§§1-3 -C.26:2H-7.22 to 26:2H-7.24 §§5,6 - Notes

P.L. 2021, CHAPTER 18, *approved February 22, 2021* Assembly Committee Substitute for Assembly, No. 1176

1 AN ACT concerning hospital licensure to perform certain cardiac 2 procedures, amending P.L.1992, c.160, and supplementing Title 3 26 of the Revised Statutes. 4 5 **BE IT ENACTED** by the Senate and General Assembly of the State 6 of New Jersey: 7 8 1. (New section) As used in P.L. (C.) (pending , c. 9 before the Legislature as this bill): 10 "Angioplasty" or "percutaneous coronary intervention" means 11 the mechanical reopening of an occluded vessel in the heart or 12 corona using a balloon-tipped catheter. "Applicant hospital" means a general hospital that has entered 13 14 into a collaboration agreement with a cardiac surgery center 15 licensed in New Jersey. means all information required by "Application" 16 the 17 commissioner of an applicant hospital to determine compliance with P.L. , c. (C.) (pending before the Legislature as this bill). 18 19 "C-PORT-E study" means the Atlantic Cardiovascular Patient 20 Outcomes Research Team Elective Angioplasty Study clinical trial. 21 "Collaboration agreement" means an agreement between a 22 licensed cardiac surgery center and a general hospital that includes: (1) written protocols for enrolled patients who require transfer 23 to, and receipt at, a cardiac surgery center's operating room within 24 25 one hour of the determination of the need for such transfer, 26 including the emergency transfer of patients who require an intra-27 aortic balloon pump; (2) regular consultation between the two hospitals on individual 28 29 cases, including use of technology to share case information in a 30 rapid manner; and (3) evidence of adequate cardiac surgery on-call backup. 31 32 "Commissioner" means the Commissioner of Health. 33 "Department" means the Department of Health. 34 "Elective angioplasty" means an angioplasty or percutaneous 35 coronary intervention performed on a non-emergent basis. 36 "Full service adult diagnostic cardiac catheterization facility" means an acute care general hospital that provides invasive cardiac 37 38 diagnostic services to adult patients without cardiac surgery backup, EXPLANATION – Matter enclosed in **bold-faced** brackets [thus] in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.

ACS for **A1176**

is equipped with laboratories, and performs at least 250 cardiac

1

2

catheterizations each year.

3 "Primary angioplasty" means an angioplasty or percutaneous 4 coronary intervention performed on an acute or emergent basis. 5 2. (New section) a. An applicant hospital may apply to the 6 7 commissioner for a license to provide full service adult diagnostic 8 cardiac catheterization services. The commissioner shall issue a 9 license pursuant to such application to any hospital that: (1) is not licensed as a cardiac surgery center; 10 11 (2) demonstrates the ability to provide full service adult 12 diagnostic catheterization services consistent with national 13 standards of care and current best practices; 14 (3) commencing in the second year of licensure pursuant to this 15 subsection, and in each year thereafter, performs at least 250 catheterizations per year, with each interventional cardiologist 16 17 performing at least 50 catheterizations per year; and 18 (4) meets such other requirements as the commissioner may 19 establish by regulation including, but not limited to, participation in the department's data collection programs and in national registries 20 such as the National Cardiovascular Data Registry to monitor 21 22 quality, outcomes, and compliance with State regulations. 23 b. An applicant hospital may apply to the commissioner for a 24 license to provide primary angioplasty services. The commissioner 25 shall issue a license pursuant to such application to any hospital 26 that: 27 (1) is not licensed as a cardiac surgery center; 28 (2) has been licensed for at least six months pursuant to 29 subsection a. of this section to provide full service adult diagnostic 30 catheterization services; (3) demonstrates the ability to consistently provide primary 31 32 angioplasty services 24 hour per day and seven days per week, consistent with national standards of care and current best practices; 33 34 and 35 (4) meets such other requirements as the commissioner may 36 establish by regulation. 37 An applicant hospital may apply to the commissioner for a c. 38 license to provide elective angioplasty services. The commissioner 39 shall issue a license pursuant to such application to any hospital 40 that: 41 (1) is not licensed as a cardiac surgery center; (2) holds licensure to participate in the C-PORT-E study or the 42 43 Elective Angioplasty Demonstration Project, or is an applicant 44 hospital licensed by the department to provide primary angioplasty 45 services pursuant to subsection b. of this section; 46 (3) demonstrates the ability to provide elective angioplasty 47 services consistent with the provisions of N.J.A.C.8:33-3.11 or any successor regulation, as well as national standards of care and 48

