### J3, K3

### By: Senator Hayes Senators Hayes, Hershey, Kelley, Feldman, Augustine, Beidle, Benson, Jennings, Klausmeier, Kramer, and Reilly

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Committee Report: Favorable with amendments Senate action: Adopted Read second time: March 5, 2020

CHAPTER \_\_\_\_\_

### 1 AN ACT concerning

### 2 Hospitals – Changes in Status – Hospital Employee Retraining and Placement

3 FOR the purpose of requiring each hospital providing that the assessment of a certain fee 4 by the State Health Services Cost Review Commission for funding the Hospital  $\mathbf{5}$ Employees Retraining Fund is to be in the case of a hospital closure, merger, or full 6 delicensure; altering the circumstances under which hospitals are required to pay a 7 certain fee directly to the Maryland Department of Labor on a certain date each year; 8 requiring certain hospitals to pay a certain direct remittance to the Department on 9 a certain date each year; requiring the Secretary of Labor to pay certain fees 10 <u>remittances</u> into a certain fund the Fund; requiring the State Health Services Cost 11 Review Commission to collect certain additional fees for a certain purpose under 12<del>certain circumstances;</del> authorizing the Commission to require certain hospitals to pay to the Department a certain remittance for a certain purpose under certain 13 14 circumstances; prohibiting the Commission from raising certain rates as part of a certain update factor for a certain purpose; requiring each hospital and certain 15employee organizations to submit certain reports to the Commission and the 16 17Department; altering the purposes of a certain program required to be established 18 by the Department; requiring that a certain program include certain job-seeking assistance and training and skills development; requiring that a certain program to 19 20require that the hospital work with certain persons for a certain purpose; authorizing 21the Department to use certain other programs before using a certain program 22established under a certain provision of law; authorizing the Department to use 23vendors for certain purposes and to pay the vendors using a certain fund; requiring 24that certain unexpended funds be returned to certain hospitals on a certain basis;

#### EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

Underlining indicates amendments to bill.

Strike out indicates matter stricken from the bill by amendment or deleted from the law by amendment.



1 requiring the Department, in conjunction with the Commission, to submit a certain 2 report to certain committees of the General Assembly on or before a certain date; 3 requiring certain money to be returned to certain hospitals under certain 4 circumstances; defining certain terms; making conforming and stylistic changes; 5 providing for the termination of this Act; and generally relating to the retraining and 6 placement of hospital employees related to changes in hospital status.

7 BY repealing <u>and reenacting</u>, with amendments,

- 8 Article Health General
- 9 Section <u>19–223 and</u> 19–326.1
- 10 Annotated Code of Maryland
- 11 (2019 Replacement Volume)
- 12 BY adding to
- 13 Article Health General
- 14 Section 19–326.1 and 19–326.2
- 15 Annotated Code of Maryland
- 16 (2019 Replacement Volume)
- 17 BY repealing and reenacting, with amendments,
- 18 Article Labor and Employment
- 19 Section 11–201
- 20 Annotated Code of Maryland
- 21 (2016 Replacement Volume and 2019 Supplement)
- 22 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
- 23 That the Laws of Maryland read as follows:
- 24

Article – Health – General

25 <u>19–223.</u>

## 26(A)(1)IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS27INDICATED.

### 28(2)"CLOSURE" MEANS THE COMPLETE CESSATION OF ALL SERVICES29IN A HEALTH CARE FACILITY WHOSE RATES ARE SET BY THE COMMISSION.

# 30(3)"FULL DELICENSURE" MEANS THE TOTAL WITHDRAWAL BY THE31SECRETARY OF THE LICENSE TO OPERATE SERVICES IN ACCORDANCE WITH THE32PROCESS ESTABLISHED UNDER § 19–325 OF THIS TITLE.

