## **HOUSE BILL NO. 5074**

June 22, 2021, Introduced by Reps. Kahle, Howell, Wozniak, Yaroch and Cambensy and referred to the Committee on Health Policy.

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

by amending section 22215 (MCL 333.22215), as amended by 2002 PA 619.

## THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

- 1 Sec. 22215. (1) The commission shall do all of the following:
- 2 (a) If determined necessary by the commission, revise, add to,
- 3 or delete 1 or more of the covered clinical services listed in
- 4 section 22203. If the commission proposes to add to the covered

- 1 clinical services listed in section 22203, the commission shall
- 2 develop proposed review standards and make the review standards
- 3 available to the public not less than 30 days before conducting a
- 4 hearing under subsection (3).
- 5 (b) Develop, approve, disapprove, or revise certificate of
- 6 need review standards that establish for purposes of section 22225
- 7 the need, if any, for the initiation, replacement, or expansion of
- 8 covered clinical services, the acquisition or beginning the
- 9 operation of a health facility, making changes in bed capacity, or
- 10 making covered capital expenditures, including conditions,
- 11 standards, assurances, or information that must be met,
- 12 demonstrated, or provided by a person who applies for a certificate
- 13 of need. A certificate of need review standard may also establish
- 14 ongoing quality assurance requirements including any or all of the
- 15 requirements specified in section 22225(2)(c). Except for nursing
- 16 home and hospital long-term care unit bed review standards, by
- 17 January 1, 2004, the commission shall revise all certificate of
- 18 need review standards to must include a requirement that each
- 19 applicant participate in title XIX of the social security act,
- 20 chapter 531, 49 Stat. 620, 1396r-6 and 1396r-8 to 1396v.42 USC 1396
- 21 to 1396w-5. If the commission proposes to develop, approve,
- 22 disapprove, or revise certificate of need review standards under
- 23 this subsection, the commission shall make the proposed review
- 24 standards available to the public not less than 30 days before
- 25 conducting a hearing under subsection (3).
- (c) Direct the department to prepare and submit
- 27 recommendations regarding commission duties and functions that are
- 28 of interest to the commission including, but not limited to,
- 29 specific modifications of proposed actions considered under this

1 section.

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- 2 (d) Approve, disapprove, or revise proposed criteria for3 determining health facility viability under section 22225.
- 4 (e) Annually assess the operations and effectiveness of the
  5 certificate of need program based on periodic reports from the
  6 department and other information available to the commission.
- 7 (f) By January 1, 2005 , and of every 2 years thereafter, odd
  8 year, make recommendations to the joint committee regarding
  9 statutory changes to improve or eliminate the certificate of need
  10 program.
- (h) Develop, approve, disapprove, or revise certificate ofneed review standards governing the acquisition of new technology.
- (i) In accordance with section 22255, approve, disapprove, orrevise proposed procedural rules for the certificate of needprogram.
- (j) Consider the recommendations of the department and the
  department of the attorney general as to the administrative
  feasibility and legality of proposed actions under subdivisions
  (a), (b), and (c).
  - (k) Consider the impact of a proposed restriction on the acquisition of or availability of covered clinical services on the quality, availability, and cost of health services in this state.
- (1) If the commission determines it necessary, appoint standard
  advisory committees to assist in the development of proposed
  certificate of need review standards. A standard advisory committee

- 1 shall complete its duties under this subdivision and submit its
- 2 recommendations to the commission within 6 months unless a shorter
- 3 period of time is specified by the commission when the standard
- 4 advisory committee is appointed. An individual shall serve on no
- 5 more than 2 standard advisory committees in any 2-year period. The
- 6 composition of a standard advisory committee shall must not include
- 7 a lobbyist registered under 1978 PA 472, MCL 4.411 to 4.431, but
- 8 shall must include all of the following:
- $\mathbf{9}$  (i) Experts with professional competence in the subject matter
- 10 of the proposed standard, who shall must constitute a 2/3 majority
- 11 of the standard advisory committee.
- (ii) Representatives of health care provider organizations
- 13 concerned with licensed health facilities or licensed health
- 14 professions.
- 15 (iii) Representatives of organizations concerned with health
- 16 care consumers and the purchasers and payers of health care
- 17 services.
- 18 (m) In addition to subdivision (b), review and, if necessary,
- 19 revise each set of certificate of need review standards at least
- 20 every 3 years.
- 21 (n) If a standard advisory committee is not appointed by the
- 22 commission and the commission determines it necessary, submit a
- 23 request to the department to engage the services of private
- 24 consultants or request the department to contract with any private
- 25 organization for professional and technical assistance and advice
- 26 or other services to assist the commission in carrying out its
- 27 duties and functions under this part.
- 28 (o) Within 6 months after the appointment and confirmation of
- 29 the 6 additional commission members under section 22211, develop,

