

## HB 675 -- Health Care Providers

Sponsor: Stefanick

This bill changes the laws regarding ambulatory medical treatment centers. In its main provisions, the bill:

- (1) Defines "ambulatory medical treatment centers" as facilities that provide specific services but do not provide accommodations for patients to stay in the establishment for more than 23 hours;
- (2) Defines "ambulatory surgical centers" as a subcategory of ambulatory medical treatment centers;
- (3) Creates the Ambulatory Medical Treatment Center Fund, which is funded by license fees charged to ambulatory medical treatment centers;
- (4) Requires the surgical or medical staff of an ambulatory medical treatment center that provides surgical procedures, childbirths, cardiac catheterization, or endoscopy to have active medical staff privileges in at least one hospital in the same community as the ambulatory medical treatment center. Alternatively, the ambulatory medical treatment center must have a current working agreement with at least one hospital in the same community as the ambulatory center;
- (5) Requires the surgical or medical staff of an ambulatory medical treatment center or the treatment center and a hospital to enter into binding arbitration if the staff and the hospital or the center and the hospital do not come to an agreement regarding staff privileges or a working agreement;
- (6) Specifies that inspections of ambulatory medical treatment centers by the Department of Health and Senior Services should occur with a frequency that is substantially comparable to the frequency of inspections of hospitals;
- (7) Requires the State Board of Registration for the Healing Arts to promulgate guidelines and standards for the performance of office-based surgery by licensed physicians and surgeons by July 1, 2006; and
- (8) Requires physicians who have an ownership interest in an ambulatory medical treatment center to disclose the ownership interest before referring a patient to the treatment center.