

DEPARTMENT OF HEALTH & SOCIAL SERVICES



PROPOSED CHANGES TO REGULATIONS

7 AAC 12.610. Facilities and Local Units. Licensure.



PUBLIC REVIEW DRAFT
October 10, 2016

COMMENT PERIOD ENDS: December 5, 2016

Please see the public notice for details about how to comment on these proposed changes.

Notes to reader:

1. Except as discussed in note 2, new text that amends an existing regulation is **bolded and underlined**.
2. If the lead-in line above the text of each section of the regulations states that a new section, subsection, paragraph, or subparagraph is being added, or that an existing section, subsection, paragraph, or subparagraph is being repealed and readopted (replaced), *the new or replaced text is not bolded or underlined*.
3. [ALL-CAPS TEXT WITHIN BRACKETS] indicates text that is to be deleted.
4. When the word “including” is used, Alaska Statutes provide that it means “including, but not limited to.”
5. Only the text that is being changed within a section of the current regulations is included in this draft. Refer to the text of that whole section, published in the current Alaska Administrative Code, to determine how a proposed change relates within the context of the whole section and the whole chapter.

Title 7 Health and Social Services.**Chapter 12****Facilities and Local Units****Section 610****Licensure**

7 AAC 12.610. Licensure

7 AAC 12.610(a) is amended to read:

(a) Unless exempt under 7 AAC 12.611, before an individual or entity may operate a facility subject to AS 47.32 and this chapter, the individual or entity must obtain a license from the department under AS 47.32 and this section. The department may bring an action to enjoin the operation of a facility that has failed to obtain a license as required under AS 47.32 and this chapter. **In addition to meeting the applicable**

requirements of this section, including payment of each applicable fee set out in (h)

– (l) of this section, an applicant for licensure of a

(1) hospice agency must also meet the licensure requirements of 7 AAC 12.312;

(2) free-standing birth center must also meet the licensure requirements of 7 AAC 12.404;

(3) frontier extended stay clinic must also meet the licensure requirements of 7 AAC 12.457; or

(4) home health agency must also meet the licensure requirements of 7 AAC 12.501.

7 AAC 12.610 is amended by adding a new subsection to read:

(e) A satellite hospital may be included in the license of the parent hospital if approved by the department. The number of beds authorized under the license of the parent hospital includes the beds of the satellite hospital. The application for licensure or renewal of a license of a hospital with a satellite hospital must include the required information for both facilities. For purposes of this subsection, a satellite hospital is a freestanding hospital or department of a hospital that is located on a premise separate from the parent hospital campus and that is operated under the same ownership and operational control. Services provided in a satellite hospital must be organizationally and functionally integrated with the parent hospital and must comply with the applicable provisions of this chapter.

7 AAC 12.610 is amended by adding a new subsection to read:

(f) Hospice services may be provided in an area designated by a hospital or nursing facility licensed under this chapter if that area is designated for exclusive use by a hospice organization that is licensed as a full-service hospice under this chapter to provide care at the hospice inpatient level of care in accordance with this chapter and the hospice's Medicare certification. Admission to the hospital or nursing facility is not required for a patient to receive hospice services, regardless of

the patient's length of stay. The area designated by the hospital or nursing facility for hospice care must be licensed separately as a full-service hospice under this chapter. The beds in the area designated for exclusive use by a hospice are not included in the number of beds authorized under the license of the hospital or nursing facility.

7 AAC 12.610 is amended by adding a new subsection to read:

(g) Before an entity licensed under this section may make a change listed in this subsection to the operation of the entity, the licensee must obtain department approval for that change. A licensee shall, at least 30 calendar days before the intended change, submit a written request for approval to the department regarding a change that involves

(1) an increase in licensed capacity; the department will deny the request if it determines that the increase would pose a potential risk to the health, safety, or welfare of recipients of care, based upon the entity's compliance history, life safety code requirements, or because the entity is unable to meet the required health and environmental criteria for the increased capacity;

(2) a change in a management company or proposed use of a management agreement not previously disclosed in 7 AAC 12.615;

(3) a change in license category or classification; or

(4) a change of name or location under 7 AAC 12.615.

