

## 95TH GENERAL ASSEMBLY State of Illinois 2007 and 2008 SB0611

Introduced 2/8/2007, by Sen. Susan Garrett

## SYNOPSIS AS INTRODUCED:

20	ILCS	3960/3	from	Ch.	111	1/2,	par.	1153
20	ILCS	3960/4	from	Ch.	111	1/2,	par.	1154
20	ILCS	3960/5	from	Ch.	111	1/2,	par.	1155
20	ILCS	3960/19.6						

Amends the Illinois Health Facilities Planning Act. Redefines a "health care facility" to add cardiac catheterization laboratories and medical care facilities that are leased, owned, or operated by or on behalf of an out-of-state facility. Increases the Health Facilities Planning Board from 5 to 9 members. Provides that (i) the installation of swing beds and (ii) an increase in bed capacity of more than 20 (now, more than 10) do not require a permit or exemption in advance. Repeals the Act on July 1, 2012 (now, April 1, 2007). Effective immediately.

LRB095 10811 JAM 31061 b

FISCAL NOTE ACT MAY APPLY

15

16

17

18

19

20

21

22

2.3

1 AN ACT	concerning Stat	e government.
----------	-----------------	---------------

## Be it enacted by the People of the State of Illinois, represented in the General Assembly:

- Section 5. The Illinois Health Facilities Planning Act is amended by changing Sections 3, 4, 5, and 19.6 as follows:
- 6 (20 ILCS 3960/3) (from Ch. 111 1/2, par. 1153)
- 7 (Section scheduled to be repealed on April 1, 2007)
- 8 Sec. 3. Definitions. As used in this Act:
- 9 "Health care facilities" means and includes the following 10 facilities and organizations:
- 1. An ambulatory surgical treatment center required to

  12 be licensed pursuant to the Ambulatory Surgical Treatment

  13 Center Act;
  - 2. An institution, place, building, or agency required to be licensed pursuant to the Hospital Licensing Act;
  - 3. Skilled and intermediate long term care facilities licensed under the Nursing Home Care Act;

## 3. Skilled and intermediate long term care facilities licensed under the Nursing Home Care Act;

4. Hospitals, nursing homes, ambulatory surgical treatment centers, or kidney disease treatment centers maintained by the State or any department or agency thereof;

_	5.	Kidney	disease	treatmer	nt center	îs,	incl	uding	a
2	free-st	anding	hemodialys	is unit	required	to	be	licens	ed
3	under th	ne End S	Stage Renal	Disease	Facility	Act;	and	ŀ	

- 6. An institution, place, building, or room used for the performance of outpatient surgical procedures that is leased, owned, or operated by or on behalf of an out-of-state facility;.
- 7. Cardiac catheterization laboratories that are not located in an institution, place, building, or agency required to be licensed pursuant to the Hospital Licensing Act or an ambulatory surgical treatment center required to be licensed pursuant to the Ambulatory Surgical Treatment Center Act; and
- 8. An institution, place, building, or room, whose cost of construction is greater than the capital expenditure minimum, that is used for the delivery of medical care and that is leased, owned, or operated by or on behalf of an out-of-state facility.

No federally owned facility shall be subject to the provisions of this Act, nor facilities used solely for healing by prayer or spiritual means;  $\cdot$ 

No facility licensed under the Supportive Residences Licensing Act or the Assisted Living and Shared Housing Act shall be subject to the provisions of this Act.

A facility designated as a supportive living facility that is in good standing with the program established under Section

5-5.01a of the Illinois Public Aid Code shall not be subject to the provisions of this Act.

This Act does not apply to facilities granted waivers under Section 3-102.2 of the Nursing Home Care Act. However, if a demonstration project under that Act applies for a certificate of need to convert to a nursing facility, it shall meet the licensure and certificate of need requirements in effect as of the date of application.

This Act does not apply to a dialysis facility that provides only dialysis training, support, and related services to individuals with end stage renal disease who have elected to receive home dialysis. This Act does not apply to a dialysis unit located in a licensed nursing home that offers or provides dialysis-related services to residents with end stage renal disease who have elected to receive home dialysis within the nursing home. The Board, however, may require these dialysis facilities and licensed nursing homes to report statistical information on a quarterly basis to the Board to be used by the Board to conduct analyses on the need for proposed kidney disease treatment centers.

