

**Proposed Substitute
Bill No. 303**

LCO No. 3186

AN ACT CONCERNING URGENT CARE CENTERS.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Subsection (l) of section 19a-508c of the 2018 supplement
2 to the general statutes is repealed and the following is substituted in
3 lieu thereof (*Effective October 1, 2018*):

4 (l) Notwithstanding the provisions of this section, [on and after
5 January 1, 2017,] no hospital, health system or hospital-based facility
6 shall collect a facility fee for (1) outpatient health care services that use
7 a current procedural terminology evaluation and management (CPT
8 E/M) code and are provided at a hospital-based facility located off-site
9 from a hospital campus, other than a hospital emergency department [,
10 located off-site from a hospital campus] that is operated as a provider-
11 based entity, as defined in CFR 413.65, and authorized under Medicare
12 rules to bill for emergency procedures, or (2) outpatient health care
13 services, other than those provided in an emergency department
14 located off-site from a hospital campus, received by a patient who is
15 uninsured of more than the Medicare rate. Notwithstanding the
16 provisions of this subsection, in circumstances when an insurance
17 contract that is in effect on July 1, 2016, provides reimbursement for
18 facility fees prohibited under the provisions of this section, a hospital
19 or health system may continue to collect reimbursement from the
20 health insurer for such facility fees until the date of expiration of such
21 contract. A violation of this subsection shall be considered an unfair
22 trade practice pursuant to chapter 735a.

23 Sec. 2. Section 19a-493d of the 2018 supplement to the general

24 statutes is repealed and the following is substituted in lieu thereof
25 (*Effective October 1, 2018*):

26 (a) For purposes of this section:

27 (1) "Outpatient clinic" means an organization operated by a
28 municipality or a corporation, other than a hospital, that provides (A)
29 ambulatory medical care, including preventive and health promotion
30 services, (B) dental care, or (C) mental health services in conjunction
31 with medical or dental care for the purpose of diagnosing or treating a
32 health condition that does not require the patient's overnight care;
33 [and]

34 (2) "Urgent care center" means a free-standing facility, distinguished
35 from an emergency department setting, that is licensed as an
36 outpatient clinic under section 19a-491 and that (A) provides treatment
37 of medical conditions that do not require critical or emergent
38 intervention for a life-threatening or potentially permanent disabling
39 condition, (B) offers treatment of such conditions without requiring an
40 appointment, and (C) provides services during times of the day,
41 weekends or holidays when primary care provider offices are not
42 customarily open to patients; and

43 (3) "Freestanding emergency department" means a free-standing
44 facility that (A) is structurally separate and distinct from a hospital, (B)
45 provides emergency care, and (C) is a department of a hospital
46 licensed under chapter 368v.

47 (b) On or after April 1, 2018, no person acting individually or jointly
48 with any other person shall establish, conduct, operate or maintain an
49 urgent care center without obtaining a license as an outpatient clinic
50 under section 19a-491 from the Department of Public Health.

51 (c) The Office of Health Strategy shall adopt regulations, in
52 accordance with the provisions of chapter 54, to require an outpatient
53 clinic, urgent care center and freestanding emergency department to
54 display signage that clearly indicates whether it is (1) an outpatient

55 clinic, urgent care center or freestanding emergency department, and
56 (2) owned by a hospital or hospital system.

57 [(c)] (d) The Commissioner of Public Health may implement policies
58 and procedures as necessary to carry out the provisions of this section
59 while in the process of adopting the policies and procedures as
60 regulations, provided notice of intent to adopt the regulations is
61 published in accordance with the provisions of chapter 54.

62 [(d)] (e) The Commissioner of Social Services may establish rates of
63 payment to providers practicing in urgent care centers. The
64 Commissioner of Social Services may implement policies and
65 procedures as necessary to carry out the provisions of this section
66 while in the process of adopting the policies and procedures as
67 regulations, provided notice of intent to adopt the regulations is
68 published in accordance with the provisions of section 17b-10 not later
69 than twenty days after the date of implementation.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>October 1, 2018</i>	19a-508c(1)
Sec. 2	<i>October 1, 2018</i>	19a-493d