SENATE ENROLLED ACT No. 460

AN ACT to amend the Indiana Code concerning health.

Be it enacted by the General Assembly of the State of Indiana:

SECTION 1. IC 16-18-2-67, AS AMENDED BY P.L.229-2011, SECTION 155, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 2, 2015]: Sec. 67. (a) "Comprehensive care bed", for purposes of IC 16-28-2.5, has the meaning set forth in IC 16-28-2.5-2.

(b) "Comprehensive care bed", for purposes of IC 16-29-2, has the meaning set forth in IC 16-29-2-1.

SECTION 2. IC 16-18-2-67.1 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 2, 2015]: Sec. 67.1. "Comprehensive care health facility", for purposes of IC 16-28-2.5, has the meaning set forth in IC 16-28-2.5-3.

SECTION 3. IC 16-18-2-316.6 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 2, 2015]: Sec. 316.6. "Replacement facility", for purposes of IC 16-28-2.5, has the meaning set forth in IC 16-28-2.5-4.

SECTION 4. IC 16-28-2.5 IS ADDED TO THE INDIANA CODE AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE SEA 460 — Concur
Chapter 2.5. Licensure and Certification Limitations

Sec. 1. This chapter does not apply to the conversion of acute care beds to comprehensive care beds under IC 16-29-3.

Sec. 2. (a) As used in this chapter, "comprehensive care bed" means a bed that:

(1) is within a comprehensive care health facility licensed under IC 16-28-2;
(2) functions as a bed within a comprehensive care health facility licensed under IC 16-28-2; or
(3) is otherwise subject to this article.

(b) The term does not include a comprehensive care bed that will be used solely to provide specialized services.

Sec. 3. As used in this chapter, "comprehensive care health facility" means a health facility that provides:

(1) nursing care;
(2) room;
(3) food;
(4) laundry;
(5) administration of medications;
(6) special diets; and
(7) treatments;

and that may provide rehabilitative and restorative therapies under the order of an attending physician.

Sec. 4. As used in this chapter, "replacement facility" means a new comprehensive care health facility licensed under or subject to this article after July 1, 2015, that:

(1) is constructed to take the place of an existing comprehensive care health facility that is licensed before July 2, 2015;
(2) is constructed within the same county as the existing comprehensive care health facility licensed before July 2, 2015; and
(3) contains no more comprehensive care beds than the existing comprehensive care health facility licensed before July 2, 2015.

Sec. 5. As used in this chapter, "under development" refers to a health facility license application:

(1) to add, construct, or convert comprehensive care beds in a comprehensive care health facility that:
(A) is licensed under;
(B) is to be licensed under;
(C) is subject to; or
(D) will be subject to;
this article; and

(2) that meets all the following:
  (A) Funding to construct the comprehensive care health facility has been secured and is actively being drawn upon or otherwise used to further and complete construction.
  (B) Zoning requirements have been met.
  (C) Complete construction design plans for the comprehensive care health facility have been submitted to the state department and the division of fire and building safety not later than March 1, 2015. The construction design plans must be an accurate and true depiction of the comprehensive care health facility that the applicant intends to construct. However, the construction design plans may be modified to make technical changes, correct errors and omissions, or comply with zoning or other requirements from a governmental entity.
  (D) Active and ongoing construction activities progressing to completion of the project are occurring at the project site.

Sec. 6. (a) Except as provided in subsection (b), the state department may not approve the following:

(1) The licensure of:
   (A) comprehensive care health facilities; or
   (B) new or converted comprehensive care beds.

(2) The certification of new or converted comprehensive care beds for participation in the state Medicaid program unless the statewide comprehensive care bed occupancy rate is more than ninety-five percent (95%), as calculated annually on January 1 by the state department.

(3) Transfer between any comprehensive care facilities of licensed comprehensive care beds or comprehensive care bed certifications for participation in the state Medicaid program.

Beds in a health facility that provides residential nursing care under IC 16-28 may not be converted to comprehensive care beds.

(b) This section does not apply to the following:

(1) A comprehensive care health facility that:
   (A) is licensed under;
   (B) is to be licensed under;
   (C) is subject to; or
   (D) will be subject to;

SEA 460 — Concur
this article and that is under development as of July 1, 2015.

(2) A small house health facility approved under section 7 of this chapter.

(3) A replacement facility, whether or not the replacement facility is under development before July 2, 2015. The existing comprehensive care health facility that is being replaced by the replacement facility:

(A) must no longer be licensed as a comprehensive care health facility sixty (60) days after the replacement facility obtains its license from the state department; and

(B) may transfer any of the comprehensive care beds to the replacement facility.

(4) A continuing care retirement community that was registered under IC 23-2 before July 2, 2015, and that continuously maintains its registration under IC 23-2. If a continuing care retirement community fails to maintain registration under IC 23-2 after July 1, 2015, the comprehensive care beds, including beds certified for use in the state Medicaid program or the Medicare program, that the continuing care retirement community previously operated are not forfeited as long as the continuing care retirement community continues to comply with the licensure and certification requirements of this article.

(5) A comprehensive care health facility or a comprehensive care bed that is to be added or certified in the state Medicaid program in a county where the county's comprehensive care bed occupancy rate exceeds ninety percent (90%), as calculated by the state department on January 1 and July 1 of each year. The number of comprehensive care beds allowed under this subdivision may not exceed either:

(A) the number of beds that would cause the county occupancy rate to fall below the statewide average; or

(B) seventy (70) comprehensive care beds per applicant.

(6) A comprehensive care health facility that undergoes a change of ownership for purposes of:

(A) the granting of a license by the state department to operate the comprehensive care health facility; and

(B) the maintenance for any of the beds in the comprehensive care health facility, including Medicaid certified beds, by the entity granted a license by the state department.

However, after the change of ownership, the comprehensive
care health facility is subject to subsection (a) unless the comprehensive care health facility meets the requirements under another subdivision under this subsection.

(c) The state department shall make the final determination concerning whether an entity has met or is meeting the requirements of this chapter concerning being under development.

Sec. 7. (a) A small house health facility that is applying for licensure under this article, including an entity related to the small house health facility through common ownership or control, may apply to the state department for licensure or Medicaid certification of not more than fifty (50) comprehensive care beds for small house health facilities per year.

(b) The state department may not approve licensure or Medicaid certification of more than one hundred (100) new comprehensive care beds per year that are designated for small house health facilities.

(c) The state department shall approve an application for licensure or Medicaid certification for a small house health facility:

(1) in the order of the completed application date; and

(2) if the small house health facility applicant meets the definition of a small house health facility and the requirements of this section.

(d) A person that fails to complete construction and begin operation of a small house health facility within twelve (12) months after the state department's approval of a license under this article forfeits the person's right to any licensed or Medicaid certified comprehensive care bed that was previously approved by the state department if:

(1) another person has applied to the state department for approval of licensed or Medicaid certified comprehensive care beds for a small house health facility; and

(2) the person's application was denied for the sole reason that the maximum number of Medicaid licensed or certified comprehensive care beds specified in this section has been approved by the state department.

Sec. 8. This chapter expires June 30, 2018.

SECTION 5. IC 16-29-6-9, AS ADDED BY P.L.229-2011, SECTION 164, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JUNE 30, 2015]: Sec. 9. This chapter expires at 11:59 p.m. July 1, 2016.
President of the Senate

President Pro Tempore

Speaker of the House of Representatives

Governor of the State of Indiana

Date: ________________  Time: ________________

SEA 460 — Concur