## 33 (4) <u>"MERGER" MEANS THE UNION OF TWO OR MORE HOSPITALS BY</u> 34 <u>THE TRANSFER OF ALL THE PROPERTY OF ONE OR MORE OF THE HOSPITALS TO ONE</u> 35 <u>OF THE HOSPITALS THAT CONTINUES TO EXIST.</u>

2

1 (B) The Commission shall assess a fee on all hospitals whose rates have been 2 approved by the Commission to pay for:

3 (1) To the extent provided for in Title 10, Subtitle 3, Part IV of the 4 Economic Development Article, the amounts required by § 10–350 of the Economic 5 Development Article with respect to public obligations or closure costs of a closed or 6 delicensed hospital; and

7 (2) Funding the Hospital Employees Retraining Fund IN THE CASE OF A
 8 HOSPITAL CLOSURE, MERGER, OR FULL DELICENSURE.

9 **=**19-326.1.

10(A)(1)IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS11INDICATED.

12 (2) "ACQUISITION" MEANS:

13(I)ANY TRANSFER OF STOCK OR ASSETS THAT RESULT IN A14CHANGE OF THE PERSON OR PERSONS WHO CONTROL A HEALTH CARE FACILITY; OR

15(II)THE TRANSFER OF ANY STOCK OR OWNERSHIP INTEREST IN16A HEALTH CARE FACILITY IN EXCESS OF 25%.

17(3)"CLOSURE" MEANS THE COMPLETE CESSATION OF ALL SERVICES18IN A HEALTH CARE FACILITY WHOSE RATES ARE SET BY THE COMMISSION.

19(4)"COMMISSION" MEANS THE STATE HEALTH SERVICES COST20REVIEW COMMISSION.

21 (5) "DOWNSIZE" MEANS TO REDUCE THE NUMBER OF EMPLOYEES OF
 22 <u>A HEALTH CARE FACILITY BY AT LEAST 17 FULL-TIME EQUIVALENT EMPLOYEES IN</u>
 23 <u>ANY CONSECUTIVE 3-MONTH PERIOD.</u>

## 24(6) "FULL DELICENSURE" MEANS THE TOTAL WITHDRAWAL BY THE25SECRETARY OF THE LICENSE TO OPERATE SERVICES IN ACCORDANCE WITH THE26PROCESS ESTABLISHED UNDER § 19–325 OF THIS SUBTITLE.

27 (7) <u>"MERGER" MEANS THE UNION OF TWO OR MORE HOSPITALS BY</u>
 28 <u>THE TRANSFER OF ALL THE PROPERTY OF ONE OR MORE OF THE HOSPITALS TO ONE</u>
 29 <u>OF THE HOSPITALS THAT CONTINUES TO EXIST.</u>

30(8)"PARTIAL CLOSURE" MEANS THE CLOSURE OF A SERVICE LINE OF31A HEALTH CARE FACILITY WHOSE RATES ARE SET BY THE COMMISSION.

1	(9) "PARTIAL DELICENSURE" MEANS WITHDRAWAL BY THE
2	SECRETARY OF THE LICENSE TO OPERATE A PORTION OF BEDS OR SERVICES IN A
3	HEALTH CARE FACILITY WHOSE RATES ARE SET BY THE COMMISSION IN
4	ACCORDANCE WITH THE PROCESS ESTABLISHED UNDER § 19-325 OF THIS TITLE.
<b>5</b>	(10) "SERVICE LINE" MEANS A GROUPING OF SERVICES INTO HIGHER
6	LEVEL CATEGORIES THAT REFLECT SIMILAR CLINICAL DELIVERY.
7	(B) (1) If a hospital <del>voluntarily</del> closes, merges, or is <u>FULLY</u> delicensed under §
8	19–325 of this subtitle and workers are displaced
9	(1) Each, EACH hospital shall pay a fee directly to the Maryland Department of Labor.
10	(2) The fee shall MAY not exceed 0.01 percent of the gross operating
11	revenue for the fiscal year immediately preceding the closure or delicensing of the hospital.
12	(3) A fee shall only be assessed once for each <del>voluntary</del> closure, merger, or
13	<u>FULL</u> delicensure.
14	(2) (4) The Secretary of Labor shall pay the fees received under this section
15	into the Hospital Employees Training <u>RETRAINING</u> Fund established under § 11–201 of
16	the Labor and Employment Article.
17	<del>19-326.1.</del>
18	$(\Delta)$ (C) (1) ON JULY 1 FACH YEAR FACH HOSPITAL RECULATED BY

