1997 SESSION

INTRODUCED

HB2016

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1	HOUSE BILL NO. 2016
2	Offered January 13, 1997
3	A BILL to amend and reenact § 32.1-102.1 of the Code of Virginia, relating to certificates of public
4	need.
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6 7	Patron—Brickley
8	Referred to Committee on Health, Welfare and Institutions
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10	Be it enacted by the General Assembly of Virginia:
11	1. That § 32.1-102.1 of the Code of Virginia is amended and reenacted as follows:
12	§ 32.1-102.1. Definitions.
13	As used in this article, unless the context indicates otherwise:
14 15	"Certificate" means a certificate of public need for a project required by this article.
15 16	"Clinical health service" means a single diagnostic, therapeutic, rehabilitative, preventive or palliative procedure or a series of such procedures that may be separately identified for billing and accounting
17	purposes.
18	"Health planning region" means a contiguous geographical area of the Commonwealth with a
19	population base of at least 500,000 persons which is characterized by the availability of multiple levels
20	of medical care services, reasonable travel time for tertiary care, and congruence with planning districts.
21	"Medical care facility," as used in this title, means any institution, place, building or agency, whether
22	or not licensed or required to be licensed by the Board or the State Mental Health, Mental Retardation
23	and Substance Abuse Services Board, whether operated for profit or nonprofit and whether privately
24	owned or privately operated or owned or operated by a local governmental unit, (i) by or in which
25 26	health services are furnished, conducted, operated or offered for the prevention, diagnosis or treatment of human disease, pain, injury, deformity or physical condition, whether medical or surgical, of two or
20 27	more nonrelated mentally or physically sick or injured persons, or for the care of two or more
28	nonrelated persons requiring or receiving medical, surgical or nursing attention or services as acute,
29	chronic, convalescent, aged, physically disabled or crippled, or (ii) which is the recipient of
30	reimbursements from third-party health insurance programs or prepaid medical service plans. For
31	purposes of this article, only the following medical care facilities shall be subject to review:
32	1. General hospitals.
33	2. Sanitariums.
34	3. Nursing homes.
35 36	 Intermediate care facilities. Extended care facilities.
37	6. Mental hospitals.
38	7. Mental retardation facilities.
39	8. Psychiatric hospitals and intermediate care facilities established primarily for the medical,
40	psychiatric or psychological treatment and rehabilitation of alcoholics or drug addicts.
41	9. Specialized centers or clinics or that portion of a physician's office developed for the provision of
42	outpatient or ambulatory surgery, cardiac catheterization, computed tomographic (CT) scanning, gamma
43 44	knife surgery, lithotripsy, magnetic resonance imaging (MRI), magnetic source imaging (MSI), positron
44 45	emission tomographic (PET) scanning, radiation therapy, single photon emission computed tomography (SPECT)nuclear medicine imaging, or such other specialty services as may be designated by the Board
4 6	by regulation.
47	10. Rehabilitation hospitals.
48	11. Any facility licensed as a hospital.
49	The term "medical care facility" shall not include any facility of (i) the Department of Mental Health,
50	Mental Retardation and Substance Abuse Services; or (ii) any nonhospital substance abuse residential
51	treatment program operated by or contracted primarily for the use of a community services board under
52 52	the Department of Mental Health, Mental Retardation and Substance Abuse Services' Comprehensive
53 54	Plan; or (iii) a physician's office, except that portion of a physician's office described above in subdivision 9 of the definition of "medical care facility"; or (iv) the Woodrow Wilson Rehabilitation
54 55	Center of the Department of Rehabilitative Services.
56	"Project" means:

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- "Project" means:1. Establishment of a medical care facility;2. An increase in the total number of beds or operating rooms in an existing medical care facility;3. Relocation at the same site of ten beds or ten percent of the beds, whichever is less, from one 59

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existing physical facility to another in any two-year period; however, a hospital shall not be required to
obtain a certificate for the use of ten percent of its beds as nursing home beds as provided in
§ 32.1-132;

4. Introduction into an existing medical care facility of any new nursing home service, such as intermediate care facility services, extended care facility services, or skilled nursing facility services, regardless of the type of medical care facility in which those services are provided;

5. Introduction into an existing medical care facility of any new cardiac catheterization, computed
tomographic (CT), gamma knife surgery, lithotripsy, magnetic resonance imaging (MRI), magnetic
source imaging (MSI), medical rehabilitation, neonatal special care, obstetrical, open heart surgery,
positron emission tomographic (PET) scanning, psychiatric, organ or tissue transplant service, radiation
therapy, single photon emission computed tomography (SPECT)nuclear medicine imaging, substance
abuse treatment, or such other specialty clinical services as may be designated by the Board by
regulation, which the facility has never provided or has not provided in the previous twelve months;

6. Conversion of beds in an existing medical care facility to medical rehabilitation beds orpsychiatric beds;

75 7. The addition or replacement by an existing medical care facility of any medical equipment for the provision of cardiac catheterization, computed tomographic (CT), gamma knife surgery, lithotripsy, 76 magnetic resonance imaging (MRI), magnetic source imaging (MSI), open heart surgery, positron 77 78 emission tomographic (PET) scanning, radiation therapy, single photon emission computed tomography 79 (SPECT), or other specialized service designated by the Board by regulation. Nothwithstanding Notwithstanding the provisions of this subdivision, the Commissioner shall develop regulations (i) 80 providing for the replacement by a medical care facility of existing medical equipment, which is 81 determined by the Commissioner to be inoperable or otherwise in need of replacement without requiring 82 83 issuance of a certificate of public need, if the applicant agrees to such conditions as the Commissioner 84 may establish, in compliance with regulations promulgated by the Board, requiring the applicant to provide a level of care at a reduced rate to indigents or accept patients requiring specialized care; and 85 (ii) providing for the replacement by a medical care facility of existing medical equipment without the 86 87 issuance of a certificate of public need if the Commissioner has determined a certificate of public need has been previously issued for replacement of the specific equipment; or 88

89 8. Any capital expenditure of five million dollars or more, not defined as reviewable in subdivisions
90 1 through 7 of this definition, by or in behalf of a medical care facility. However, capital expenditures
91 between one and five million dollars shall be registered with the Commissioner pursuant to regulations
92 developed by the Board.

"Regional health planning agency" means the regional agency, including the regional health planning
board, its staff and any component thereof, designated by the Virginia Health Planning Board to perform
the health planning activities set forth in this chapter within a health planning region.

96 "State Medical Facilities Plan" means the planning document adopted by the Board of Health which
97 shall include, but not be limited to, (i) methodologies for projecting need for medical care facility beds
98 and services; (ii) statistical information on the availability of medical care facilities and services; and
99 (iii) procedures, criteria and standards for review of applications for projects for medical care facilities
100 and services.

101 "Virginia Health Planning Board" means the statewide health planning body established pursuant to
 102 § 32.1-122.02 which serves as the analytical and technical resource to the Secretary of Health and
 103 Human Resources in matters requiring health analysis and planning.