3

current best practices, including ensuring that all patients
 considered for elective angioplasty undergo careful selection,
 screening, and risk stratification pursuant to requirements
 promulgated by the department by regulation, and ensuring that
 patients who do not meet such screening criteria are transferred to
 an appropriate cardiac surgery facility for elective angioplasty;

7 (4) commencing in the second year of licensure pursuant to this
8 subsection, and in each year thereafter, performs a minimum of 200
9 angioplasty procedures per year, with each interventional
10 cardiologist performing at least 50 angioplasty procedures per year;
11 and

(5) meets such other requirements as the commissioner mayestablish by regulation.

14 d. (1) A hospital issued a license pursuant to subsection a. or 15 b. of this section that fails to meet the qualification requirements for 16 that license shall be subject to corrective administrative action or 17 other remedial action as the commissioner may establish by 18 regulation, including, but not limited to, submitting a corrective 19 action plan to the department for approval and meeting any 20 benchmarks or deadlines for compliance as may be required by the 21 department.

22 (2) A hospital issued a license pursuant to subsection c. of this 23 section shall have two years to meet the volume requirements set 24 forth in paragraph (4) of subsection c. of this section. A hospital 25 that fails to meet or maintain the qualification requirements for that 26 license, including the volume requirements set forth in paragraph 27 (4) of subsection c. of this section, shall be subject to corrective 28 administrative action or other remedial action as the commissioner may establish by regulation, including, but not limited to, 29 30 submitting a corrective action plan to the department for approval 31 and meeting any benchmarks or deadlines for compliance as may be 32 required by the department. If a hospital that has entered into a 33 corrective action plan pursuant to this subsection fails to meet and 34 maintain the qualification requirements for a license issued pursuant to subsection c. of this section, including attaining the volume 35 requirements set forth in paragraph (4) of subsection c. of this 36 37 subsection, within two years after the hospital enters into a 38 corrective action plan, the hospital's license issued pursuant to 39 subsection c. of this section shall be revoked.

40 The department may impose fines, suspend or revoke a e. 41 license, require corrective administrative action or other remedial 42 action, including requiring submission of a corrective action plan, 43 or impose other lawful remedies against any entity issued a license 44 pursuant to this section that violates any of the requirements of this 45 section. Subject to the provisions of subsection d. of this section, 46 the department may revoke the license of a hospital authorized to 47 provide any cardiac service, including elective angioplasty, which 48 fails to comply with the licensing requirements set forth in this section related to that license, including facility volume
 requirements, within two years after the date of licensure.

f. (1) Diagnostic cardiac catheterization and angioplasty
programs in all cardiac surgery facilities shall meet such other
requirements as the commissioner may establish by regulation
including, but not limited to, participation in the department's data
collection programs and in national registries such as the National
Cardiovascular Data Registry to monitor quality, outcomes, and
compliance with State regulations.

10 (2) A licensed cardiac surgery facility may request a waiver based on documented and continued accreditation by the 11 12 Accreditation for Cardiovascular Excellence or by a national 13 organization or association that meets similar standards specific to 14 cardiac catheterization and percutaneous coronary intervention. 15 Licensed facilities that seek accreditation shall provide the department with access to reports, site visits, site visit reviews, any 16 17 notice related to compliance standards, and notices related to 18 change of accreditation status.

g. The commissioner shall establish by regulation the
application and renewal fees for licenses issued pursuant to this
section, including a nonrefundable fee for initial licensure in the
amount of at least \$5,000.