This Act shall not apply to the closure of an entity or a portion of an entity licensed under the Nursing Home Care Act that elects to convert, in whole or in part, to an assisted living or shared housing establishment licensed under the Assisted Living and Shared Housing Act.

With the exception of those health care facilities

2

3

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

specifically included in this Section, nothing in this Act shall be intended to include facilities operated as a part of the practice of a physician or other licensed health care professional, whether practicing in his individual capacity or within the legal structure of any partnership, medical or professional corporation, or unincorporated medical professional group. Further, this Act shall not apply to physicians or other licensed health care professional's practices where such practices are carried out in a portion of a health care facility under contract with such health care facility by a physician or by other licensed health care professionals, whether practicing in his individual capacity or within the legal structure of any partnership, medical or professional corporation, or unincorporated medical professional groups. This Act shall apply to construction or modification and to establishment by such health care facility of such contracted portion which is subject to facility licensing requirements, irrespective of the party responsible for such action or attendant financial obligation.

"Person" means any one or more natural persons, legal entities, governmental bodies other than federal, or any combination thereof.

"Consumer" means any person other than a person (a) whose major occupation currently involves or whose official capacity within the last 12 months has involved the providing, administering or financing of any type of health care facility,

(b) who is engaged in health research or the teaching of health, (c) who has a material financial interest in any activity which involves the providing, administering or financing of any type of health care facility, or (d) who is or ever has been a member of the immediate family of the person defined by (a), (b), or (c).

"State Board" means the Health Facilities Planning Board.

"Construction or modification" means the establishment, erection, building, alteration, reconstruction, modernization, improvement, extension, discontinuation, change of ownership, of or by a health care facility, or the purchase or acquisition by or through a health care facility of equipment or service for diagnostic or therapeutic purposes or for facility administration or operation, or any capital expenditure made by or on behalf of a health care facility which exceeds the capital expenditure minimum; however, any capital expenditure made by or on behalf of a health care facility for (i) the construction or modification of a facility licensed under the Assisted Living and Shared Housing Act or (ii) a conversion project undertaken in accordance with Section 30 of the Older Adult Services Act shall be excluded from any obligations under this Act.

"Establish" means the construction of a health care facility or the replacement of an existing facility on another site.

"Major medical equipment" means medical equipment which is

used for the provision of medical and other health services and which costs in excess of the capital expenditure minimum, except that such term does not include medical equipment acquired by or on behalf of a clinical laboratory to provide clinical laboratory services if the clinical laboratory is independent of a physician's office and a hospital and it has been determined under Title XVIII of the Social Security Act to meet the requirements of paragraphs (10) and (11) of Section 1861(s) of such Act. In determining whether medical equipment has a value in excess of the capital expenditure minimum, the value of studies, surveys, designs, plans, working drawings, specifications, and other activities essential to the acquisition of such equipment shall be included.

"Capital Expenditure" means an expenditure: (A) made by or on behalf of a health care facility (as such a facility is defined in this Act); and (B) which under generally accepted accounting principles is not properly chargeable as an expense of operation and maintenance, or is made to obtain by lease or comparable arrangement any facility or part thereof or any equipment for a facility or part; and which exceeds the capital expenditure minimum.

For the purpose of this paragraph, the cost of any studies, surveys, designs, plans, working drawings, specifications, and other activities essential to the acquisition, improvement, expansion, or replacement of any plant or equipment with respect to which an expenditure is made shall be included in

determining if such expenditure exceeds the capital expenditures minimum. Donations of equipment or facilities to a health care facility which if acquired directly by such facility would be subject to review under this Act shall be considered capital expenditures, and a transfer of equipment or facilities for less than fair market value shall be considered a capital expenditure for purposes of this Act if a transfer of the equipment or facilities at fair market value would be subject to review.

"Capital expenditure minimum" means \$6,000,000, which shall be annually adjusted to reflect the increase in construction costs due to inflation, for major medical equipment and for all other capital expenditures; provided, however, that when a capital expenditure is for the construction or modification of a health and fitness center, "capital expenditure minimum" means the capital expenditure minimum for all other capital expenditures in effect on March 1, 2000, which shall be annually adjusted to reflect the increase in construction costs due to inflation.

