HOUSE BILL NO. 205


BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:


SECTION 2. Section 35-1-19, Mississippi Code of 1972, is amended as follows:

35-1-19. There is *** authorized to be established by the State Veterans Affairs Board, the Mississippi State Veterans Home on a site to be determined by the State Veterans Affairs Board, with the approval of the Bureau of Building, Grounds and Real Property Management of the Department of Finance and Administration, when funds are made available for such purpose by any agency of the federal government or other sources. The object and purpose of the establishment of the Mississippi State Veterans Home shall be to provide domiciliary care and other related services for eligible veterans of the State of Mississippi. One or more additional veterans homes or domiciliaries are hereby authorized to be established by the State Veterans Affairs Board on sites in northern, central or southern Mississippi, to be determined by the State Veterans Affairs Board, with the approval of the Bureau of Building, Grounds and Real Property Management of the Department of Finance and Administration, when funds are made available for such purpose by any agency of the federal government or other sources. The object and purpose of the establishment of the Mississippi State Veterans Home shall be to provide domiciliary care and other related services for eligible veterans of the State of Mississippi.
of the Department of Finance and Administration, when funds are made available for such purpose by any agency of the federal government or other sources. The Veterans Affairs Board shall give the three (3) regions, northern, southern and central priority as to where the veterans home shall be located, with the northern region having first priority, the southern region having the next level priority and the central region being third in order of priority. The object and purpose of the establishment of such additional homes or domiciliaries shall be to provide domiciliary care and other related services for eligible veterans of the State of Mississippi. * * *

SECTION 3. Section 41-9-11, Mississippi Code of 1972, is amended as follows:

41-9-11. Upon receipt of an application for license and the license fee, the licensing agency shall issue a license if the applicant and hospital facilities meet the requirements established under Sections 41-9-1 through 41-9-35 * * *. A license, unless suspended or revoked, shall be renewable annually, upon filing by the licensee, and approval by the licensing agency of an annual report upon such uniform dates and containing such information in such form as the licensing agency prescribes by regulation and upon paying the annual fee for such license as determined by the schedule and provisions of Section 41-9-9. Each license shall be issued only for the premises and persons or governmental units named in the application and shall not be transferable or assignable except with the written approval of the licensing agency. Licenses shall be posted in a conspicuous place on the licensed premises.

SECTION 4. Section 41-9-23, Mississippi Code of 1972, is amended as follows:

41-9-23. Information received by the licensing agency through filed reports, inspection, or as otherwise authorized under Sections 41-9-1 through 41-9-35 shall not be disclosed
publicly in such manner as to identify individuals, except in a proceeding involving the questions of licensure; however, the licensing agency may utilize statistical data concerning types of services and the utilization of these services for hospitals in performing the statutory duties imposed upon it * * * by Section 41-9-29.

SECTION 5. Section 41-9-209, Mississippi Code of 1972, is amended as follows:

41-9-209. (1) Any hospital is authorized to seek designation as a critical access hospital. There shall be no requirement or limitation regarding the distance that a critical access hospital must be located from another hospital. The bed-size limit for a critical access hospital is fifteen (15) operational beds, and the maximum length of stay for a patient in a critical access hospital is ninety-six (96) hours, unless a longer period is required because of inclement weather or other emergency conditions, or a peer review organization or other equivalent entity, or request, waives the ninety-six-hour restriction. An exception to the bed-size requirement is made for swing-bed facilities, which may have up to twenty-five (25) inpatient beds, provided that not more than fifteen (15) beds are used at any one (1) time for acute care.

