

R432. Health and Human Services, Health Care Facility Licensing.

R432-108. Rural Emergency Hospital.

R432-108-1. Authority.

This rule is authorized by Section 26B-2-202.

R432-108-2. Purpose.

The purpose of this rule is to promote public health and welfare through establishment of a specialty hospital category for rural hospitals. The intent is to allow rural communities to preserve access to primary care and emergency health care services, provide health care services that meet community needs, and help assure the financial viability of program participants through improved reimbursement and operating requirements. This rule sets standards for the operation of a Rural Emergency Hospital.

R432-108-3. Definitions.

(1) "Rural Emergency Hospital (REH)" means an entity that operates to provide emergency department services, observation care, and other outpatient medical and health services where the annual per patient average length of stay does not exceed 24 hours.

(2) "Referral Hospital" means a hospital that has sufficient resources to receive emergency or non-emergency patient transfers and referrals from a REH.

(3) "Request for Agency Action" is the form used for all licensing changes including a new license, change of ownership, change of administrator, name change, or change in occupancy.

R432-108-4. Licensure.

(1) A license is required for a REH as identified in Rule 432-2.

(2) A licensee may not provide inpatient services, except those furnished in a unit that is a distinct part licensed as a skilled nursing facility to furnish post-REH or post-hospital extended care services.

(3) Participation as an REH is limited to licensees that:

(a) meet the definition in the Code of Federal Regulations, Title 42, Part 485.502; and

(b) became licensed as a General Acute Hospital or Critical Access Hospital before December 27, 2020.

R432-108-5. Construction, Facilities, and Equipment Standards.

(1) Each licensee that received a license before December 27, 2020 that elects to convert to a REH may maintain the physical plant that is currently licensed, without having to meet the current construction or building code for a general acute care hospital.

(2) Within 18 months of conversion to the specialty REH, a licensee may submit a request for agency action to convert to a general hospital category without being required to meet Rule R432-4, General Construction Standards.

R432-108-6. Hospital Rules.

(1) The following sections of Rule R432-100, General Hospital Rules, additionally apply to the licensee:

(a) Governing Body;

(b) Administrator;

(c) Professional Staff; a network hospital or a department approved equivalent may perform credentialing of medical and professional staff;

(d) Personnel Management Services;

(e) Quality Improvement Plans; a network hospital or department approved equivalent may perform quality improvement;

(f) Infection Control and Prevention;

(g) Patient Rights;

(h) Nursing Services; a qualified registered nurse is not required to be on duty on a 24-hour basis; but shall be on duty when there are patients in the facility;

(i) Radiology Services; a licensee may provide off-site radiology services through a network hospital or through other arrangements approved by the department;

(j) Pharmacy Services;

(k) Medical Records;

(l) Housekeeping Services;

(m) Maintenance Services; and

(n) Emergency and Disaster Plans.

(2) If the licensee provides the following clinical or ancillary services then the following sections of Rule R432-100 shall apply to the licensee:

(a) Surgical Services;

(b) Anesthesia Services;

(c) Perinatal Services;

(d) Respiratory Services;

- (e) Blood Services;
 - (f) Telemedicine Services;
 - (g) Central Supply; and
 - (h) Laundry Services.
- (3) The licensee shall ensure that there is enough medical and nursing personnel qualified in emergency care to meet the written emergency procedures and needs anticipated by the facility.
- (4) The licensee shall meet the requirements specified in the Code of Federal Regulations, Title 485, Part 618, Sections (a) through (e) with respect to:
- (a) 24-hour availability of emergency services;
 - (b) equipment, supplies, and medication;
 - (c) blood and blood products;
 - (d) personnel; and
 - (e) coordination with emergency response systems.
- (5) The licensee shall have an agreement in effect with at least one certified hospital that is a level I or level II trauma center as identified in Rule R426-9 for the referral and transfer of patients requiring emergency medical care beyond the capabilities of the REH.
- (6) The licensee shall provide basic laboratory services essential to the immediate diagnosis and treatment of the patient consistent with nationally recognized standards of care for emergency services. The licensee shall ensure that:
- (a) laboratory services are available, either directly or through a contractual agreement with a certified laboratory that meets requirements of the Code of Federal Regulations, Title 42, Part 493; and
 - (b) emergency laboratory services are available 24 hours a day.

R432-108-7. Rural Health Network.

- (1) The participating REH licensee shall be a member of a rural health network, as evidenced by a signed, written agreement with at least one referral hospital that is a member of the network.
- (2) The agreement shall address the following:
- (a) patient referral and transfer;
 - (b) the development and use of communications system; and
 - (c) emergency and non-emergency transportation.

R432-108-8. Penalty.

Any person who violates any part of this rule may be subject to the penalties enumerated in Section 26B-2-208 and Rule R432-3 and be charged with a class A misdemeanor as provided in Section 26B-2-216.

KEY: health care facilities

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