

STATE OF COLORADO

John W. Hickenlooper, Governor
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Executive Director and Chief Medical Officer

Dedicated to protecting and improving the health and environment of the people of Colorado

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Colorado Department
of Public Health
and Environment

NOTICE OF PUBLIC RULE-MAKING HEARING BEFORE THE COLORADO BOARD OF HEALTH

NOTICE is hereby given pursuant to the provisions of Section 24-4-103, C.R.S., that the Colorado Board of Health will conduct a public rule-making hearing on October 17, 2012 in the Sabin-Cleere Conference Room of the Colorado Department of Public Health and Environment, Bldg. A, First Floor, 4300 Cherry Creek Drive, South, Denver, CO 80246, to consider the promulgation of revisions to Standards for Hospitals and Health Facilities, 6 CCR 1011-1, Chapters X – Rehabilitation Hospitals. The Board meeting commences in the morning. For the specific time this hearing is scheduled, please consult the meeting agenda on the Board's Web site at <http://www.cdphe.state.co.us/op/bh/index.html> on or after Friday, October 5, 2012, or call (303) 692-3464.

The purpose of this hearing is to receive public comments on technical revisions to the regulations including but not limited to changing the name of rehabilitation "centers" to rehabilitation "hospitals" in conformance with statute.

The proposed rules have been developed by the Health Facilities and Emergency Medical Services Division of the Colorado Department of Public Health and Environment pursuant to Section 25-1.5-103, C.R.S.

Copies of the proposed rules may be obtained by contacting the Colorado Department of Public Health and Environment, Health Facilities and Emergency Medical Services Division (HFD A-2), 4300 Cherry Creek Drive S., Denver, CO 80246, (303) 692-2800. The proposed amendments will also be available on the Board's Web site at <http://www.cdphe.state.co.us/op/bh/index.html> under "Notices of Upcoming Public Rulemaking Hearings and Draft Proposed Rules."

The Board encourages all interested persons to participate in the hearing by providing written data, views, or comments, or by making oral comments at the hearing. At the discretion of the Chair, oral testimony at the hearing may be limited to five minutes or less depending on the number of persons wishing to comment.


The Board requests submission of written materials no later than October 3, 2012 to allow the Board sufficient time to review the comments prior to the meeting. Persons wishing to submit written comments or views should submit them to:

Colorado Board of Health

ATTN: Jamie L. Thornton, Program Assistant
Colorado Department of Public Health and Environment
4300 Cherry Creek Drive South EDO-A5
Denver, Colorado 80246-1530
FAX: 303-691-7702, e-mail: Jamie.thornton@state.co.us

The proposed revisions to be considered at the hearing, together with the proposed statement of basis and purpose, specific statutory authority and regulatory analysis will be available for inspection at the above address by any person at least five working days prior to the hearing.

Dated this 21 day of August 2012.


Christopher E. Urbina, MD, MPH
Executive Director/Chief Medical Officer

DRAFT
STATEMENT OF BASIS AND PURPOSE
AND SPECIFIC STATUTORY AUTHORITY FOR

6 CCR 1011-1, Standards for Hospitals and Health Facilities

Chapter X – Rehabilitation Centers

Name Change to Rehabilitation Hospitals

July 30, 2012

Basis and Purpose

The proposed regulations change the name of the facility type from rehabilitation “center” to rehabilitation “hospital” in conformance with recent statutory changes.

Specific Statutory Authority

These rules are promulgated pursuant to Section 25-1.5-103, C.R.S.

Major Factual and Policy Issues Encountered

The proposed rule conforms with amendments made by House Bill 12-1294 to C.R.S. § 25-1.5-103 (1)(a)(I)(A) and C.R.S. § 25-3-101 (1).

DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT
Health Facilities Regulation Division
STANDARDS FOR HOSPITALS AND HEALTH FACILITIES
CHAPTER X - REHABILITATION ~~CENTERS~~ HOSPITALS

6 CCR 1011-1 Chap 10

[Editor's Notes follow the text of the rules at the end of this CCR Document.]