18 (1) ON JULY 1 EACH YEAR, EACH HOSPITAL REGULATED BY <del>(A)</del> (C) THE COMMISSION SHALL PAY DIRECTLY TO THE MARYLAND DEPARTMENT OF 19 LABOR A FEE DIRECT REMITTANCE EQUAL TO 0.006% OF THE HOSPITAL'S TOTAL 20GROSS PATIENT ANNUAL REVENUE APPROVED BY THE HEALTH SERVICES COST 2122**Review** Commission for the hospital for the immediately preceding 23YEAR.

THE SECRETARY OF LABOR SHALL PAY THE FEES REMITTANCE 24(2) PAID UNDER THIS SECTION INTO THE HOSPITAL EMPLOYEES TRAINING 25RETRAINING FUND ESTABLISHED UNDER § 11-201 OF THE LABOR AND 26**EMPLOYMENT ARTICLE.** 27

IN ANY YEAR, IF THE FUND BALANCE IN THE HOSPITAL 28<del>(B)</del> (D) **EMPLOYEES RETRAINING FUND IS DEPLETED, THE STATE HEALTH SERVICES COST** 2930 **Review** Commission shall require each hospital to pay Additional FEES TO THE MARYLAND DEPARTMENT OF LABOR A DIRECT REMITTANCE IN ORDER TO 3132ADDRESS THE NEEDS OF ANY PARTIAL CLOSURE, MERGER DOWNSIZING, ACQUISITION, OR PARTIAL DELICENSURE OF A HOSPITAL. 33

<del>19 326.2.</del> 34

1(E)THE COMMISSION MAY NOT RAISE HOSPITAL RATES AS PART OF THE2ANNUAL UPDATE FACTOR TO OFFSET THE HOSPITALS' DIRECT REMITTANCES TO3THE HOSPITAL EMPLOYEES RETRAINING FUND UNDER SUBSECTIONS (C) AND (D)4OF THIS SECTION.

5 <u>(f)</u> Each hospital shall submit an annual report to the Health 6 Services Cost Review Commission and the Maryland Department of 7 Labor on:

8 (1) THE NUMBER OF HOSPITAL EMPLOYEES DISPLACED DUE TO 9 LAYOFFS; <u>AND</u>

10(2)THE CATEGORIES OF HOSPITAL EMPLOYEES DISPLACED DUE TO11LAYOFFS; AND

12(3)THE NUMBER OF HOSPITAL EMPLOYEES TO WHOM HOSPITALS13DIRECTLY PROVIDED FUNDING FOR RETRAINING PURPOSES.

14(G)ANORGANIZATIONREPRESENTINGHOSPITALEMPLOYEESTHAT15RECEIVES FUNDING FROM HOSPITALS FOR THE PURPOSE OF WORKER RETRAINING16SHALL SUBMIT AN ANNUAL REPORT TO THE MARYLAND DEPARTMENT OF LABOR17AND THE COMMISSION THAT DETAILS THE FUNDING RECEIVED AND THE TRAINING18PROVIDED.

19 Article – Labor and Employment

20 11–201.

21 (A) (1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS 22 INDICATED.

23 (2) <u>"ACQUISITION" MEANS:</u>

24(I)ANY TRANSFER OF STOCK OR ASSETS THAT RESULTS IN A25CHANGE OF THE PERSON OR PERSONS WHO CONTROL A HEALTH CARE FACILITY; OR

26(II)THE TRANSFER OF ANY STOCK OR OWNERSHIP INTEREST IN27A HEALTH CARE FACILITY IN EXCESS OF 25%.

