

IC 16-29

**ARTICLE 29. LIMITATIONS ON VARIOUS HEALTH
SERVICE BEDS**

IC 16-29-1

Repealed

(Repealed by P.L.1-2001, SEC.51.)

IC 16-29-2

Chapter 2. Specialized Services

IC 16-29-2-1

"Comprehensive care bed" defined

Sec. 1. As used in this chapter, "comprehensive care bed" means a comprehensive care bed that is used solely for a patient who has been diagnosed as having one (1) of the following conditions:

- (1) Medically stable twelve (12) to twenty-four (24) hours each day and ventilator dependent.
- (2) Medically stable brain and high spinal cord traumatized or has a major progressive neuromuscular disease.
- (3) Infected by the human immunodeficiency virus (HIV).

As added by P.L.2-1993, SEC.12.

IC 16-29-2-2

Application for specialized services comprehensive care beds

Sec. 2. An applicant may file an application with the state department for the addition or conversion of beds to comprehensive care beds to be used solely for providing specialized services to patients who have a diagnosis described in section 1 of this chapter.

As added by P.L.2-1993, SEC.12.

IC 16-29-2-3

Review of applications for beds to be certified for participation in state or federal reimbursement program

Sec. 3. The state department shall review all applications for a certificate of need for comprehensive care beds under this chapter that are to be certified for participation in a state or federal reimbursement program, including programs under Title XVIII or Title XIX of the Social Security Act (42 U.S.C. 1395 et seq. or 42 U.S.C. 1396 et seq.).

As added by P.L.2-1993, SEC.12.

IC 16-29-2-4

Findings and recommendations

Sec. 4. (a) The state department shall make a finding based on information prepared by the state department in accordance with IC 16-30 and any other relevant information about the need for the comprehensive care beds under this chapter or the certification of comprehensive care beds as requested in the application.

(b) The state department shall recommend and approve a certificate of need for additional comprehensive care beds or the certification of comprehensive care beds only after finding that the certification or addition of comprehensive care beds in the county is necessary and that the applicant for a certificate of need has illustrated or documented the applicant's experience or capacity to provide quality, effective, and efficient care that includes a

description of any past or current adverse licensure action against any facility owned, operated, or managed by the applicant.

As added by P.L.2-1993, SEC.12.

IC 16-29-2-5

Review and approval requirement under certain circumstances

Sec. 5. (a) Comprehensive care beds may not be constructed or added and beds may not be converted to comprehensive care beds without the review and approval required in this chapter.

(b) Comprehensive care beds that are not certified for participation in a state or federal reimbursement program, including programs under Title XVIII or Title XIX of the federal Social Security Act (42 U.S.C. 1395 et seq. or 42 U.S.C. 1396 et seq.), shall not be certified without the review and approval required in this chapter.

(c) The review and approval required in this chapter is a condition to the licensure of the facility.

As added by P.L.2-1993, SEC.12.

IC 16-29-2-6

Certificate of need voidable; conditions

Sec. 6. A certificate of need for a project to construct, add, or convert beds that receives final approval of the state department under this chapter or IC 16-10-4 (before its repeal) becomes void eighteen (18) months after the determination becomes final unless the following conditions are met:

(1) Construction plans for the project are approved by the state department and the department of fire and building safety.

(2) The applicant has completed construction of the project's foundation in conformity with the approved plans as certified by an independent architect licensed under IC 25-4 or an independent professional engineer licensed under IC 25-31.

(3) Construction work on the project is continuous and in conformity with the approved plans.

As added by P.L.2-1993, SEC.12. Amended by P.L.1-1993, SEC.170.

IC 16-29-2-7

Ownership interest in certificates of need; transfer or alienation

Sec. 7. The individual, partnership, corporation, or other legal entity to whom a certificate of need has been granted after the review and approval required by this chapter is the owner of the certificate of need until the individual or legal entity transfers or alienates that ownership interest in the certificate. Unless the certificate of need expires or is voided, the issued certificate of need is the personal property of the owner and is freely transferable or alienable, except that the certificate of need may not be used outside of the county with respect to which the certificate was issued.

As added by P.L.2-1993, SEC.12.

IC 16-29-2-8

Rules; fees

Sec. 8. (a) The state department shall adopt rules under IC 4-22-2 to implement this chapter and to establish a reasonable fee for filing and review of an application under this chapter. Notwithstanding IC 16-21-1-9 or IC 16-21-1-10, a rule adopted under this chapter may not be waived.

(b) Fees imposed in connection with the certificate of need review under this article are payable to the state department for use in administration of the certificate of need program created by this chapter.

