

HEALTH CARE FACILITY AMENDMENTS

2024 GENERAL SESSION

STATE OF UTAH

Chief Sponsor: Katy Hall

Senate Sponsor: _____

LONG TITLE**General Description:**

This bill amends requirements impacting health care facilities.

Highlighted Provisions:

This bill:

- defines terms; and
- establishes minimum standards for freestanding emergency departments.

Money Appropriated in this Bill:

None

Other Special Clauses:

None

Utah Code Sections Affected:

AMENDS:

26B-2-202, as renumbered and amended by Laws of Utah 2023, Chapter 305**26B-2-203**, as renumbered and amended by Laws of Utah 2023, Chapter 305

*Be it enacted by the Legislature of the state of Utah:*Section 1. Section **26B-2-202** is amended to read:**26B-2-202. Duties of department.**

(1) The department shall:

(a) enforce rules established pursuant to this part;



(b) authorize an agent of the department to conduct inspections of health care facilities pursuant to this part;

(c) collect information authorized by the committee that may be necessary to ensure that adequate health care facilities are available to the public;

(d) collect and credit fees for licenses as free revenue;

(e) collect and credit fees for conducting plan reviews as dedicated credits;

(f) (i) collect and credit fees for conducting clearance under Sections 26B-2-239 and 26B-2-240; and

(ii) beginning July 1, 2012:

(A) up to \$105,000 of the fees collected under Subsection (1)(f)(i) are dedicated credits; and

(B) the fees collected for background checks under Subsection 26B-2-240(6) and Subsection 26B-2-241(4) shall be transferred to the Department of Public Safety to reimburse the Department of Public Safety for its costs in conducting the federal background checks;

(g) designate an executive secretary from within the department to assist the committee in carrying out its powers and responsibilities;

(h) establish reasonable standards for criminal background checks by public and private entities;

(i) recognize those public and private entities that meet the standards established pursuant to Subsection (1)(h); and

(j) provide necessary administrative and staff support to the committee.

(2) The department may:

(a) exercise all incidental powers necessary to carry out the purposes of this part;

(b) review architectural plans and specifications of proposed health care facilities or renovations of health care facilities to ensure that the plans and specifications conform to rules established by the committee; and

(c) in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, make rules as necessary to implement the provisions of this part.

Section 2. Section 26B-2-203 is amended to read:

26B-2-203. Services required -- General acute hospitals -- Specialty hospitals -- Satellite operations and branch locations.

(1) For purposes of this section, "freestanding emergency department" means a licensed satellite service operation, hospital outpatient department, or branch location that:

(a) provides emergency care or critical care; or

(b) holds itself out as providing emergency care or critical care.

~~[(1)]~~ (2) General acute hospitals and specialty hospitals shall remain open and be continuously ready to receive patients 24 hours of every day in a year and have an attending medical staff consisting of one or more physicians licensed to practice medicine and surgery under Title 58, Chapter 67, Utah Medical Practice Act, or Title 58, Chapter 68, Utah Osteopathic Medical Practice Act.

~~[(2)]~~ (3) A specialty hospital shall provide on-site all basic services required of a general acute hospital that are needed for the diagnosis, therapy, or rehabilitation offered to or required by patients admitted to or cared for in the facility.

~~[(3)]~~ (4) (a) A home health agency shall provide at least licensed nursing services or therapeutic services directly through the agency employees.

(b) A home health agency may provide additional services itself or under arrangements with another agency, organization, facility, or individual.

~~[(4)]~~ (5) Beginning January 1, 2023, a hospice program shall provide at least one qualified medical provider, as that term is defined in Section 26B-4-201, for the treatment of hospice patients.

(6) A freestanding emergency department shall have available, on-site, on a continuous basis during the hours of operation:

(a) the capability to conduct and implement the use of:

(i) computed tomography (CT scans);

(ii) sonography and ultrasonography (ultrasounds);

(iii) electromagnetic radiology (x-rays); and

(iv) clinical laboratory tests and analysis that are customarily used in emergency medical settings;

(b) a physician who:

(i) is licensed under Title 58, Chapter 67, Utah Medical Practice Act, or Chapter 68, Utah Osteopathic Medical Practice Act; and

(ii) has specialized training and experience in providing emergency medical services;

90 (c) two registered nurses who:
91 (i) are licensed under Title 58, Chapter 31b, Nurse Practice Act; and
92 (ii) has specialized training and experience in providing emergency medical services;
93 and
94 (d) a respiratory therapist who is licensed under Title 58, Chapter 57, Respiratory Care
95 Practices Act.
96 Section 3. **Effective date.**
97 This bill takes effect on May 1, 2024.