"Non-clinical service area" means an area (i) for the benefit of the patients, visitors, staff, or employees of a health care facility and (ii) not directly related to the diagnosis, treatment, or rehabilitation of persons receiving services from the health care facility. "Non-clinical service areas" include, but are not limited to, chapels; gift shops; news stands; computer systems; tunnels, walkways, and

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

elevators; telephone systems; projects to comply with life safety codes; educational facilities; student housing; employee, staff, and visitor dining patient, areas; administration and volunteer offices; modernization structural components (such as roof replacement and masonry work); boiler repair or replacement; vehicle maintenance and storage facilities; parking facilities; mechanical systems for heating, ventilation, and air conditioning; loading docks; and repair or replacement of carpeting, tile, wall coverings, window coverings or treatments, or furniture. Solely for the purpose of this definition, "non-clinical service area" does not include health and fitness centers.

"Areawide" means a major area of the State delineated on a geographic, demographic, and functional basis for health planning and for health service and having within it one or more local areas for health planning and health service. The term "region", as contrasted with the term "subregion", and the word "area" may be used synonymously with the term "areawide".

"Local" means a subarea of a delineated major area that on a geographic, demographic, and functional basis may be considered to be part of such major area. The term "subregion" may be used synonymously with the term "local".

"Areawide health planning organization" or "Comprehensive health planning organization" means the health systems agency designated by the Secretary, Department of Health and Human Services or any successor agency.

- 1 "Local health planning organization" means those local
- 2 health planning organizations that are designated as such by
- 3 the areawide health planning organization of the appropriate
- 4 area.
- 5 "Physician" means a person licensed to practice in
- 6 accordance with the Medical Practice Act of 1987, as amended.
- 7 "Licensed health care professional" means a person
- 8 licensed to practice a health profession under pertinent
- 9 licensing statutes of the State of Illinois.
- "Director" means the Director of the Illinois Department of
- 11 Public Health.
- "Agency" means the Illinois Department of Public Health.
- "Comprehensive health planning" means health planning
- 14 concerned with the total population and all health and
- associated problems that affect the well-being of people and
- that encompasses health services, health manpower, and health
- facilities; and the coordination among these and with those
- 18 social, economic, and environmental factors that affect
- 19 health.
- 20 "Alternative health care model" means a facility or program
- 21 authorized under the Alternative Health Care Delivery Act.
- "Out-of-state facility" means a person that is both (i)
- licensed as a hospital or as an ambulatory surgery center under
- the laws of another state or that qualifies as a hospital or an
- 25 ambulatory surgery center under regulations adopted pursuant
- 26 to the Social Security Act and (ii) not licensed under the

14

15

16

17

18

19

20

21

22

23

24

25

26

Ambulatory Surgical Treatment Center Act, the 1 2 Licensing Act, or the Nursing Home Care Act. Affiliates of out-of-state facilities shall be considered out-of-state 3 facilities. Affiliates of Illinois licensed health care 5 facilities 100% owned by an Illinois licensed health care facility, its parent, or Illinois physicians licensed to 6 7 practice medicine in all its branches shall not be considered out-of-state facilities. Nothing in this definition shall be 8 9 construed to include an office or any part of an office of a 10 physician licensed to practice medicine in all its branches in 11 Illinois that is not required to be licensed under the 12 Ambulatory Surgical Treatment Center Act.

"Change of ownership of a health care facility" means a change in the person who has ownership or control of a health care facility's physical plant and capital assets. A change in ownership is indicated by the following transactions: sale, transfer, acquisition, lease, change of sponsorship, or other means of transferring control.

"Related person" means any person that: (i) is at least 50% owned, directly or indirectly, by either the health care facility or a person owning, directly or indirectly, at least 50% of the health care facility; or (ii) owns, directly or indirectly, at least 50% of the health care facility.

"Charity care" means care provided by a health care facility for which the provider does not expect to receive payment from the patient or a third-party payer.