(2) A critical access hospital (a) must make available twenty-four-hour emergency care services, as described in the state rural health care plan, for ensuring access to emergency care services in the rural area served by the critical access hospital, and (b) must be a member of a rural health network. Any hospital that has a distinct-part skilled nursing facility, certified under Title XVIII of the federal Social Security Act, at the time it applies for designation as critical access hospital, is not required to count the beds in the distinct-part skilled nursing facility for purposes of the allowed fifteen (15) acute care inpatient beds * * *
(3) The distinct-part skilled nursing facility beds of such hospital applying for designation as a critical access hospital shall be deemed licensed under state law as distinct-part skilled nursing facility beds, which licensure designation will remain in effect as long as (a) such hospital is applying for or is designated and functions as a critical access hospital and (b) such beds are certified as distinct-part skilled nursing facility beds under Title XVIII of the federal Social Security Act.

(4) The distinct-part geriatric psychiatric unit beds of a hospital applying for designation as a critical access hospital shall be deemed licensed under state law as psychiatric beds, which licensure designation will remain in effect as long as (a) such hospital is applying for or is designated and functions as a critical access hospital and (b) such beds are certified as distinct-part geriatric psychiatric unit beds under Title XVIII of the federal Social Security Act.

SECTION 6. Section 41-71-7, Mississippi Code of 1972, is amended as follows:

41-71-7. Upon receipt of an application for a license and the license fee, and a determination by the licensing agency that the application is in compliance with the provisions of this chapter, such license shall be issued. A license, unless suspended or revoked, shall be renewable annually upon payment by the licensee of a renewal fee of One Thousand Dollars ($1,000.00) and approval by the licensing agency of an annual report, required to be submitted by the licensee, containing such information in such form and at such time as the licensing agency prescribes by rule or regulation. Each license shall be issued only for the home health agency and person or persons or other legal entity or entities named in the application and shall not be transferable or assignable except with the written approval of the licensing agency. Licenses shall be posted in a conspicuous place in the designated business office of the licensee. Each licensee shall
designate, in writing, one (1) individual person as the
responsible party for the conducting of the business of the home
health agency with the licensing agency.

SECTION 7. Section 41-71-19, Mississippi Code of 1972, is
amended as follows:

41-71-19. Information received by the licensing agency
through filed reports, inspection, or as otherwise authorized
under this chapter, shall not be disclosed publicly in such manner
as to identify individuals, except in proceedings involving the
question of licensure; however, the licensing agency may utilize
statistical data concerning types of services and the utilization
of those services for home health care agencies in performing the
*** duties imposed upon it by *** regulations necessarily
promulgated for participation in the Medicare or Medicaid
programs.

SECTION 8. Section 41-73-5, Mississippi Code of 1972, is
amended as follows:

41-73-5. When used in this act, unless the context requires
a different definition, the following terms shall have the
following meanings:

(a) "Act" means the Mississippi Hospital Equipment and
Facilities Authority Act.

(b) "Authority" means the Mississippi Hospital
Equipment and Facilities Authority created by this act and any
successor to its functions.

(c) "Bonds" means bonds, notes or other evidences of
indebtedness of the authority issued pursuant to this act,
including refunding bonds.

(d) "Cost" as applied to hospital equipment means any
and all costs of such hospital equipment and, without limiting the
generality of the foregoing, shall include the following:
(i) All costs of the acquisition, repair, restoration, reconditioning, refinancing or installation of any such hospital equipment and all costs incident or related thereto;

(ii) The cost of any property interest in such hospital equipment including an option to purchase or leasehold interest;

(iii) The cost of architectural, engineering, legal and related services; the cost of the preparation of plans, specifications, studies, surveys and estimates of cost and of revenue; and all other expenses necessary or incident to planning, providing or determining the need for or the feasibility and practicability of such hospital equipment; and the cost of providing or establishing a reasonable reserve fund for the payment of principal and interest on bonds;

(iv) The cost of financing charges, including premiums or prepayment penalties, if any, and interest accrued prior to the acquisition and installation or refinancing of such hospital equipment and after such acquisition and installation or refinancing and start-up costs related to hospital equipment;

(v) Any and all costs paid or incurred in connection with the financing of such hospital equipment, including out-of-pocket expenses, the cost of financing, legal, accounting, financial advisory and consulting fees, expenses and disbursements; the cost of any policy of insurance; the cost of printing, engraving and reproduction services; and the cost of the initial or acceptance fee of any trustee or paying agent;

(vi) All direct or indirect costs of the authority incurred in connection with providing such hospital equipment, including, without limitation, reasonable sums to reimburse the authority for time spent by its agents or employees with respect to providing such hospital equipment and the financing thereof; and
(vii) Any and all costs paid or incurred for the administration of any program for the purchase or lease of or the making of loans for hospital equipment, by the authority and any program for the sale or lease of or the making of loans for such hospital equipment to any participating hospital institution.