Copies of these regulations may be obtained at cost by contacting:

Division Director
Colorado Department of Public Health and Environment
Health Facilities Division
4300 Cherry Creek Drive South
Denver, Colorado 80222-1530
Main switchboard: (303) 692-2800

These chapters of regulation incorporate by reference (as indicated within) material originally published elsewhere. Such incorporation, however, excludes later amendments to or editions of the referenced material. Pursuant to 24-4-103 (12.5), C.R.S., the Health Facilities Division of the Colorado Department of Public Health And Environment maintains copies of the incorporated texts in their entirety which shall be available for public inspection during regular business hours at:

Division Director
Colorado Department of Public Health and Environment
Health Facilities Division
4300 Cherry Creek Drive South
Denver, Colorado 80222-1530
Main switchboard: (303) 692-2800

Certified copies of material shall be provided by the division, at cost, upon request. Additionally, any material that has been incorporated by reference after July 1, 1994 may be examined in any state publications depository library. Copies of the incorporated materials have been sent to the state publications depository and distribution center, and are available for interlibrary loan.

Part 1. STATUTORY AUTHORITY AND APPLICABILITY

1.101 STATUTORY AUTHORITY

- (1) Authority to establish minimum standards through regulation and to administer and enforce such regulations is provided by Sections 25-1.5-103 and 25-3-101, C.R.S., et seq.

1.102 APPLICABILITY

- (1) All hospitals shall meet applicable federal and state statutes and regulations, including but not limited to:

(a) 6 CCR 1011-1, Chapter II.

(b) This Chapter X.

(c) Provisions of 6 CCR 1011-1, Chapter IV, General Hospitals, as referenced herein.

- (2) Contracted services shall meet the standards established herein.

Part 2. DEFINITIONS

2.100

2.101 GENERAL DEFINITIONS

- (1) "Department" means the Department of Public Health and Environment, unless the context dictates otherwise.

- (2) "Division" means the Health Facilities and Emergency Medical Services Division, unless the context dictates otherwise.

- (3) "Governing board" means the board of trustees, directors, or other governing body in whom the ultimate authority and responsibility for the conduct of the hospital is vested.

- (4) "General Hospital" means a hospital licensed pursuant to 6 CCR 1011-1, Chapter IV, General Hospitals.

- (5) "Occupational therapy" means a rehabilitation procedure guided by a qualified therapist who, under medical supervision, uses any purposeful activity to gain from the patient the desired physical function and/or mental response.

- (6) "Patient care unit" means a designated area of the hospital that provides a bedroom or a grouping of bedrooms with respective supporting facilities and services to provide adequate nursing care and clinical management of inpatients; and that is thereby planned, organized, operated, and maintained to function as a separate and distinct unit.

- (7) "Plan review" means the review by the Department, or its designee, of new construction or remodeling plans to ensure compliance by the facility with the National Fire Protection Association (NFPA) Life Safety Code and with this Chapter X. Plan review consists of the examination of new construction or remodeling plans and onsite inspections, where warranted. In reference to the National Fire Protection Association requirements, the Department is the authority having jurisdiction for state licensure.

- (8) "Rehabilitation center HOSPITAL" means a facility that is intended to provide a community with a type of facility, licensed as a hospital, capable of rendering quality service to those patients not acutely ill and not requiring surgical, intensive, maternity, or extensive radiological or clinical laboratory services, on a direct admission thereto or as a secondary referral admission subject to the clinical judgment of attending physicians, and who may, therefore, receive a relatively high level of

special medical and nursing care directed primarily to a rehabilitative or restorative process commensurate with the individual clinical diagnosis. In general, but subject to specific conditions governing a particular facility within a given community, it is intended that a **rehabilitation Center HOSPITAL** offer its services on the basis of a full spectrum of community need without singular identification with any specific age groups or economic status of patients served.

- (9) "Respiratory care" is that service which is organized to provide facilities, equipment, and personnel who are qualified by training, experience and ability to treat conditions caused by deficiencies or abnormalities associated with respiration.