23

3. (New section) Prior to performing any procedure authorized
under a license issued pursuant to section 2 of P.L. , c. (C.)
(pending before the Legislature as this bill), the applicant hospital
shall furnish the following information to the patient and afford the
patient the opportunity to review and consider such information
before being asked to consent in writing to the procedure:

a. notice included with the informed consent form that the
procedure is not being performed at a licensed cardiac surgery
center, and in the event that the patient requires emergency cardiac
surgery, the patient will be transferred to a licensed cardiac surgery
center; and

b. details concerning the applicant hospital's plan and protocols
for transferring patients who require emergency cardiac surgery,
including the name and location of the cardiac surgery center with
which the applicant hospital has entered into a collaboration
agreement.

The applicant hospital shall, upon request, furnish the patient
with a written copy of the hospital's transfer protocols, including
transportation and associated charges for transportation, and a
summary of the collaboration agreement.

44

45 4. Section 19 of P.L.1992, c.160 (C.26:2H-7a) is amended to 46 read as follows:

ACS for **A1176**

5

19. Notwithstanding the provisions of section 7 of P.L.1971, 1 2 c.136 (C.26:2H-7) to the contrary, the following are exempt from 3 the certificate of need requirement: 4 Community-based primary care centers; 5 Outpatient drug and alcohol services; Hospital-based medical detoxification for drugs and alcohol; 6 7 Ambulance and invalid coach services; 8 Mental health services which are non-bed related outpatient 9 services; 10 Full service diagnostic catheterization services, primary angioplasty services, and elective angioplasty services in 11 12 accordance with a license issued under section 2 of P.L., c. (C.) (pending before the Legislature as this bill); 13 14 Residential health care facility services; 15 Dementia care homes; Capital improvements and renovations to health care facilities; 16 17 Additions of medical/surgical, adult intensive care and adult 18 critical care beds in hospitals; Inpatient special psychiatric beds used solely for services for 19 patients with co-occurring mental health and substance use 20 21 disorders; 22 Replacement of existing major moveable equipment; 23 Inpatient operating rooms; 24 Alternate family care programs; Hospital-based subacute care; 25 26 Ambulatory care facilities; 27 Comprehensive outpatient rehabilitation services; 28 Special child health clinics; 29 New technology in accordance with the provisions of section 18 30 of P.L.1998, c.43 (C.26:2H-7d); 31 Transfer of ownership interest except in the case of an acute care 32 hospital; 33 Change of site for approved certificate of need within the same 34 county; 35 Additions to vehicles or hours of operation of a mobile intensive 36 care unit; 37 Relocation or replacement of a health care facility within the 38 same county, except for an acute care hospital; 39 Continuing care retirement communities authorized pursuant to 40 P.L.1986, c.103 (C.52:27D-330 et seq.); 41 Magnetic resonance imaging; 42 Adult day health care facilities; 43 Pediatric day health care facilities; 44 Chronic or acute renal dialysis facilities; and 45 Transfer of ownership of a hospital to an authority in accordance 46 with P.L.2006, c.46 (C.30:9-23.15 et al.). 47 (cf: P.L.2017, c.94, s.1)

ACS for A1176

6

5. The Commissioner of Health may, pursuant to the 1 "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et 2 3 seq.), adopt such rules and regulations as shall be necessary to 4 implement the provisions of this act. 5 6. This act shall take effect on the 90th day after the date of 6 enactment, except that the Commissioner of Health may take 7 anticipatory administrative action in advance as shall be necessary 8 9 for the implementation of the provisions of this act. 10 11

- 14 Requires DOH to license certain qualifying hospitals to provide
- 15 full service adult diagnostic cardiac catheterization, primary
- 16 angioplasty, and elective angioplasty services.

12 13