7 AAC 12.610 is amended by adding a new subsection to read:

(h) Facilities requiring a license modification to expand capacity to serve additional patients, residents, or clients at any time other than at the time of license renewal shall pay the applicable bed fee required under 7 AAC 12.713 for each additional bed, regardless of the amount of time left in the current license period.

7 AAC 12.610 is amended by adding a new subsection to read:

(i) A health care facility shall notify the department in writing at least 30 days before it intends to make a change that involves a decrease in licensed capacity.

(Eff. 11/19/83, Register 88; am 6/28/84, Register 90; am 9/1/2000, Register 155; am 12/3/2006, Register 180; am 9/30/2007, Register 183; ____/____/____ am, Register ____)

Authority:	AS 18.05.040	AS 47.32.020	AS 47.32.060
	AS 18.20.080	AS 47.32.030	AS 47.32.130
	AS 47.05.310	AS 47.32.040	AS 47.32.140
	AS 47.32.010	AS 47.32.050	

7 AAC 12 is amended by adding a new section to read:

7 AAC 12.613. Fees.

(a) An application for a license or renewal of a license must be accompanied by the appropriate licensure fee, as follows:

(1) hospitals: \$2,000 plus \$85 per bed; in addition, a hospital that has one or more satellite locations under (e) of this section must pay an additional fee of \$500 for each satellite location;

(2) nursing facilities: \$1,000 plus \$125 per bed;

(3) ambulatory surgical centers: \$650;

(4) free-standing birth centers: \$250;

(5) home health agencies: based on total employee full time equivalents (FTE), to include any FTEs in any sub-unit or branch, as follows:

(A) 5 or fewer FTEs: \$1,000; (B) 6 to 15 FTEs: \$1,500;

(C) 16 to 50 FTEs: \$2,000; or

(D) 51 or more FTEs: \$3,000;

(6) in addition to the applicable fee under (5) of this subsection, a home health agency must pay a licensing fee of \$500 for each location the home health agency seeks to include in their license;

(7) subject to (9) of this subsection, hospice agencies, including an agency that operates as a subunit under a parent hospice agency, as follows:

(A) a volunteer hospice: \$100;

(B) a non-volunteer hospice: \$250; or

(C) an inpatient hospice facility: \$250 plus \$75 per bed;

(8) in addition to the applicable fee under (8) of this subsection, a parent hospice agency that has one or more branch hospice offices must pay a licensing fee of \$100 for each branch that the hospice agency seeks to include in their license;

(9) a frontier extended stay clinic: \$250 plus \$100 for each bed used for extended stay patients.

(b) After the first onsite visit following an inspection that reveals noncompliance with AS 47.32 or this chapter, a licensee shall pay a revisit fee for each additional onsite visit by the department that results from failure of the licensee to achieve and maintain compliance within a reasonable time set by the department:

(1) hospitals and nursing facilities: \$500;

(2) ambulatory surgical centers: \$250;

(3) free-standing birth centers: \$150;

(4) home health agencies: \$150;

(5) hospice agencies: \$100;

(6) frontier extended stay clinics: \$250.

(c) If a facility changes location, which requires an onsite visit by the department, the facility shall pay a fee equivalent to the applicable revisit fee in (m) of this section.

(d) Fees due under this section are nonrefundable.

(e) The department will assess licensing fees annually.

(f) For facilities licensed on or after June 30, 2016, the department will begin assessment of the first licensing fee 90 days after the effective date of this amendment, and annually thereafter in January of each year.

(g) a home health agency that applies at any time other than at the time of license renewal for a license modification to add a sub-unit or a branch shall pay the appropriate fees in (a) of this subsection for each new sub-unit or branch, and any fees associated with additional FTEs, regardless of the amount of time left in the current license period.

(h) Facilities requiring license modification, not specified in this subsection, shall pay a modification fee of \$250.

(i) a facility that is owned and operated by the state of Alaska is exempt from the fee schedule set forth in this section.

(Eff. 11/19/83, Register 88; am 6/28/84, Register 90; am 9/1/2000, Register 155; am 12/3/2006, Register 180; am 9/30/2007, Register 183; ____/____/____ am, Register ____)

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