Part 3. DEPARTMENT OVERSIGHT

3.101 APPLICATION FEES. Fees shall be submitted to the Department as specified below.

- (1) Initial License (when such initial licensure is not a change of ownership). A license applicant shall submit a nonrefundable fee with an application for licensure as follows: base fee of \$5,700 and a per bed fee of \$50. The initial licensure fee shall not exceed \$10,500.
- (2) Renewal License . A license applicant shall submit a nonrefundable fee with an application for licensure as follows: base fee of \$1,600 and a per bed fee of \$12. The renewal fee shall not exceed \$8,000.
- (3) Change of Ownership . A license applicant shall submit a nonrefundable fee of \$2,500 with an application for licensure.
- (4) Provisional License . The license applicant may be issued a provisional license upon submittal of a nonrefundable fee of \$2,500. If a provisional license is issued, the provisional license fee shall be in addition to the initial license fee.
- (5) Conditional License . A facility that is issued a conditional license by the Department shall submit a nonrefundable fee ranging from 10 to 25 percent of its applicable renewal fee. The Department shall assess the fee based on the anticipated costs of monitoring compliance with the conditional license. If the conditional license is issued concurrent with the initial or renewal license, the conditional license fee shall be in addition to the initial or renewal license fee.

Part 4. FIRE SAFETY AND PHYSICAL PLANT STANDARDS

4.101 PLAN REVIEW AND PLAN REVIEW FEES.

Plan review and plan review fees are required as listed below in Sections (1) through (5), below. Fees are nonrefundable and shall be submitted prior to the Department initiating a plan review for a facility.

- (1) Initial Licensure . Applicable to applications for an initial license, when such initial license is not a change of ownership. This includes new facility construction and existing structures. The requirement for plan review and the fee applies to initial license applications submitted on or after May 15, 2008. Fee : see table below.

Square Footage	Cost per square foot	Explanatory Note
0-35,000	\$0.37	This is the cost for the first 35,000 sq ft of any plan submitted.
35,001-200,000	\$0.03	This cost is applicable to the additional square footage over 35,000 and

		up to 200,000 sq ft.
200,001+	\$0.01	This cost is applicable to the additional square footage over 200,000 sq ft.

- (2) New Construction . Applicable to new construction including replacement facilities, structural additions of any size and prefabricated structures. The requirement for plan review and the fee applies to construction for which the application for the building permit from the local authority having jurisdiction is dated on or after May 15, 2008. However, facilities for which the application for the building permit from the local authority having jurisdiction is dated prior to May 15, 2008 may request a partial plan review. The partial plan review is subject to a ten (10) to twenty-five (25) percent reduction of the fee, as determined by the Department, dependent on the phase of facility construction; except that the fee shall not be below the minimum fee established by this Section 4.101 (2). Fee : see table below. Minimum fee: \$2,000.

Square Footage	Cost per square foot	Explanatory Note
0-35,000	\$0.37	This is the cost for the first 35,000 sq ft of any plan submitted.
35,001-200,000	\$0.03	This cost is applicable to the additional square footage over 35,000 and up to 200,000 sq ft.
200,001+	\$0.01	This cost is applicable to the additional square footage over 200,000 sq ft.

- (3) Remodeling – General . Applicable to relocation, removal or installation of walls resulting in 50% or more of a smoke compartment being reconfigured. The cost per square footage listed in the table below is to be assessed for the entire smoke compartment(s) being reconfigured. The requirement for plan review and the fee applies to construction for which the application for the building permit from the local authority having jurisdiction is dated on or after May 15, 2008. Fee : see table below. Minimum fee: \$2,000.

Square Footage	Cost per square foot	Explanatory note
0-35,000	\$0.25	This is cost for the first 35,000 sq ft of any plan submitted.
35,001-200,000	\$0.03	This cost is applicable to the additional square footage over 35,000 and up to 200,000 sq ft.
200,001+	\$0.01	This cost is applicable to the additional square footage over 200,000 sq ft.

(4) Remodeling – Egress Components . Applicable to the relocation, removal, or addition of any egress component, including but not limited to corridors, stairwells, exit enclosures, or points of refuge. (Widening of an egress component is not relocation.) The requirement for plan review and the fee applies to construction for which the application for the building permit from the local authority having jurisdiction is dated on or after May 15, 2008. Fee : \$2,000. However, if these renovations are part of the smoke compartment reconfiguration subject to the fee listed in Section 4.101 (3), the fee in this Section 4.101 (4) shall not apply.

