

The House Committee on Health offers the following substitute to HB 662:

A BILL TO BE ENTITLED  
AN ACT

1 To amend Code Section 31-8-9.1 of the Official Code of Georgia Annotated, relating to tax  
2 credit for contributions to certain rural hospital organizations and hospital eligibility and  
3 requirements, so as to revise the definition of "rural hospital organization"; to provide for  
4 related matters; to repeal conflicting laws; and for other purposes.

5 BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

6 **SECTION 1.**

7 Code Section 31-8-9.1 of the Official Code of Georgia Annotated, relating to tax credit for  
8 contributions to certain rural hospital organizations and hospital eligibility and requirements,  
9 is amended by revising paragraph (3) of subsection (a) as follows:

10 "(3) 'Rural hospital organization' means an acute care hospital or rural freestanding  
11 emergency department licensed by the department pursuant to Article 1 of Chapter 7 of  
12 this title that:

13 (A) Has its primary campus ~~Provides inpatient hospital services at a facility~~ located in  
14 a rural county or is a critical access hospital;

15 (B) Participates in both Medicaid and ~~medicare~~ Medicare and accepts both Medicaid  
16 and ~~medicare~~ Medicare patients;

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- 17 (C) Provides health care services to indigent patients;
- 18 (D) Is licensed by the department to provide maternal and newborn services or has Has  
 19 at least ~~10~~ 5 percent of its annual net revenue categorized as indigent care, charity care,  
 20 or bad debt;
- 21 (E) Annually files IRS Form 990, Return of Organization Exempt From Income Tax,  
 22 with the department, or for any hospital not required to file IRS Form 990, the  
 23 department will provide a form that collects the same information to be submitted to the  
 24 department on an annual basis;
- 25 (F) Is operated by a county or municipal authority pursuant to Article 4 of Chapter 7  
 26 of this title or is designated as a tax-exempt organization under Section 501(c)(3) of the  
 27 Internal Revenue Code; and
- 28 (G) Is current with all audits and reports required by law; and
- 29 ~~(H) Has a three-year average patient margin, as a percent of expense, less than one~~  
 30 ~~standard deviation above the state-wide three-year average of organizations defined in~~  
 31 ~~subparagraphs (A) through (G) of this paragraph, as calculated by the department. As~~  
 32 ~~used in this subparagraph, the term 'patient margin' means gross patient revenues less~~  
 33 ~~contractual adjustments, bad debt, indigent and charity care, other uncompensated care,~~  
 34 ~~and total expenses."~~

35 **SECTION 2.**

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