28(3)"CLOSURE" MEANS THE COMPLETE CESSATION OF ALL SERVICES29IN A HEALTH CARE FACILITY WHOSE RATES ARE SET BY THE COMMISSION.

30(4)"COMMISSION" MEANS THE STATE HEALTH SERVICES COST31REVIEW COMMISSION.

1(2) (5)"Downsize" means to reduce the number of2EMPLOYEES OF AN ACUTE CARE HOSPITAL LOCATION SITE REGULATED BY THE3HEALTH SERVICES COST REVIEW COMMISSION ENTITY4EQUIVALENT EMPLOYEES IN ANY CONSECUTIVE 3-MONTH PERIOD.

- 5 (6) "MERGER" MEANS THE UNION OF TWO OR MORE HOSPITALS BY
   6 THE TRANSFER OF ALL THE PROPERTY OF ONE OR MORE OF THE HOSPITALS TO ONE
   7 OF THE HOSPITALS THAT CONTINUES TO EXIST.
- 8 (3) (7) "PARTIAL CLOSURE" MEANS TO CLOSE A SERVICE LINE OF
  9 AN ACUTE CARE HOSPITAL.
- 10(4) (8)"SERVICE LINE" MEANS A GROUPING OF SERVICES INTO11HIGHER LEVEL CATEGORIES THAT REFLECT SIMILAR CLINICAL DELIVERY.

12(1) The Department shall establish a program for the retraining [(a)] **(B)** [and placement] of, AND JOB-SEEKING ASSISTANCE FOR, hospital employees who are 13 14NONEXECUTIVE EMPLOYEES, WHO ARE NOT LICENSED PHYSICIANS OR PHYSICAL PHYSICIAN ASSISTANTS, AND WHO ARE unemployed or who may become unemployed as 1516a result of the closing, **PARTIAL CLOSURE**, delicensing, downsizing, or [possible downsizing] ACQUISITION of a hospital or the merging of hospitals under [§ 19–325] 17TITLE 19, SUBTITLE 3 of the Health – General Article. 18

19(2)THE PROGRAM ESTABLISHED UNDER THIS SUBSECTION SHALL20INCLUDE:

## (I) JOB-SEEKING ASSISTANCE WITH AN AFFILIATED HOSPITAL OR HEALTH CARE ENTITY, AN UNAFFILIATED HOSPITAL OR HEALTH CARE ENTITY, OR A NONHEALTH CARE-RELATED POSITION; AND

(II) TRAINING AND SKILLS DEVELOPMENT THROUGH
PROGRAMS FUNDED BY THE DEPARTMENT, BY THE HOSPITAL OR HEALTH SYSTEM,
OR BY OTHER PROGRAMS AVAILABLE TO PROVIDE TRAINING AND SKILLS
DEVELOPMENT.

(C) THE PROGRAM ESTABLISHED UNDER SUBSECTION (B) OF THIS SECTION
SHALL REQUIRE THAT THE HOSPITAL WORK WITH EMPLOYEES AND, IF APPLICABLE,
THE EMPLOYEES' REPRESENTATIVES TO IDENTIFY AVAILABLE AND APPROPRIATE
TRAINING OR RETRAINING PROGRAMS THAT MAY BE USED IN ANTICIPATION OF THE
CLOSURE, PARTIAL CLOSURE, OR CONVERSION TO A FREESTANDING MEDICAL
FACILITY.

1 (D) BEFORE THE DEPARTMENT USES THE PROGRAM ESTABLISHED UNDER 2 SUBSECTION (B) OF THIS SECTION, THE DEPARTMENT MAY USE OTHER PROGRAMS 3 IN THE DEPARTMENT TO PROVIDE TRAINING AND ASSISTANCE TO THE HOSPITAL 4 EMPLOYEES WHO WOULD BE ELIGIBLE FOR TRAINING AND ASSISTANCE UNDER THE 5 PROGRAM.