(5) Remodeling – Specific Systems . Applicable to significant modifications to the following systems: fire sprinkler, fire alarm, medical gas, kitchen exhaust/suppression system, and essential electrical system. The requirement for plan review and the fee applies to significant modifications where construction is initiated on or after July 1, 2008. For the purposes of this Section 4.101 (5), construction of significant modifications is deemed initiated when there is an alteration associated with the remodeling to an existing structure that results in a physical change. Fee : \$2,000 for up to four smoke compartments, plus \$500 for each additional compartment. However, if these renovations are part of the smoke compartment reconfiguration subject to the fee listed in Section 4.101 (3), the fee in this Section 4.101 (5) shall not apply. Significant modifications include:

(a) Fire sprinkler: 100 or more sprinklers. Notwithstanding the other provisions in this Section 4.101 (5), the extension of a sprinkler system involving the installation of 25 to 99 sprinkler heads for an area previously unsprinklered is subject to a partial plan review consisting of the review of the remodeling plans and a fee of \$500.

(b) Fire alarm: any modification to the fire alarm system that involves the replacement of the main fire alarm control unit (panel).

(c) Medical gas: modifications that affect 50% or more of a smoke compartment.

(d) Kitchen exhaust/suppression system: replacement of the suppression or hood exhaust/duct system.

(e) Essential electrical system: replacement or addition of a generator or transfer switch.

4.102 COMPLIANCE WITH THE LIFE SAFETY CODE

(1) The facility shall be in conformance with the standards established in Chapter IV, Section 4.102 (1). This Section 4.102 (1) incorporates by reference, the National Fire Protection Association (NFPA) 101, Life Safety Code (2000). Such incorporation by reference, as provided for in 6 CCR 1011-1, Chapter II, excludes later amendments to or editions of the referenced material. In addition, the architectural design must provide for easy, independent access to all areas of the facility by handicapped persons. Appropriate ramps, rails, and elevators must be provided.

Part 5. FACILITY OPERATIONS.

The facility shall provide services in accordance with CHAPTER IV, Subpart 5.100 - Central Medical-Surgical Supply Services, Subpart 5.200 - Housekeeping Services, Subpart 5.300 - Maintenance Services, Subpart 5.400 - Waste Disposal Services and Subpart 5.500 - Linen and Laundry Services.

Part 6. GOVERNANCE AND LEADERSHIP.

The facility shall have a governing board, administrative officer, and medical staff in conformance with the standards established in Chapter IV, Part 6, Governance and Leadership. In addition, the Chief of Staff shall have training and expertise in rehabilitation medicine. The qualifications of the medical staff shall meet the needs of the patients in accordance with the scope of services provided by the facility.

Part 7. PERSONNEL.

The facility shall be in conformance with the standards established in Chapter IV, Part 7, Personnel.

Part 8. MEDICAL RECORDS DEPARTMENT.

The facility shall have a medical records department in conformance with the standards established in Chapter IV, Part 8, Medical Records Department.

Part 9. INFECTION CONTROL SERVICES.

The facility shall provide services in conformance with the standards established in Chapter IV, Part 9, Infection Control Services.

Part 10. PATIENT RIGHTS.

The facility shall be in compliance with 6 CCR 1011-1, Chapter II, Part 6.

Part 11. GENERAL PATIENT CARE SERVICES.

The facility shall provide services in conformance with the standards established in Chapter IV, Part 11, General Patient Care Services.

Part 12. NURSING DEPARTMENT.

The facility shall have a nursing department in conformance with the standards established in Chapter IV, Part 12, Nursing Services.

Part 13. PHARMACEUTICAL SERVICES.

The facility shall provide pharmaceutical services in conformance with the standards established in Chapter IV, Part 13, Pharmaceutical Services.

Part 14. LABORATORY SERVICES.

1 The facility shall provide laboratory services in conformance with the standards established in Chapter IV,
2 Part 14, Laboratory Services.

3 **Part 16. DIETARY SERVICES.**

4 The facility shall provide services in conformance with the standards established in Chapter IV, Part 16,
5 Dietary Services.

6 **Part 15. DIAGNOSTIC IMAGING SERVICES.**

7 The facility shall provide diagnostic imaging services in conformance with the standards established in
8 Chapter IV, Part 15, Diagnostic Imaging Services.