(e) "Cost" as applied to hospital facilities, means any and all costs of such hospital facilities and, without limiting the generality of the foregoing, shall include the following:

(i) All costs of the establishment, demolition, site development of new and rehabilitated buildings, rehabilitation, reconstruction repair, erection, building, construction, remodeling, adding to and furnishing of any such hospital facilities and all costs incident or related thereto;

(ii) The cost of acquiring any property interest in such hospital facilities including the purchase thereof, the cost of an option to purchase or the cost of any leasehold interest;

(iii) The cost of architectural, engineering, legal and related services; the cost of the preparation of plans, specifications, studies, surveys and estimates of cost and of revenue; all other expenses necessary or incident to planning, providing or determining the need for or the feasibility and practicability of such hospital facilities or the acquisition thereof; and the cost of providing or establishing a reasonable reserve fund for the payment of principal of and interest on bonds;

(iv) The cost of financing charges, including premiums or prepayment penalties, if any, and interest accrued prior to the acquisition and completion or refinancing of such hospital facilities and after such acquisition and completion or refinancing and start-up costs related to hospital facilities;

(v) Any and all costs paid or incurred in connection with the financing of such hospital facilities,
including out-of-pocket expenses, the cost of financing, legal, accounting, financial advisory and consulting fees, expenses and disbursement; the cost of any policy of insurance; the cost of printing, engraving and reproduction services; and the cost of the initial or acceptance fee of any trustee or paying agent;

(vi) All direct or indirect costs of the authority incurred in connection with providing such hospital facilities, including, without limitation, reasonable sums to reimburse the authority for time spent by its agents or employees with respect to providing such hospital facilities and the financing thereof;

(vii) Any and all costs paid or incurred for the administration of any program for the purchase or lease of or the making of loans for hospital facilities, by the authority and any program for the sale or lease of or the making of loans for such hospital facilities to any participating hospital institution; and

(viii) The cost of providing for the payment or the making provision for the payment of, by the appropriate escrowing of moneys or securities, the principal of and interest on which when due will be adequate to make such payment, any indebtedness encumbering the revenues or property of a participating hospital institution, whether such payment is to be effected by redemption of such indebtedness prior to maturity or not.

(f) "Hospital equipment" means any personal property which is found and determined by the authority to be required or necessary or helpful for medical care, research, training or teaching, any one (1) or all, in hospital facilities located in the state, irrespective of whether such property is in existence at the time of, or is to be provided after the making of, such finding. • • •

(g) "Hospital facility" or "hospital facilities" means buildings and structures of any and all types used or useful, in the discretion of the authority, for providing any types of care
to the sick, wounded, infirmed, needy, mentally incompetent or elderly and shall include, without limiting the generality of the foregoing, out-patient clinics, laboratories, laundries, nurses', doctors' or interns' residences, administration buildings, office buildings, facilities for research directly involved with hospital care, maintenance, storage or utility facilities, parking lots, and garages and all necessary, useful, or related furnishings, and appurtenances and all lands necessary or convenient as a site for the foregoing.

(h) "Participating hospital institution" or "hospital institution" means a public or private corporation, association, foundation, trust, cooperative, agency, body politic, or other person or organization which provides or operates or proposes to provide or operate hospital facilities not for profit, and which, pursuant to the provisions of this act, contracts with the authority for the financing or refinancing of the lease or other acquisition of hospital equipment or hospital facilities, or both.

