

GENERAL ASSEMBLY OF NORTH CAROLINA

SESSION 1993

S

3

SENATE BILL 950

Capital Expenditures and Improvements Committee Substitute Adopted 5/11/93

House Committee Substitute Favorable 7/7/93

Short Title: CON Hospice Change.

(Public)

Sponsors:

Referred to:

April 22, 1993

A BILL TO BE ENTITLED

AN ACT TO REQUIRE THAT ALL NEW HOSPICES RECEIVE A CERTIFICATE OF NEED.

The General Assembly of North Carolina enacts:

Section 1. G.S. 131E-176(9b) reads as rewritten:

"(9b) 'Health service facility' means a hospital; psychiatric facility; rehabilitation facility; long term care facility; kidney disease treatment center, including freestanding hemodialysis units; intermediate care facility for the mentally retarded; home health agency office; chemical dependency treatment facility; hospice, hospice inpatient facility, hospice residential care facility; and ambulatory surgical facility."

Sec. 2. G.S. 131E-176(9c) reads as rewritten:

"(9c) 'Health service facility bed' means a bed licensed for use in a health service facility in the categories of (i) acute care beds; (ii) psychiatric beds; (iii) rehabilitation beds; (iv) nursing care beds; (v) intermediate care beds for the mentally retarded; ~~and~~ (vi) chemical dependency treatment ~~beds~~ ~~beds~~; (vii) hospice inpatient facility beds; and (viii) hospice residential care facility beds."

Sec. 3. G.S. 131E-176 is amended by inserting the following new subdivisions to read:

"(13b) 'Hospice inpatient facility' means a freestanding licensed hospice facility or a designated inpatient unit in an existing health service

1 facility which provides palliative and supportive medical and other
2 health services to meet the physical, psychological, social, spiritual,
3 and special needs of terminally ill patients and their families in an
4 inpatient setting. For purposes of this Article only, a hospital which
5 has a contractual agreement with a licensed hospice to provide
6 inpatient services to a hospice patient as defined in G.S. 131E-201(4)
7 and provides those services in a licensed acute care bed is not a
8 hospice inpatient facility and is not subject to the requirements in G.S.
9 131E-176(5)(ii) for hospice inpatient beds.

10 (13c) 'Hospice residential care facility' means a freestanding licensed
11 hospice facility which provides palliative and supportive medical and
12 other health services to meet the physical, psychological, social,
13 spiritual, and special needs of terminally ill patients and their families
14 in a group residential setting."

15 Sec. 4. G.S. 131E-176(16)n. reads as rewritten:

16 "n. The construction, development or other establishment of a
17 hospice if the operating budget thereof is in excess of one hundred
18 thousand dollars (\$100,000).—hospice, hospice inpatient facility,
19 or hospice residential care facility;".

20 Sec. 5. G.S. 131E-201 is amended by inserting the following new
21 subdivisions to read:

22 "(3a) 'Hospice inpatient facility' means a freestanding licensed hospice
23 facility or a designated inpatient unit in an existing health service
24 facility which provides palliative and supportive medical and other
25 health services to meet the physical, psychological, social, spiritual,
26 and special needs of terminally ill patients and their families in an
27 inpatient setting.

28 (5a) 'Hospice residential care facility' means a freestanding licensed
29 hospice facility which provides palliative and supportive medical and
30 other health services to meet the physical, psychological, social,
31 spiritual, and special needs of terminally ill patients and their families
32 in a group residential setting.

33 (5b) 'Hospice services' means the provision of palliative and supportive
34 medical and other health services to meet the physical, psychological,
35 social, spiritual, and special needs of patients and their families, which
36 are experienced during the final stages of terminal illness and during
37 dying and bereavement."

38 Sec. 6. G.S. 131E-202(a) reads as rewritten:

39 "(a) The Commission shall adopt rules for the licensing and regulation of hospices
40 hospices, hospice inpatient facilities, and hospice residential care facilities pursuant to
41 this Article for the purpose of providing care, treatment, health, safety, welfare, and
42 comfort of hospice patients. These rules shall include, but not be limited to:

43 (1) The qualifications and supervision of licensed and nonlicensed
44 personnel;

- 1 (2) The provision and coordination of home and inpatient care, including
2 the development of a written care plan;
3 (3) The management, operation, staffing, and equipping of the hospice
4 program;
5 (4) Clinical and business records kept by the ~~hospice~~; hospice, hospice
6 inpatient care facility, and hospice residential care facility; and
7 (5) Procedures for the review of utilization and quality of care."

8 Sec. 7. G.S. 131E-203 reads as rewritten:

9 **"§ 131E-203. Coverage.**

10 (a) Except as provided in subsection (b) of this section, no person or other entity
11 shall operate or represent himself or itself to the public as operating a ~~hospice~~ hospice, a
12 hospice inpatient facility, or a hospice residential care facility, or offer or represent
13 himself or itself to the public as offering hospice services without obtaining a license
14 from the Department pursuant to this Article.

15 (b) Hospices administered by local health departments established under Article
16 2 of Chapter 130A of the General Statutes shall not be required to be licensed under this
17 Article. Additionally, health care facilities and agencies licensed under Article 5 or 6 of
18 Chapter 131E of the General Statutes shall not be required to be separately licensed
19 under this Article. However, any facility or agency exempted from licensure as ~~a~~
20 ~~hospice~~ under this subsection which operates a hospice, a hospice inpatient facility, or a
21 hospice residential care facility, or offers hospice services shall be subject to rules
22 adopted pursuant to this Article.

23 (c) Hospice care shall be available 24 hours a day, seven days a week."

24 Sec. 8. This act is effective upon ratification and applies to any person, trust
25 or estate, partnership, corporation, the State, and political subdivisions of the State, or
26 any comparable entity which has not been licensed as a hospice prior to the ratification
27 of this act or, if exempt from licensure, has not actually furnished comprehensive
28 hospice services to North Carolina residents prior to ratification. Section 5 of this act
29 shall not apply to any dedicated inpatient hospice unit currently in operation on the date
30 of ratification.