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## 2022 South Dakota Legislature

## **House Bill 1123**

Introduced by: Representative Rehfeldt

- 1 An Act to establish licensure for rural emergency hospitals.
- 2 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF SOUTH DAKOTA:
- **Section 1. That § 34-12-1.1 be AMENDED:** 
  - **34-12-1.1.** Terms used in this chapter mean:
  - (1) "Ambulatory surgery center," any facility—which\_that is not part of a hospital and which\_that is not an office of a dentist, whether for individual or group practice, in which surgical procedures requiring the use of general anesthesia are performed upon patients;
  - (2) "Assisted living center," any institution, rest home, boarding home, place, building, or agency—which that is maintained and operated to provide personal care and services—which that meet some need beyond basic provision of food, shelter, and laundry;
  - (3) "Chemical dependency treatment facility," any facility—which that provides a structured inpatient treatment program for alcoholism or drug abuse;
  - (4) "Health care facility," any institution, birth center, ambulatory surgery center, chemical dependency treatment facility, hospital, nursing facility, assisted living center, rural primary care hospital, adult foster care home, inpatient hospice, residential hospice, freestanding emergency care facility, community living home, rural emergency hospital, place, building, or agency in which any accommodation is maintained, furnished, or offered for the hospitalization, nursing care, or supervised care of the sick or injured;
  - (5) "Hospital," any establishment with an organized medical staff with permanent facilities that include inpatient beds and is primarily engaged in providing by or under the supervision of physicians, to inpatients, any of the following services: diagnostic or therapeutic services for the medical diagnosis, treatment, or care of injured, disabled, or sick persons; obstetrical services including the care of the

newborn; or rehabilitation services for injured, disabled, or sick persons. In no event may the inpatient beds include nursing facility beds or assisted living center beds unless the same are licensed as such pursuant to this chapter;

- (6) "Nursing facility," any facility-which\_that is maintained and operated for the express or implied purpose of providing care to one or more persons whether for consideration or not, who are not acutely ill but require nursing care and related medical services of such complexity as to require professional nursing care under the direction of a physician on a twenty-four hour per day basis; or a facility-which that is maintained and operated for the express or implied purpose of providing care to one or more persons, whether for consideration or not, who do not require the degree of care and treatment-which\_that a hospital is designed to provide, but who because of their mental or physical condition require medical care and health services-which\_that can be made available to them only through institutional facilities;
- (7) "Critical access hospital," any nonprofit or public hospital providing emergency care on a twenty-four hour basis located in a rural area—which\_that has limited acute inpatient services, focusing on primary and preventive care, and—which\_that has in effect an agreement with a general hospital that provides emergency and medical backup services and accepts patient referrals from the critical access hospital. For the purposes of this subdivision, a rural area is any municipality—of under fifty thousand population;
- (8) "Adult foster care home," a family-style residence—which that provides supervision of personal care, health services, and household services for no more than four aged, blind, physically disabled, developmentally disabled, or socially-emotionally disabled adults;
- (9) "Inpatient hospice," any facility which that is not part of a hospital or nursing home which that is maintained and operated for the express or implied purpose of providing all levels of hospice care to terminally ill individuals on a twenty-four hour per day basis;
- (10) "Residential hospice," any facility—which\_that is not part of a hospital or nursing home—which\_that is maintained and operated for the express or implied purpose of providing custodial care to terminally ill individuals on a twenty-four hour per day basis;

1	(11)	"Birth	center," any health care facility at which a woman is scheduled to give birth	
2		follov	ving a normal, uncomplicated pregnancy, but does not include a hospital or	
3		the r	esidence of the woman giving birth;	
4	(12)	"Frees	standing emergency medical care facility," any facility structurally separate	
5		and c	listinct from a hospital that directly receives a person and provides emergency	
6		medi	cal care;	
7	(13)	"Com	munity living home," any family-style residence whose owner or operator is	
8		enga	ged in the business of providing individualized and independent residential	
9		comn	nunity living supports for compensation to at least one unrelated adult, but	
10		no m	ore than four adults, and provides one or more regularly scheduled health	
11		relate	ed services, either administered directly or in collaboration with an outside	
12		healt	h care provider. This term does not include any setting-which that is certified	
13		or ac	credited through chapter 34-20A, title 27A, or title 27B; and	
14	(14)	"Rura	l emergency hospital," any nonprofit or public health care facility previously	
15		licens	sed as a hospital that provides emergency care on a twenty-four-hour basis,	
16		is lo	cated in a municipality under fifty thousand population that has no acute	
17		<u>inpat</u>	ient services, and that has in effect a transfer agreement with a level I or II	
18		traun	na hospital, as designated by the Department of Health, to accept patients	
19		from	the rural emergency hospital.	
20	Section	2. Tha	t § 34-12-6 be AMENDED:	
21		34-1	<b>2-6.</b> Any application for a license to operate a health care facility shall must	
22	be ac		nied by a fee. The annual license fee established for each licensure category	
23		alth care facilities <del>-shall be as follows</del> is:		
24		NursingFor a nursing facility of:		
25	( )		Fifty beds or less, six hundred dollars;	
26		(b)	Fifty-one to one hundred beds, inclusive, nine hundred dollars;	
27		(c)	One hundred one to one hundred fifty beds, inclusive, one thousand two	
28			hundred dollars; and	
29		(d)	One hundred fifty-one or more beds, one thousand five hundred dollars;	
30	(2)	Assist	edFor an assisted living center of:	
31		(a)	Sixteen beds or less, one hundred fifty dollars;	
32		(b)	Seventeen to fifty beds, inclusive, three hundred dollars;	
33		(c)	Fifty-one to one hundred beds, inclusive, four hundred fifty dollars; and	