9 **Part 17. ANESTHESIA SERVICES.**

10 The facility may provide anesthesia services. If such services are provided, they shall be in conformance
11 with the standards established in Chapter IV, Part 17, Anesthesia Services.

12 **Part 18. EMERGENCY SERVICES**

13 **18.101 ORGANIZATION AND STAFFING**

14 (1) Each ~~rehabilitation center~~ FACILITY shall be organized and equipped to provide emergency treatment
15 to patients who have been admitted to the facility.

16 (2) Provision shall be made for medical staff coverage at any hour.

17 (3) A roster of physicians on call, including physicians on second call, shall be posted, together with
18 methods whereby specialized medical services may be obtained.

19 **18.102 PROGRAMMATIC FUNCTIONS**

20 (1) Policies and procedures for staff action in the event of an emergency shall be developed by the
21 medical staff and incorporated in a manual for staff use.

22 (2) The facility shall establish a transfer agreement with a general hospital to provide patients with a
23 higher level of care when needed.

24 **18.103 EQUIPMENT AND SUPPLIES**

25 (1) Emergency equipment, supplies and medications shall be provided commensurate with the scope of
26 emergency services as specified in the written policies and procedures.

27 **18.104 FACILITIES. Reserved.**

28 **Part 19. OUTPATIENT SERVICES**

29 **19.101 ORGANIZATION AND STAFFING**

30 (1) The hospital may provide outpatient services. Where outpatient services are provided, the type and
31 quantity of facilities shall be such as to provide safe, prompt service to the number and types of
32 patients served.

33 (2) The privilege of physicians and dentists in the outpatient service shall be defined in terms of their
34 training and ability, in the same manner as their privilege in the inpatient services.

(3) There shall be sufficient qualified registered nurses and other nursing personnel to render adequate nursing service to patients.

19.102 PROGRAMMATIC FUNCTIONS. Reserved.

19.103 EQUIPMENT AND SUPPLIES. Reserved.

19.104 FACILITIES. Reserved.

Part 20. Reserved.

Part 21. Reserved.

Part 22. SOCIAL AND PSYCHOLOGICAL SERVICES

22.101 ORGANIZATION AND STAFFING

(1) Psychological services shall be available, by persons qualified by training, experience and ability, to patients who need this service.

(2) Social services shall be provided by persons qualified by training, experience and ability.

22.102 PROGRAMMATIC FUNCTIONS. Reserved.

22.103 EQUIPMENT AND SUPPLIES. Reserved.

22.104 FACILITIES

(1) Office and work space for psychological testing, evaluation and counseling shall be provided.

(2) Social services office space for private interview and counseling shall be provided.

Part 23. RESPIRATORY CARE SERVICES.

The facility may provide respiratory care services. If such services are provided, they shall be in conformance with the standards established in Chapter IV, Part 23, Respiratory Care Services.

Part 24. REHABILITATION THERAPIES & SERVICES

24.100 Occupational Therapy

24.200 Physical Therapy

24.300 Speech Therapy

24.400 Vocational Counseling

24.100 OCCUPATIONAL THERAPY

24.101 ORGANIZATION AND STAFFING

(1) The occupational therapy services shall be under direction of a physician who is licensed to practice medicine in the State of Colorado, preferably a diplomate of the American Board of Physical Medicine and Rehabilitation. However, nothing in this Section 24.101 (1) shall preclude the facility from having one medical director who is responsible for all rehabilitation therapies and services.

24.102 PROGRAMMATIC FUNCTIONS

- (1) There shall be written policies for the occupational therapy services which are determined jointly by the physician and the ~~rehabilitation center~~ FACILITY administrator. There shall be evidence that these policies are reviewed and revised at regular intervals.

24.103 EQUIPMENT AND SUPPLIES

- (1) There shall be adequate and appropriate equipment and supplies as determined by the professional staff to meet the requirements for care and treatment of patients.

24.104 FACILITIES

- (1) The occupational therapy services shall be located in an area convenient for all patients.
- (2) The occupational therapy area shall have a reception area, an examining room, treatment area, separate toilet and lavatory facilities for patients and staff, and storage areas.
- (3) There shall be adequate space in the reception area to accommodate ambulatory and wheel chair patients.
- (4) The following specific evaluation and treatment facilities must be provided by all ~~rehabilitation centers~~:
~~FACILITIES: Occupational Therapy.~~ (1) Office and work space for occupational therapy staff; (2) Therapy area; (3) Storage space for supplies and equipment.
- (5) Facilities for teaching activities of daily living.