As added by P.L.2-1993, SEC.12. Amended by P.L.156-2011, SEC.28.

IC 16-29-3

Chapter 3. Hospital Conversion of Beds

IC 16-29-3-1

Conversion of acute care beds to comprehensive care beds to be certified for participation in state or federal reimbursement program

Sec. 1. A hospital licensed under IC 16-21-2 may convert:

(1) not more than thirty (30) acute care beds to skilled care comprehensive long term care beds; and

(2) not more than an additional twenty (20) acute care beds to either intermediate care comprehensive long term care beds or skilled care comprehensive long term care beds;

that are to be certified for participation in a state or federal reimbursement program, including a program under Title XVIII of the Social Security Act (42 U.S.C. 1395 et seq.) or the state Medicaid program, if those beds will function essentially as beds licensed under IC 16-28.

As added by P.L.2-1993, SEC.12. Amended by P.L.96-2006, SEC.1.

IC 16-29-3-2

License requirement

Sec. 2. If the number of comprehensive care beds in a hospital licensed under IC 16-21-2 that function essentially as beds licensed under IC 16-28 exceeds fifty percent (50%) of the beds in the hospital, the comprehensive care beds must be licensed under IC 16-28.

As added by P.L.2-1993, SEC.12.

IC 16-29-3-3

Administrative review

Sec. 3. A decision of the state department under this chapter is subject to review under IC 4-21.5. IC 16-28-10 applies to review hearings and appeals.

As added by P.L.2-1993, SEC.12. Amended by P.L.156-2011, SEC.29; P.L.197-2011, SEC.70.

IC 16-29-4

Chapter 4. ICF/MR Beds

IC 16-29-4-1

Application of chapter

Sec. 1. This chapter applies to the following:

- (1) The conversion of existing health facility beds to ICF/IID beds.
- (2) The construction of new ICF/IID facilities after June 30, 1987.

As added by P.L.2-1993, SEC.12. Amended by P.L.35-2016, SEC.81.

IC 16-29-4-2

"ICF/IID"

Sec. 2. (a) As used in this chapter, "ICF/IID" refers to an intermediate care facility for individuals with intellectual disabilities.

(b) The term does not include a facility administered under IC 12-11-1.1 or IC 12-22-2.

As added by P.L.2-1993, SEC.12. Amended by P.L.272-1999, SEC.50; P.L.35-2016, SEC.82.

IC 16-29-4-3

Preliminary approval of proposed project

Sec. 3. Before the conversion of existing health facility beds to ICF/IID beds or the construction of a new ICF/IID facility, the state department may issue a preliminary approval of the proposed project, but only if the state department determines that there is an insufficient number of available beds to care for all the persons who are determined under IC 12-11-2.1 to be appropriate for placement in an ICF/IID facility.

As added by P.L.2-1993, SEC.12. Amended by P.L.272-1999, SEC.51; P.L.156-2011, SEC.30; P.L.197-2011, SEC.71; P.L.6-2012, SEC.118; P.L.141-2014, SEC.14; P.L.35-2016, SEC.83.

IC 16-29-4-4

Number of beds; limit; licensing of facility

Sec. 4. A proposed project that receives preliminary approval under this chapter may not add more beds than the number determined by the state department to be necessary to provide an available bed for each person determined under IC 12-11-2.1 to be appropriate for placement in an ICF/IID facility. Upon completion of the proposed project and compliance with the other requirements for licensure under IC 16-28, the state department shall issue a license to the facility.

As added by P.L.2-1993, SEC.12. Amended by P.L.272-1999, SEC.52; P.L.156-2011, SEC.31; P.L.197-2011, SEC.72; P.L.6-2012, SEC.119; P.L.141-2014, SEC.15; P.L.35-2016, SEC.84.

IC 16-29-5

Chapter 5. Miscellaneous Provisions

IC 16-29-5-1

Compulsory medical treatment or examination not required

Sec. 1. This article does not authorize or require any form of compulsory medical treatment or physical or mental examination of any person who:

(1) is a resident, a guest, a patient, an employee, a registrant, or an enrollee of an exempt institution specified in IC 16-18-2-167(c); and

(2) is being treated by prayer or spiritual means alone for healing;

or deny to the person the right to rely solely upon prayer or spiritual means by receiving only the treatment given by an accredited practitioner of the religious denomination known as the Church of Christ, Scientist, if the laws pertaining to the safe condition of the premises, cleanliness of the operation of the premises, and the physical equipment on the premises are complied with.

As added by P.L.2-1993, SEC.12. Amended by P.L.2-1995, SEC.71.

IC 16-29-6

Expired

(Expired 7-1-2015 by P.L.257-2015, SEC.5.)