(d) One hundred one or more beds, six hundred dollars;

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1	(3)	Hospital For a hospital of:	
2		(a) Twenty-five beds or less, one thousand dollars;	
3		(b) Twenty-six to fifty beds, inclusive, one thousand five hundred dollars;	
4		(c) Fifty-one to one hundred beds, inclusive, two thousand dollars;	
5		(d) One hundred one to one hundred fifty beds, inclusive, three thousand dollars;	
6		(e) One hundred fifty-one to two hundred beds, inclusive, four thousand dollars;	
7		<u>and</u>	
8		(f) Two hundred one or more beds, five thousand dollars;	
9	(4)	Ambulatory For an ambulatory surgery center, five hundred dollars;	
10	(5)	Chemical For a chemical dependency treatment facility of:	
11		(a) Sixteen beds or less, one hundred fifty dollars;	
12		(b) Seventeen to fifty beds, inclusive, three hundred dollars; and	
13		(c) Fifty-one or more beds, four hundred fifty dollars;	
14	(6)	Inpatient For an inpatient and residential hospice, two hundred dollars;	
15	(7)	FreestandingFor a freestanding emergency medical care facility, five hundred	
16		dollars;	
17	(8)	Community For a community living home, one hundred fifty dollars; and	
18	<u>(9)</u>	For a rural emergency hospital, five hundred dollars.	
19		No-such fee may be refunded. All fees received by the Department of Health under	
20	the p	rovisions of this chapter <del>-shall must</del> be paid into the general fund.	
21	Section	3. That § 34-12-52 be AMENDED:	
22		<b>34-12-52.</b> Terms used in this section and §§ 34-12-53 to 34-12-55, inclusive,	
23	mean		
24	(1)	"Department," the Department of Health;	
25	(2)	"Emergency medical services," health care provided to the patient at the scene,	
26		during transportation to a medical facility, between medical facilities, and upon	
27		entry at the medical facility;	
28	(3)	"Freestanding emergency medical care facility," a facility structurally separate and	
29		distinct from a hospital that directly receives a person and provides emergency	
30		medical care;	
31	<del>(4)</del>	"Hospital," a hospital licensed pursuant to chapter 34-12;	
32	<del>(5)</del>	"Trauma," a sudden, severe injury or damage to the body caused by an external	
33	. ,	force that results in potentially life-threatening injuries or that could result in the	
34		following disabilities:	

1	(a) Impairment of cognitive or mental abilities;
2	(b) Impairment of physical functioning; or
3	(c) Disturbance of behavioral or emotional functioning;
4	(6)(4) "Trauma care system," a statewide system for the prevention of trauma and the
5	provision of optimal medical care to trauma victims that includes both the provision
6	of appropriate health care services and provision of emergency medical care,
7	equipment, and personnel for effective and coordinated prehospital, hospital, inter-
8	hospital, and rehabilitative care for trauma patients;
9	$\frac{7}{5}$ "Trauma hospital," a hospital designated by the department as providing a
10	specialized program in trauma care with appropriately trained personnel,
11	equipment, and other facility resources that are specifically organized to provide
12	optimal care to a trauma patient at the facility; and
13	(8)(6) "Trauma registry," patient-specific trauma data that is maintained by a health care
14	facility, in a format prescribed by rules promulgated pursuant to § 34-12-54.

## Section 4. That § 34-12-53 be AMENDED:

**34-12-53.** The department shall develop, implement, and administer a trauma care system including a statewide trauma registry that involves all hospitals, freestanding emergency medical care facilities, <u>rural emergency hospitals</u>, and emergency medical services within the state.