SUBSTITUTE FOR SENATE BILL NO. 1160

A bill to amend 1978 PA 368, entitled "Public health code,"

by amending section 22210 (MCL 333.22210), as amended by 2014 PA 165.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

- Sec. 22210. (1) Subject to this section, a hospital that
 applies to the department for a certificate of need and meets all
 of the following criteria shall be granted a certificate of need
 for an extended care services program with up to 10 licensed
- 5 hospital beds:
- 6 (a) Is eligible to apply for certification as a provider of
 7 extended care services through the use of swing beds under section
 8 1883 of title XVIII, 42 USC 1395tt.



- (b) Subject to subsection (2), has fewer than 100 licensed
 beds not counting beds excluded under section 1883 of title XVIII,
 42 USC 1395tt.
- 4 (c) Does not have uncorrected licensing, certification, or
 5 safety deficiencies for which the department or the bureau of fire
 6 services created in section 1b of the fire prevention code, 1941 PA
 7 207, MCL 29.1b, or both, has not accepted a plan of correction.
- 8 (d) Provides evidence satisfactory to the department that the
 9 hospital has had difficulty in placing patients in skilled nursing
 10 home beds during the 12 months immediately preceding the date of
 11 the application.
 - (2) After October 1, 1990, the criteria set forth in subsection (1)(b) may be modified by the commission, using the procedure set forth in section 22215(3). The department shall not charge a fee for processing a certificate of need application to initiate an extended care services program.
- 17 (3) A hospital that is granted a certificate of need for an
 18 extended care services program under subsection (1) shall comply
 19 with all of the following:
- (a) Not charge for or otherwise attempt to recover the cost of
 a length of stay for a patient in the extended care services
 program that exceeds the length of time allowed for post-hospital
 extended care under title XVIII.
- (b) Admit patients to the extended care services program only
 pursuant to under an admissions contract approved by the
 department.
- (c) Subject to subdivision (f), not discharge or transfer a patient from a licensed hospital bed other than a hospital long-term care unit bed and admit that patient to the extended care

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- services program unless the discharge or transfer and admission isdetermined medically appropriate by the attending physician.
- 3 (d) Permit access to a representative of an organization
 4 approved under section 21764 to patients admitted to the extended
 5 care services program, for all of the purposes described in section
 6 21763.
 - (e) Not allow the number of patient days for the extended care services program to exceed the equivalent of 1,825 patient days for a single state fiscal year.
 - (f) Not provide extended care services in a swing bed if the hospital owns or operates a hospital long-term care unit that has beds available at the time a patient requires admission for extended care services.
 - (g) Not charge or collect from a patient admitted to the extended care services program, for services rendered as part of the extended care services program, an amount in excess of the reasonable charge for the services as determined by the secretary of the United States department of health and human services

 Department of Health and Human Services under title XVIII.
 - (h) Assist a patient who has been denied coverage for services received in an extended care services program under title XVIII to file an appeal with the medicare Medicare recovery project operated by the office of services to the aging.
 - (i) Operate the extended care services program pursuant to this section and the provisions of section 1883 of title XVIII, 42 USC 1395tt, that are applicable to the extended care services program.
- 28 (j) Provide data to the department considered necessary by the
 29 department to evaluate the extended care services program. The data



- 1 shall include, but not be limited to, all of the following:
- 2 (i) The total number of patients admitted to the hospital's
 3 extended care services program during the period specified by the
 4 department.
- (ii) The total number of extended care services patient days
 for the period specified by the department.
 - (iii) Information identifying the type of care to which patients in the extended care services program are released.
- 9 (j) (k) As part of the hospital's policy describing the rights
 10 and responsibilities of patients admitted to the hospital, as
 11 required under section 20201, incorporate all of the following
 12 additional rights and responsibilities for patients in the extended
 13 care services program:
 - (i) A copy of the hospital's policy shall must be provided to each extended care services patient upon on admission, and the staff of the hospital shall must be trained and involved in the implementation of the policy.
- 17 18 (ii) Each extended care services patient may associate and 19 communicate privately with persons of his or her choice. 20 Reasonable, regular visiting hours, which shall must take into 21 consideration the special circumstances of each visitor, shall must 22 be established for extended care services patients to receive 23 visitors. An extended care services patient may be visited by the patient's attorney or by representatives of the departments named 24 25 in section 20156 during other than established visiting hours. 26 Reasonable privacy shall must be afforded for visitation of an 27 extended care services patient who shares a room with another extended care services patient. Each extended care services patient 28

shall must have reasonable access to a telephone.

