Amendment No. (for drafter's use only)

CHAMBER ACTION

Senate House

Representative Gannon offered the following:

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Amendment (with title amendment)

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Remove line(s) 154-172 and insert:

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- The applicant must certify can demonstrate that in the 12 months prior to submission of its application for the exemption it transferred is referring 300 or more patients per year from the hospital, including the emergency room, for open heart surgery or percutaneous coronary intervention cardiac services at a hospital with cardiac services, or that the average wait for transfer from the transferring hospital for 50 percent or more of the cardiac patients exceeds 4 hours.
- The applicant is a general acute care hospital that is in operation for 3 years or more.
- The applicant is performing more than 300 diagnostic cardiac catheterization procedures per year, combined inpatient and outpatient.

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- g. The applicant's payor mix at a minimum reflects the community average for Medicaid, charity care, and self-pay patients for all hospitals in the health service planning district and or the applicant must certify that it will provide a minimum of 10 5 percent of Medicaid, charity care, and self-pay to open-heart-surgery patients. If the applicant fails to provide a minimum of 10 percent of Medicaid, charity care, and self-pay to open heart surgery patients during each calendar year, the applicant's exemption shall be revoked.
- h. If the applicant fails to meet the established criteria for open-heart programs or fails to reach 300 surgeries per year by the end of its third year of operation, the exemption shall it must show cause why its exemption should not be revoked.

========= T I T L E A M E N D M E N T ==========

Remove line 8 and insert:

for the exemption; providing for revocation of the exemption under certain circumstances; requiring the Agency for Health Care