sets to provide nursing and related services to ensure

19 resident safety and attain or maintain the highest

20 practicable physical, mental, and psychosocial well-being of 21 each resident by maintaining on a twenty-four-hour basis the 22 following types of personnel:

(1) Registered nurses. Each assisted living facility
 shall comply with the following staffing requirements for
 registered nurses:

26 (a) Each assisted living facility shall provide care
27 by registered nurses for a minimum of fifty-five hundredths
28 hours per resident day; and

(b) At least one registered nurse shall be on site
twenty-four hours a day, seven days a week; and

31 (2) Other nursing personnel. Each assisted living
32 facility shall provide care by certified nursing assistants
33 for a minimum of two and forty-four hundredths hours per
34 resident day.

35 3. Assisted living facilities shall electronically 36 submit to CMS complete and accurate direct care staffing 37 information, including information for agency and contract 38 staff, based on payroll and other verifiable and auditable 39 data in a uniform format according to specifications 40 established by CMS in accordance with 42 CFR 483.70(p).

4. Determinations of compliance with hours per
resident day specified in subsection 2 of this section shall
be made by the department based on the most recent available
quarter of Payroll-Based Journal System data maintained by
CMS.

5. The department may impose appropriate sanctions and assess an administrative penalty under this section on an administrator of a facility who fails to meet the minimum staffing standards two quarters in a row as determined by rule.

6. (1) An assisted living facility may be exempted from the minimum staffing requirements of subdivisions (1) and (2) of subsection 2 of this section by the department if a verifiable hardship exists that prohibits the facility from achieving or maintaining compliance as demonstrated by meeting the following criteria:

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(a) The facility is located in an area where:

a. The supply of applicable health care staff, either registered professional nurses or certified nursing assistants or both, is not sufficient to meet area needs as evidenced by a provider-population ratio for nursing workforce that is medium, twenty percent below the national average, or low, forty percent below the national average; and

b. The facility is at least twenty miles from another
 assisted living facility;

(b) The facility demonstrates that it has been unable,
despite diligent efforts, including offering at least
prevailing wages, to recruit and retain appropriate
personnel as verified by:

a. Job listings in commonly used recruitment forums
found online at American Job Centers, coordinated by the
United States Department of Labor's Employment and Training
Administration; MoJobs, coordinated by the department of
higher education and workforce development; and other forums
as appropriate;

b. Documented job vacancies, including the number and
duration of the vacancies and documentation of offers made,
including that they were made at least at prevailing wages;

80 c. Data on the average wages in the metropolitan 81 statistical area in which the facility is located and 82 vacancies by industry as reported by the department of labor 83 and industrial relations; and

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d. The facility's staffing plan, which shall be
developed and maintained to maximize recruitment and
retention of direct care staff; and

87 (c) The facility demonstrates through documentation
88 the amount of financial resources that the facility expends
89 on nurse staffing relative to revenue.

90 (2) A facility shall not be eligible for a hardship
91 waiver from the minimum staffing requirements if the
92 facility:

93 (a) Has been cited within the twelve months preceding
94 the survey during which the facility's noncompliance is
95 identified:

96 a. For having widespread insufficient staffing with
97 resultant resident actual harm;

98 b. For a pattern of insufficient staffing with
99 resultant resident actual harm; or

c. As at the immediate jeopardy level of severity with
 respect to insufficient staffing as determined by CMS; or

102 (b) Has failed to submit data to CMS under subsection103 3 of this section.

104 7. In order to appropriately manage required nursing
105 staff, an assisted living facility shall:

106 (1) Designate a registered professional nurse as the
 107 director of nursing on a full-time basis; and

108 (2) Designate a registered professional nurse to serve
109 as a charge nurse for each nursing shift. The director of
110 nursing designated in subdivision (1) of this subsection may
111 serve as a charge nurse only if the facility has an average
112 daily occupancy of sixty or fewer residents.

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