24.200 PHYSICAL THERAPY**24.201 ORGANIZATION AND STAFFING**

- (1) Physical therapy services shall be under the direction of a physician who is licensed to practice medicine in the State of Colorado, who has a particular interest in physical medicine, and who preferably is a diplomate of the American Board of Physical Medicine and Rehabilitation. However, nothing in this Section 24.201 (1) shall preclude the facility from having one medical director who is responsible for all rehabilitation therapies and services.
- (2) Physical therapy shall be rendered only by a physical therapist licensed to practice in the State of Colorado. All personnel assisting with the physical therapy of patients must be under the direct supervision of physical therapists at all times.

24.202 PROGRAMMATIC FUNCTIONS

- (1) There shall be written policies for the physical therapy services which are developed jointly by the physician and the chief physical therapist and approved by the ~~rehabilitation center~~ FACILITY administrator. There shall be evidence that these policies are reviewed and revised at regular intervals.
- (2) Prosthetic and orthotic services may be provided either within the ~~rehabilitation center~~ FACILITY or through arrangements with a qualified facility. The program may be worked out in cooperation with other health facilities of the area and with official and nonofficial agencies concerned. This program should include the possibility of disaster involving loss of the ~~rehabilitation center~~ FACILITY or serious impairment of its facilities.

1

2 **24.203 EQUIPMENT AND SUPPLIES**

- 3 (1) There shall be adequate and appropriate equipment and supplies as determined by the professional
4 staff to meet the requirements for care and treatment of patients.

5 **24.204 FACILITIES**

- 6 (1) The physical therapy services shall be located in an area convenient for all patients.

- 7 (2) The physical therapy area shall have a reception area, an examining room, treatment area, separate
8 toilet and lavatory facilities for patients and staff and storage areas.

- 9 (3) There shall be adequate space in the reception area to accommodate ambulatory, stretcher and
10 wheel chair patients.

- 11 (4) The following specific evaluation and treatment facilities must be provided by all rehabilitation centers
12 **FACILITIES: Physical Therapy:** (1) Office and work space for physical therapy staff; (2)
13 Rehabilitation gymnasium; (3) Physical therapy treatment area; (4) Storage for supplies and
14 equipment; (5) Outdoor exercise area (desirable but not mandatory).

- 15 (5) If orthotic and prosthetic devices are provided within the facility, space shall be provided, for fitting
16 and adjustment services for prosthetic and orthotic devices.

17 **24.300 SPEECH THERAPY**18 **24.301 ORGANIZATION AND STAFFING**

- 19 (1) Speech therapy services shall be provided by persons qualified by training, experience and ability.

20 **24.302 PROGRAMMATIC FUNCTIONS. Reserved.**21 **24.303 EQUIPMENT AND SUPPLIES**

- 22 (1) Suitable equipment and supplies for speech therapy shall be provided either within the facility or
23 through arrangements with existing community services.

- 24 (2) Suitable equipment for audiometric and other sensory testing and evaluation shall be provided either
25 within the facility or through arrangements with existing community facilities.

26 **24.304 FACILITIES**

- 27 (1) Suitable space for speech therapy shall be provided either within the facility or through arrangements
28 with existing community services.

29 **24.400 VOCATIONAL COUNSELING**30 **24.401 ORGANIZATION AND STAFFING**

- 31 (1) Vocational services shall be provided by persons qualified by training, experience and ability.

32 **24.402 PROGRAMMATIC FUNCTIONS. Reserved.**33 **24.403 EQUIPMENT AND SUPPLIES. Reserved.**

1 **24.404 FACILITIES**

2 (1) Office space for vocational counseling and evaluations shall be provided.

3 **Part 25. PEDIATRIC SERVICES.**

4 The facility may provide pediatric patient care services. If such services are provided, they shall be in
5 conformance with the standards established in Chapter IV, Part 25, Pediatric Services.

6 **Part 26. Reserved.**

7 **Part 27. Reserved.**

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