

MAINE STATE LEGISLATURE

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127th MAINE LEGISLATURE

FIRST REGULAR SESSION-2015

Legislative Document

No. 751

H.P. 504

House of Representatives, March 5, 2015

**An Act To Provide Consideration of the Need for Nursing Facility
Beds in the Area Where They Are Located before Those Beds Are
Lost**

Reference to the Committee on Health and Human Services suggested and ordered printed.

A handwritten signature in cursive script that reads "R B. Hunt".

ROBERT B. HUNT
Clerk

Presented by Representative STUCKEY of Portland.
Cosponsored by Representatives: FARNSWORTH of Portland, SANBORN of Gorham.

1 **Be it enacted by the People of the State of Maine as follows:**

2 **Sec. 1. 22 MRSA §335, sub-§1, ¶D**, as amended by PL 2011, c. 424, Pt. B, §15
3 and affected by Pt. E, §1, is further amended to read:

4 D. Does not result in inappropriate increases in service utilization, according to the
5 principles of evidence-based medicine adopted by the Maine Quality Forum, as
6 established in Title 24-A, section 6951, when the principles adopted by the Maine
7 Quality Forum are directly applicable to the application; ~~and~~

8 **Sec. 2. 22 MRSA §335, sub-§1, ¶F**, as enacted by PL 2011, c. 424, Pt. B, §15
9 and affected by Pt. E, §1, is amended to read:

10 F. In the case of a nursing facility project that proposes to add new nursing facility
11 beds to the inventory of nursing facility beds within the State, is consistent with the
12 nursing facility MaineCare funding pool and other applicable provisions of sections
13 333-A and 334-A; ~~and~~

14 **Sec. 3. 22 MRSA §335, sub-§1, ¶G** is enacted to read:

15 G. In the case of a nursing facility project that proposes to add new nursing facility
16 beds as a result of the closing or reducing of beds in a different geographical area of
17 the State, meets the requirements in subsection 7.

18 **Sec. 4. 22 MRSA §335, sub-§7, ¶D**, as amended by PL 2003, c. 469, Pt. C, §11,
19 is further amended to read:

20 D. The proposed services are consistent with the orderly and economic development
21 of health facilities and health resources for the State as demonstrated by:

22 (1) The impact of the project on total health care expenditures after taking into
23 account, to the extent practical, both the costs and benefits of the project and the
24 competing demands in the local service area and statewide for available resources
25 for health care;

26 (2) The availability of state funds to cover any increase in state costs associated
27 with utilization of the project's services; and

28 (3) The likelihood that more effective, more accessible or less costly alternative
29 technologies or methods of service delivery may become available; ~~and~~

30 **Sec. 5. 22 MRSA §335, sub-§7, ¶E**, as enacted by PL 2003, c. 469, Pt. C, §12, is
31 amended to read:

32 E. The project meets the criteria set forth in subsection 1-; ~~and~~

33 **Sec. 6. 22 MRSA §335, sub-§7, ¶F** is enacted to read:

34 F. There is a consideration of the effect on the area in which a nursing facility
35 proposes to close or reduce beds or from which a nursing facility proposes to relocate
36 beds as demonstrated by certain factors, including, but not limited to:

1 (1) Whether, and the extent to which, the loss or reduction of beds will result in
2 health needs being unmet;

3 (2) Whether there will be a negative effect on the health status indicators of the
4 population to be served;

5 (3) Whether, and the extent to which, there will be a negative effect on the
6 economy of the area; and

7 (4) Whether the individuals occupying beds that are proposed to be relocated are
8 able to access services that are within a reasonable travel distance for family
9 members.

10 **SUMMARY**

11 This bill requires the certificate of need process to take into account the effect of the
12 loss of nursing facility beds on the community's health and economy and on family
13 members and the individuals occupying the beds. The existing process examines only the
14 need for new beds in an area where beds have been proposed.