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- (iii) An extended care services patient is entitled to retain
 and use personal clothing and possessions as space permits, unless
 medically contraindicated, as documented by the attending physician
 in the medical record.
- 5 (iv) An extended care services patient is entitled to the opportunity to participate in the planning of his or her medical 6 7 treatment, including the development of the discharge plan under subdivision $\frac{m}{l}$ (1). An extended care services patient shall must 8 9 be fully informed by the attending physician of the extended care services patient's medical condition, unless medically 10 11 contraindicated, as documented by a physician in the medical 12 record. Each extended care services patient shall must be afforded 13 the opportunity to discharge himself or herself from the extended 14 care services program.
 - (v) An extended care services patient is entitled to be fully informed either before or at the time of admission, and during his or her stay, of services available in the hospital and of the related charges for those services. The statement of services provided by the hospital shall must be in writing and shall must include those services required to be offered on an as needed basis.
 - (vi) A patient in an extended care services program or a person authorized in writing by the patient may, upon on submission to the hospital of a written request, inspect and copy the patient's personal or medical records. The hospital shall make the records available for inspection and copying within a reasonable time, not exceeding 7 days, after the receipt of the written request.
- (vii) An extended care services patient has the right to have his or her parents, if the extended care services patient is a

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- 1 minor, or his or her spouse, next of kin, or patient's
- 2 representative, if the extended care services patient is an adult,
- 3 stay at the hospital 24 hours a day if the extended care services
- 4 patient is considered terminally ill by the physician responsible
- 5 for the extended care services patient's care.
- 6 (viii) Each extended care services patient shall must be
- 7 provided with meals that meet the recommended dietary allowances
- 8 for that patient's age and sex and that may be modified according
- 9 to special dietary needs or ability to chew.
- 10 (ix) Each extended care services patient has the right to
- 11 receive a representative of an organization approved under section
- 12 21764, for all of the purposes described in section 21763.
- (k) (l)—Achieve and maintain $\frac{\text{medicare}}{\text{Medicare}}$ certification
- 14 under title XVIII.
- 15 (l) (m) Establish a discharge plan for each extended care
- 16 services patient who is admitted to the extended care services
- 17 program. In the discharge plan, the hospital shall emphasize
- 18 patient choice in receiving extended care services in the most
- 19 appropriate and least restrictive setting. The hospital shall
- 20 provide to the patient or his or her authorized representative a
- 21 copy of the discharge plan not later than 3 days after the patient
- 22 is admitted to the extended care services program.
- 23 (4) Beginning January 1, 2021, a hospital that is granted a
- 24 certificate of need for an extended care services program under
- 25 subsection (1) shall submit a report to the department in a form
- 26 and manner prescribed by the department that includes, but is not
- 27 limited to, all of the following information:
- 28 (a) The total number of patients admitted to the hospital's
- 29 extended care services program during the period specified by the

1 department.

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- 2 (b) The total number of extended care services patient days
 3 for the period specified by the department.
 - (c) Information that identifies the type of care to which patients in the extended care services program are released.
 - (d) Any other information considered necessary to the department to evaluate the extended care services program.
 - (5) $\frac{(4)}{A}$ hospital or the owner, an administrator, an employee, or a representative of the hospital shall not discharge, harass, or retaliate or discriminate against an extended care services patient because the extended care services patient has exercised a right described in subsection $\frac{(3)}{(k)}$. (3) (j).
 - (6) $\frac{(5)}{}$ In the case of an extended care services patient, the rights described in subsection $\frac{(3)}{k}\frac{(iv)}{(iv)}$ (3) (j) (iv) may be exercised by the patient's representative, as **that term is** defined in section $\frac{21703}{2}$.21703.
- 17 (7) (6) An extended care services patient shall must be fully 18 informed, as evidenced by the extended care services patient's 19 written acknowledgment, before or at the time of admission and 20 during stay, of the rights described in subsection $\frac{(3)(k)}{(3)}$. 21 The written acknowledgment shall must provide that if an extended 22 care services patient is adjudicated incompetent and not restored 23 to legal capacity, a person designated by the extended care 24 services patient shall exercise the rights and responsibilities set 25 forth in subsection (3) (k) (3) (j). shall be exercised by a person 26 designated by the extended care services patient. The hospital 27 shall provide proper forms for the extended care services patient 28 to provide for the designation of this person at the time of 29 admission.

- (8) (7)—Subsection (3) (k)—(3) (j) does not prohibit a hospital
 from establishing and recognizing additional rights for extended
 care services patients.
- 4 (9) (8)—A hospital that violates subsection (3) is subject to the penalty provisions of section 20165.
- (10) (9)—A person shall not initiate an extended care services
 program without first obtaining a certificate of need under this
 section.
- 9 (11) $\frac{(10)}{}$ As used in this section:
- (a) "Extended care services program" means a program by a
 hospital to provide extended care services to a patient through the
 use of swing beds under section 1883 of title XVIII, 42 USC 1395tt.
- 13 (b) "Hospital long-term care unit" means that term as defined14 in section 20106.

