

The House Committee on Health & Human Services offers the following substitute to HB 791:

A BILL TO BE ENTITLED  
AN ACT

1 To amend Title 31 of the Official Code of Georgia Annotated, relating to health, so as to  
2 provide for the Department of Community Health to impose a provider fee on providers of  
3 certain ambulatory surgical center, laboratory, X-ray, or other diagnostic or imaging services;  
4 to provide for definitions; to establish the amount of a provider fee; to authorize the  
5 department to inspect such providers for purposes of auditing provider fees; to provide for  
6 penalties for failure to pay a provider fee; to prohibit the listing of a provider fee on a patient  
7 billing statement; to provide for collection of fees by civil action and tax liens; to provide for  
8 related matters; to provide for an effective date; to repeal conflicting laws; and for other  
9 purposes.

10 BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

**SECTION 1.**

11 Title 31 of the Official Code of Georgia Annotated, relating to health, is amended in Chapter  
12 5A, relating to the Department of Community Health, by designating Code Sections 31-5A-1  
13 through 31-5A-6 as Article 1 and by inserting at the end thereof a new Article 2 to read as  
14 follows:  
15

"ARTICLE 2

16 31-5A-10.

17 As used in this article, the term:

18 (1) 'Ambulatory surgical center services' means those services described for purposes of  
19 the medicare program in Section 1852(a)(2)(F)(i) of the federal Social Security Act. Such  
20 services are defined to include facility services only other than ambulatory surgical  
21 services provided by a hospital or a health system affiliated ambulatory surgery center  
22 under common ownership and do not include surgical procedures.  
23

1 (2) 'Gross receipts' means revenue received as compensation for services provided to  
2 patients of ambulatory surgical, laboratory, X-ray, or other diagnostic or imaging  
3 facilities including, but not limited to, patient participation. The term shall not include  
4 charitable contributions.

5 (3) 'Laboratory, X-ray, or other diagnostic or imaging services' means services provided  
6 in a licensed, free-standing laboratory, X-ray, or other diagnostic or imaging facility, but  
7 shall not include laboratory, X-ray, or other diagnostic or imaging services provided in  
8 a physician's office, hospital inpatient department, or hospital outpatient department.

9 (4) 'Provider fee' means the fee imposed pursuant to this article for the privilege of  
10 providing ambulatory surgical center, laboratory, X-ray, or other diagnostic or imaging  
11 services.

12 (5) 'Trauma center' means a hospital or medical facility that has been designated as a  
13 trauma center by the Department of Human Resources.

14 31-5A-11.

15 (a) There is imposed on every provider of ambulatory surgical center, laboratory, X-ray,  
16 or other diagnostic or imaging services a provider fee which shall equal 6 percent of gross  
17 receipts.

18 (b) The provider fee shall be paid by each provider of ambulatory surgical center,  
19 laboratory, X-ray, or other diagnostic or imaging services to the department quarterly.  
20 Each provider of such services shall calculate and report the provider fee due upon a form  
21 prepared by the department and submit therewith payment of the provider fee no later than  
22 the thirtieth day following the end of each calendar quarter.

23 31-5A-12.

24 (a) The department shall be authorized to promulgate rules and regulations to administer  
25 the provisions of this article.

26 (b) The department shall collect the provider fees imposed pursuant to Code Section  
27 31-5A-11 and shall deposit such fees in the general fund of the state treasury.

28 (c) The department shall prepare and distribute a form upon which a provider of  
29 ambulatory surgical center, laboratory, X-ray, or other diagnostic or imaging services shall  
30 calculate and report to the department the provider fee that is due.

31 (d) Each provider of ambulatory surgical center, laboratory, X-ray, or other diagnostic or  
32 imaging services shall keep and preserve for a period of three years such books and records  
33 as may be necessary to determine the amount for which it is liable under this article. The  
34 department shall have the authority to inspect and copy the records of such provider for  
35 purposes of auditing the calculation of the provider fee. All information obtained by the

1 department pursuant to this article shall be confidential and shall not constitute a public  
2 record.

3 (e) In the event that the department determines that a provider of ambulatory surgical  
4 center, laboratory, X-ray, or other diagnostic or imaging services has underpaid or overpaid  
5 the provider fee, the department shall notify such provider of the balance of the provider  
6 fee or refund that is due. Such payment or refund shall be due within 30 days of the  
7 department's notice.

8 (f) Any provider of ambulatory surgical center, laboratory, X-ray, or other diagnostic or  
9 imaging services that fails to pay the provider fee pursuant to this article within the time  
10 required by this article shall pay, in addition to the outstanding provider fee, a 6 percent  
11 penalty plus the maximum allowable interest for each month or fraction thereof that the  
12 payment is overdue. The provider fee required by this article shall constitute a debt due  
13 the state and may be collected by civil action and the filing of tax liens in addition to such  
14 methods provided for in this article.

15 31-5A-13.

16 No provider of ambulatory surgical center, laboratory, X-ray, or other diagnostic or  
17 imaging services shall list the provider fee as a separate charge on a patient's billing  
18 statement."

19 **SECTION 2.**

20 This Act shall become effective upon its approval by the Governor or upon its becoming law  
21 without such approval.

22 **SECTION 3.**

23 All laws and parts of laws in conflict with this Act are repealed.