(i) "State" means the State of Mississippi.

The use of singular terms herein shall also include the plural of such term and the use of a plural term herein shall also include the singular of such term unless the context clearly requires a different connotation.

SECTION 9. Section 41-75-1, Mississippi Code of 1972, is amended as follows:

41-75-1. (a) "Ambulatory surgical facility" shall mean a publicly or privately owned institution which is primarily organized, constructed, renovated or otherwise established for the purpose of providing elective surgical treatment of "outpatients" whose recovery, under normal and routine circumstances, will not require "inpatient" care. Such facility as herein defined does not include the offices of private physicians or dentists whether practicing individually or in groups, but does include organizations or facilities primarily engaged in such outpatient
surgery whether using the name "ambulatory surgical facility" or a similar or different name. Such organization or facility, if in any manner considered to be operated or owned by a hospital or a hospital holding, leasing or management company, either for profit or not for profit, is required to comply with all licensing agency ambulatory surgical licensure standards governing a "hospital affiliated" facility as adopted under Section 41-9-1 et seq., Mississippi Code of 1972; provided that such organization or facility does not intend to seek federal certification as an ambulatory surgical facility as provided for at 42 CFR, Parts 405 and 416. Further, if such organization or facility is to be operated or owned by a hospital or a hospital holding, leasing or management company and intends to seek federal certification as an ambulatory facility, then such facility is considered to be "freestanding" and must comply with all licensing agency ambulatory surgical licensure standards governing a "freestanding" facility.

If such organization or facility is to be owned or operated by an entity or person other than a hospital or hospital holding, leasing or management company, then such organization or facility must comply with all licensing agency ambulatory surgical facility standards governing a "freestanding" facility.

(b) "Hospital affiliated" ambulatory surgical facility shall mean a separate and distinct organized unit of a hospital or a building owned, leased, rented or utilized by a hospital and located in the same county in which the hospital is located, for the primary purpose of performing ambulatory surgery procedures. Such facility is not required to be separately licensed under this statute and may operate under the hospital's license in compliance with all applicable requirements of Section 41-9-1 et seq.

(c) "Freestanding" ambulatory surgical facility shall mean a separate and distinct facility or a separate and distinct organized unit of a hospital owned, leased, rented or utilized by
a hospital or other persons for the primary purpose of performing
ambulatory surgery procedures. Such facility must be separately
licensed as herein defined and must comply with all licensing
standards promulgated by the licensing agency under this statute
regarding a "freestanding" ambulatory surgical facility. Further,
such facility must be a separate, identifiable entity and must be
physically, administratively and financially independent and
distinct from other operations of any other health facility, and
shall maintain a separate organized medical and administrative
staff. • • •

(d) "Ambulatory surgery" shall mean surgical procedures that
are more complex than office procedures performed under local
anesthesia, but less complex than major procedures requiring
prolonged postoperative monitoring and hospital care to ensure
safe recovery and desirable results. General anesthesia is used
in most cases. The patient must arrive at the facility and expect
to be discharged on the same day. Ambulatory surgery shall only
be performed by physicians or dentists licensed to practice in the
State of Mississippi.

(e) "Abortion" means the use or prescription of any
instrument, medicine, drug or any other substances or device to
terminate the pregnancy of a woman known to be pregnant with an
intention other than to increase the probability of a live birth,
to preserve the life or health of the child after live birth or to
remove a dead fetus. Abortion procedures on a fetus aged sixteen
(16) weeks or more shall only be performed at an ambulatory
surgical facility or hospital licensed to perform such service.

(f) "Abortion facility" means a facility operating
substantially for the purpose of performing abortions and is a
separate identifiable legal entity from any other health care
facility. Abortions shall only be performed by physicians
licensed to practice in the State of Mississippi. The term
"abortion facility" includes physicians' offices which are used
substantially for the purpose of performing abortions. An abortion facility operates substantially for the purpose of performing abortions if any of the following conditions are met:

(i) The abortion facility is a provider for performing ten (10) or more abortion procedures per calendar month during any month of a calendar year, or one hundred (100) or more in a calendar year.

