STATE OF WYOMING

SENATE FILE NO. SF0090

Hospital licensing.

Sponsored by: Senator(s) Scott and Craft and Representative(s) Freeman and Harvey

A BILL

for

- 1 AN ACT relating to hospital licensing; requiring licensed
- 2 hospitals to treat Medicare and Medicaid patients as
- 3 specified; providing for nonrenewal of licenses; providing
- 4 for applicability and grace periods; and providing for an
- 5 effective date.

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7 Be It Enacted by the Legislature of the State of Wyoming:

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9 **Section 1.** W.S. 35-2-913 is created to read:

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11 35-2-913. Hospital licensure; required care.

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- 13 (a) Before issuing an initial license or renewal
- 14 license to a hospital under this article, the department
- 15 shall determine that:

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1 (i) The hospital serves Medicare and Medicaid 2 patients; and

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4 (ii) Does not discriminate in admission or

5 treatment against patients covered by the Medicare and

6 Medicaid programs. A hospital does not discriminate in

7 admission or treatment if:

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9 (A) It is an authorized Medicare and

10 Medicaid provider;

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12 (B) It does not refuse admission to

13 patients based on their Medicare and Medicaid status except

14 as required by federal law or regulations; and

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16 (C) A majority of the providers referring

17 and treating patients in the hospital may lawfully refer

18 and treat patients in the hospital and receive

19 reimbursement from Medicare or Medicaid for their services

20 in the hospital. A minority of providers shall satisfy

21 this requirement if Medicare and Medicaid patients they

22 admit and treat constitute at least forty percent (40%) of

2

23 the patients admitted for overnight stays.

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Commencing April 1, 2014, a new hospital seeking 1 initial licensure, a hospital already licensed that is not 2 a Medicare and Medicaid provider, or a licensed hospital 3 which subsequently loses its status as a Medicare and 4 5 Medicaid provider, may request and be granted a conditional license allowing it to operate while seeking to comply with 6 the Medicaid and Medicare requirements of subsection (a) of 7 this section. The hospital shall have one (1) year to 8 9 comply with the provisions of paragraph (a)(i) of this section and two (2) years to comply with the provisions of 10 11 paragraph (a)(ii) of this section. The department may extend the time period for not more than six (6) months at 12 13 a time if it determines that the hospital is making a good 14 faith effort to become a Medicare and Medicaid provider. The department may terminate a hospital license immediately 15 and may condition any further licensure and operation on 16 17 any safety requirements it deems appropriate if the state health officer determines that the reason for the lack of 18 Medicare and Medicaid status presents a clear and present 19 risk to the health and safety of patients or potential 20 21 patients of the hospital.

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23 (c) For purposes of this section, delays by the 24 center for Medicare and Medicaid services in responding to

1 applications for provider status shall be considered good

2 cause. Continuation in a knowing violation by the hospital

3 or its owners of a known Medicare or Medicaid regulation

4 shall not be considered good cause. Good cause shall

5 otherwise be determined by the director of the department

6 in his sole discretion.

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8 (d) As used in this section, "Medicare" means

9 coverage under Part A of Title XVIII of the Social Security

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10 Act, 42 U.S.C. § 1395 et seq.

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12 Section 2. This act is effective July 1, 2014.

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14 (END)