- 1 (Source: P.A. 93-41, eff. 6-27-03; 93-766, eff. 7-20-04;
- 2 93-935, eff. 1-1-05; 93-1031, eff. 8-27-04; 94-342, eff.
- 3 7-26-05; revised 8-21-06.)
- 4 (20 ILCS 3960/4) (from Ch. 111 1/2, par. 1154)
- 5 (Section scheduled to be repealed on April 1, 2007)
- 6 Sec. 4. Health Facilities Planning Board; membership;
- 7 appointment; term; compensation; quorum. There is created the
- 8 Health Facilities Planning Board, which shall perform the
- 9 functions described in this Act.
- The State Board shall consist of 9  $\frac{5}{9}$  voting members. Each
- 11 member shall have a reasonable knowledge of health planning,
- 12 health finance, or health care at the time of his or her
- appointment. No person shall be appointed or continue to serve
- as a member of the State Board who is, or whose spouse, parent,
- or child is, a member of the Board of Directors of, has a
- 16 financial interest in, or has a business relationship with a
- 17 health care facility.
- 18 Notwithstanding any provision of this Section to the
- 19 contrary, the term of office of each member of the State Board
- 20 is abolished on the effective date of this amendatory Act of
- 21 the 93rd General Assembly and those members no longer hold
- 22 office.
- The State Board shall be appointed by the Governor, with
- 24 the advice and consent of the Senate. Not more than  $5 \cdot 3$  of the
- 25 appointments shall be of the same political party at the time

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

of the appointment. No person shall be appointed as a State

2 Board member if that person has served, after the effective

date of Public Act 93-41, 2 3-year terms as a State Board

member, except for ex officio non-voting members.

The Secretary of Human Services, the Director of <u>Healthcare</u> and <u>Family Services</u> <u>Public Aid</u>, and the Director of Public Health, or their designated representatives, shall serve as ex-officio, non-voting members of the State Board.

Of those members initially appointed by the Governor under this amendatory Act of the 93rd General Assembly, 2 shall serve for terms expiring July 1, 2005, 2 shall serve for terms expiring July 1, 2006, and 1 shall serve for a term expiring July 1, 2007. Thereafter, each appointed member, including persons appointed to fill the memberships created by this amendatory Act of the 95th General Assembly, shall hold office for a term of 3 years, provided that any member appointed to fill a vacancy occurring prior to the expiration of the term for which his or her predecessor was appointed shall be appointed for the remainder of such term and the term of office of each successor shall commence on July 1 of the year in which his predecessor's term expires. Each member appointed after the effective date of this amendatory Act of the 93rd General Assembly shall hold office until his or her successor is appointed and qualified.

State Board members, while serving on business of the State Board, shall receive actual and necessary travel and

subsistence expenses while so serving away from their places of residence. A member of the State Board who experiences a significant financial hardship due to the loss of income on days of attendance at meetings or while otherwise engaged in the business of the State Board may be paid a hardship allowance, as determined by and subject to the approval of the Governor's Travel Control Board.

The Governor shall designate one of the members to serve as Chairman and shall name as full-time Executive Secretary of the State Board, a person qualified in health care facility planning and in administration. The Agency shall provide administrative and staff support for the State Board. The State Board shall advise the Director of its budgetary and staff needs and consult with the Director on annual budget preparation.

The State Board shall meet at least once each quarter, or as often as the Chairman of the State Board deems necessary, or upon the request of a majority of the members.

Five Three members of the State Board shall constitute a quorum. The affirmative vote of  $\underline{5}$   $\underline{3}$  of the members of the State Board shall be necessary for any action requiring a vote to be taken by the State Board. A vacancy in the membership of the State Board shall not impair the right of a quorum to exercise all the rights and perform all the duties of the State Board as provided by this Act.