6

(E) THE DEPARTMENT MAY:

7 (1) USE VENDORS TO PROVIDE THE SERVICES REQUIRED UNDER THIS
8 SECTION; AND

9 (2) USE THE FUND ESTABLISHED UNDER SUBSECTION (G) OF THIS 10 SECTION TO PAY THE VENDORS.

11 [(b)] (F) The Secretary and the Secretary of Health shall adopt regulations to 12 implement this section.

13 [(c)] (G) There is a Hospital Employees Retraining Fund. The Fund shall be 14 used:

15 (1) for the purposes described in this section; and

16 (2) to pay any and all expenses of the Department in administering this17 section.

18 [(d)] (H) Any unexpended funds remaining in the Hospital Employees 19 Retraining Fund at the end of the fiscal year:

20 (1) may not revert to the General Fund of the State; AND

21 (2) SHALL BE RETURNED TO THE HOSPITALS THAT CONTRIBUTED TO 22 THE FUND ON A PRO RATA BASIS.

(I) (1) ON OR BEFORE SEPTEMBER 30, 2023, THE DEPARTMENT, IN
CONJUNCTION WITH THE STATE HEALTH SERVICES COST REVIEW COMMISSION,
SHALL SUBMIT A REPORT TO THE SENATE FINANCE COMMITTEE AND THE HOUSE
HEALTH AND GOVERNMENT OPERATIONS COMMITTEE, IN ACCORDANCE WITH §
27 2–1257 OF THE STATE GOVERNMENT ARTICLE, ON THE IMPLEMENTATION OF THIS
SECTION.

29

(2) THE REPORT SHALL INCLUDE:

30(I)THE ANNUAL FEE CONTRIBUTED BY EACH HOSPITAL TO THE31HOSPITAL EMPLOYEES RETRAINING FUND;

1 (II) ANY ADDITIONAL FEE REQUIRED BY THE STATE HEALTH 2 SERVICES COST REVIEW COMMISSION UNDER § 19–326.1(B) OF THE 3 HEALTH – GENERAL ARTICLE AND PAID TO THE HOSPITAL EMPLOYEES 4 RETRAINING FUND;

5 (III) THE <del>QUARTERLY</del> <u>ANNUAL</u> REPORTS SUBMITTED BY EACH 6 HOSPITAL UNDER § <del>19–326.2</del> <u>19–326.1</u> OF THE HEALTH – GENERAL ARTICLE;

7 (IV) THE AMOUNT OF MONEY DRAWN FROM THE HOSPITAL 8 EMPLOYEES RETRAINING FUND FOR RETRAINING PROGRAMS AND THE FUND 9 BALANCE;

10 (V) THE NUMBER OF ELIGIBLE EMPLOYEES THAT USED THE 11 PROGRAM ESTABLISHED UNDER SUBSECTION (B) OF THIS SECTION DURING THE 12 REPORTING PERIOD;

13(VI)THE NUMBER OF ELIGIBLE EMPLOYEES THAT USED OTHER14PROGRAMS UNDER SUBSECTION (D) OF THIS SECTION; AND

(VII) THE NUMBER OF ELIGIBLE EMPLOYEES DENIED ACCESS TO
 THE PROGRAM ESTABLISHED UNDER SUBSECTION (B) OF THIS SECTION DUE TO
 FUNDING SHORTAGES.

18 <u>SECTION 2. AND BE IT FURTHER ENACTED, That any monies remaining in the</u> 19 <u>Hospital Employees Retraining Fund on September 30, 2023, shall be returned to the</u> 20 <u>contributing hospitals, pro rata.</u>

SECTION 2. 3. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2020. It shall remain effective for a period of 3 years and, at the end of September 30, 2023, this Act, with no further action required by the General Assembly, shall be abrogated and of no further force and effect.

Approved:

Governor.

President of the Senate.

Speaker of the House of Delegates.

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