- 1 approve, or revise certificate of need review standards governing
- 2 the increase of licensed beds in a hospital licensed under part
- 3 215, the physical relocation of hospital beds from 1 licensed site
- 4 to another geographic location, and the replacement of beds in a
- 5 hospital licensed under part 215.
- (2) The commission shall exercise its duties under this part
   to promote and assure ensure all of the following:
- 8 (a) The availability and accessibility of quality health
- 9 services at a reasonable cost and within a reasonable geographic
- 10 proximity for all people in this state.
- 11 (b) Appropriate differential consideration of the health care
- 12 needs of residents in rural counties in ways that do not compromise
- 13 the quality and affordability of health care services for those
- 14 residents.
- 15 (3) Not less than 30 days before final action is taken by the
- 16 commission under subsection (1)(a), (b), (d), (h), or (o), the
- 17 commission shall conduct a public hearing on its proposed action.
- 18 In addition, not less than 30 days before final action is taken by
- 19 the commission under subsection (1)(a), (b), (d), (h), or (o), the
- 20 commission chairperson shall submit the proposed action and a
- 21 concise summary of the expected impact of the proposed action for
- 22 comment to each member of the joint committee. The commission shall
- 23 inform the joint committee of the date, time, and location of the
- 24 next meeting regarding the proposed action. The joint committee
- 25 shall promptly review the proposed action and submit its
- 26 recommendations and concerns to the commission.
- 27 (4) The Within 30 days following a public hearing for a
- 28 proposed action, the commission chairperson shall submit the
- 29 proposed final action including a concise summary of the expected

- 1 impact of the proposed final action together with a copy of all
- 2 written and recorded public testimony to the governor and each
- 3 member of the joint committee. The governor or the legislature may
- 4 disapprove the proposed final action within 45 days after the date
- 5 of submission. If the proposed final action is not submitted on a
- 6 legislative session day, the 45 days commence on the first
- 7 legislative session day after the proposed final action is
- 8 submitted. The 45 days shall must include not less than 9
- 9 legislative session days. Legislative disapproval shall must be
- 10 expressed by concurrent resolution which shall must be adopted by
- 11 each house of the legislature. The concurrent resolution shall must
- 12 state specific objections to the proposed final action. A proposed
- 13 final action by the commission under subsection (1)(a), (b), (d),
- 14 (h), or (o) is not effective if it has been disapproved under this
- 15 subsection. If the proposed final action is not disapproved under
- 16 this subsection, it is effective and binding on all persons
- 17 affected by this part upon the expiration of the 45-day period or
- 18 on a later date specified in the proposed final action. As used in
- 19 this subsection, "legislative session day" means each day in which
- 20 a quorum of either the house of representatives or the senate,
- 21 following a call to order, officially convenes in Lansing to
- 22 conduct legislative business.
- 23 (5) The commission shall not develop, approve, or revise a
- 24 certificate of need review standard that requires the payment of
- 25 money or goods or the provision of services unrelated to the
- 26 proposed project as a condition that must be satisfied by a person
- 27 seeking a certificate of need for the initiation, replacement, or
- 28 expansion of covered clinical services, the acquisition or
- 29 beginning the operation of a health facility, making changes in bed

- 1 capacity, or making covered capital expenditures. This subsection
- 2 does not preclude a requirement that each applicant participate in
- 3 title XIX of the social security act, chapter 531, 49 Stat. 620,
- 4 1396r-6 and 1396r-8 to 1396v, 42 USC 1396 to 1396w-5, or a
- 5 requirement that each applicant provide covered clinical services
- 6 to all patients regardless of his or her ability to pay.
- 7 (6) If the reports received under section 22221(f) indicate
- 8 that the certificate of need application fees collected under
- 9 section 20161 have not been within 10% of 3/4 the cost to the
- 10 department of implementing this part, the commission shall make
- 11 recommendations regarding the revision of those fees so that the
- 12 certificate of need application fees collected equal approximately
- 13 3/4 of the cost to the department of implementing this part.
- 14 (7) As used in this section, "joint committee" means the joint
- 15 committee created under section 22219.