A State Board member shall disqualify himself or herself

- 1 from the consideration of any application for a permit or
- 2 exemption in which the State Board member or the State Board
- 3 member's spouse, parent, or child: (i) has an economic interest
- 4 in the matter; or (ii) is employed by, serves as a consultant
- for, or is a member of the governing board of the applicant or
- 6 a party opposing the application.
- 7 (Source: P.A. 93-41, eff. 6-27-03; 93-889, eff. 8-9-04; revised
- 8 8-21-06.)
- 9 (20 ILCS 3960/5) (from Ch. 111 1/2, par. 1155)
- 10 (Section scheduled to be repealed on April 1, 2007)
- 11 Sec. 5. After effective dates set by the State Board, no person shall construct, modify or establish a health care 12 13 facility or acquire major medical equipment without first 14 obtaining a permit or exemption from the State Board. The State 15 Board shall not delegate to the Executive Secretary of the 16 State Board or any other person or entity the authority to grant permits or exemptions whenever the Executive Secretary or 17 18 other person or entity would be required to exercise any discretion affecting the decision to grant a permit or 19 20 exemption. The State Board shall set effective dates applicable 21 to all or to each classification or category of health care 22 facilities and applicable to all or each type of transaction for which a permit is required. Varying effective dates may be 23

set, providing the date or dates so set shall apply uniformly

25 statewide.

24

Notwithstanding any effective dates established by this Act or by the State Board, no person shall be required to obtain a permit for any purpose under this Act until the State health facilities plan referred to in paragraph (4) of Section 12 of this Act has been approved and adopted by the State Board subsequent to public hearings having been held thereon.

A permit or exemption shall be obtained prior to the acquisition of major medical equipment or to the construction or modification of a health care facility which:

- (a) requires a total capital expenditure in excess of the capital expenditure minimum; or
- (b) except for the establishment of swing beds authorized under Title XVIII of the federal Social Security

  Act, substantially changes the scope or changes the functional operation of the facility; or
- (c) changes the bed capacity of a health care facility by increasing the total number of beds or by distributing beds among various categories of service or by relocating beds from one physical facility or site to another by more than 20 10 beds or more than 10% of total bed capacity as defined by the State Board, whichever is less, over a 2 year period.

A permit shall be valid only for the defined construction or modifications, site, amount and person named in the application for such permit and shall not be transferable or assignable. A permit shall be valid until such time as the

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

project has been completed, provided that (a) obligation of the project occurs within 12 months following issuance of the permit except for major construction projects such obligation must occur within 18 months following issuance of the permit; and (b) the project commences and proceeds to completion with due diligence. Major construction projects, for the purposes of this Act, shall include but are not limited to: projects for the construction of new buildings; additions to existing facilities; modernization projects whose cost is in excess of \$1,000,000 or 10% of the facilities' operating revenue, whichever is less; and such other projects as the State Board shall define and prescribe pursuant to this Act. The State Board may extend the obligation period upon a showing of good cause by the permit holder. Permits for projects that have not been obligated within the prescribed obligation period shall expire on the last day of that period.

Persons who otherwise would be required to obtain a permit shall be exempt from such requirement if the State Board finds that with respect to establishing a new facility or construction of new buildings or additions or modifications to an existing facility, final plans and specifications for such work have prior to October 1, 1974, been submitted to and approved by the Department of Public Health in accordance with the requirements of applicable laws. Such exemptions shall be null and void after December 31, 1979 unless binding construction contracts were signed prior to December 1, 1979

- and unless construction has commenced prior to December 31,
- 2 1979. Such exemptions shall be valid until such time as the
- 3 project has been completed provided that the project proceeds
- 4 to completion with due diligence.
- 5 The acquisition by any person of major medical equipment
- 6 that will not be owned by or located in a health care facility
- 7 and that will not be used to provide services to inpatients of
- 8 a health care facility shall be exempt from review provided
- 9 that a notice is filed in accordance with exemption
- 10 requirements.
- 11 Notwithstanding any other provision of this Act, no permit
- or exemption is required for the construction or modification
- of a non-clinical service area of a health care facility.
- 14 (Source: P.A. 91-782, eff. 6-9-00.)
- 15 (20 ILCS 3960/19.6)
- 16 (Section scheduled to be repealed on April 1, 2007)
- Sec. 19.6. Repeal. This Act is repealed on July April 1,
- 18 2012 <del>2007</del>.
- 19 (Source: P.A. 93-41, eff. 6-27-03; 93-889, eff. 8-9-04; 94-983,
- 20 eff. 6-30-06.)
- 21 Section 99. Effective date. This Act takes effect upon
- 22 becoming law.