(ii) The abortion facility, if operating less than twenty (20) days per calendar month, is a provider for performing ten (10) or more abortion procedures, or performing a number of abortion procedures which would be equivalent to ten (10) procedures per month, if the facility were operating twenty (20) or more days per calendar month, in any month of a calendar year.

(iii) The abortion facility holds itself out to the public as an abortion provider by advertising by any public means, such as newspaper, telephone directory, magazine or electronic media, that it performs abortions.

(iv) The facility applies to the licensing agency for licensure as an abortion facility.

(g) "Licensing agency" shall mean the State Department of Health.

(h) "Operating" an abortion facility means that the facility is open for any period of time during a day and has on site at the facility or on call a physician licensed to practice in the State of Mississippi available to provide abortions.

Any abortion facility that begins operation after June 30, 1996, shall not be located within fifteen hundred (1500) feet from the property on which any church, school or kindergarten is located. An abortion facility shall not be in violation of this paragraph if it is in compliance with this paragraph on the date it begins operation and the property on which a church, school or kindergarten is located is subsequently within fifteen hundred (1500) feet from the facility.
SECTION 10. Section 41-75-5, Mississippi Code of 1972, is amended as follows:

41-75-5. No person acting severally or jointly with any other person, shall establish, conduct, operate or maintain an ambulatory surgical facility or an abortion facility in this state without a license under this chapter.

SECTION 11. Section 41-75-9, Mississippi Code of 1972, is amended as follows:

41-75-9. Upon receipt of an application for license and the license fee, the licensing agency shall issue a license if the applicant and the institutional facilities meet the requirements established under this chapter. A license, unless suspended or revoked, shall be renewable annually upon payment of a renewal fee of Three Thousand Dollars ($3,000.00), which shall be paid to the licensing agency, and upon filing by the licensee and approval by the licensing agency of an annual report upon such uniform dates and containing such information in such form as the licensing agency requires. Each license shall be issued only for the premises and person or persons named in the application and shall not be transferable or assignable. Licenses shall be posted in a conspicuous place on the licensed premises.

SECTION 12. Section 41-75-25, Mississippi Code of 1972, is amended as follows:

41-75-25. Any person or persons or other entity or entities establishing, managing or operating an ambulatory surgical facility or conducting the business of an ambulatory surgical facility without the required license, or which otherwise violate any of the provisions of this chapter or the rules, regulations or standards promulgated in furtherance of any law in which the licensing agency has authority therefor, shall be subject to the following penalties and sanctions:

(a) Revocation of the license of the ambulatory surgical facility or a designated section, component or service thereof; or
(b) Nonlicensure of a specific or designated service offered by the ambulatory surgical facility.

In addition, any violation of any provision of this chapter or any rules or regulations promulgated in furtherance thereof by intent, fraud, deceit, unlawful design, willful and/or deliberate misrepresentation, or by careless, negligent or incautious disregard for such statutes or rules and regulations, either by persons acting individually or in concert with others, shall constitute a misdemeanor and shall be punishable by a fine not to exceed One Thousand Dollars ($1,000.00) for each such offense. Each day of continuing violation shall be considered a separate offense. The venue for prosecution of any such violation shall be in any county of the state in which any such violation, or portion thereof, occurred.

SECTION 13. Section 41-77-1, Mississippi Code of 1972, is amended as follows:

41-77-1. For purposes of this chapter:

(a) "Birthing center" shall mean a publicly or privately owned facility, place or institution constructed, renovated, leased or otherwise established where nonemergency births are planned to occur away from the mother's usual residence following a documented period of prenatal care for a normal uncomplicated pregnancy which has been determined to be low risk through a formal risk scoring examination. Care provided in a birthing center shall be provided by a licensed physician, or certified nurse midwife, and a registered nurse. Services provided in a birthing center shall be limited in the following manner: (i) surgical services shall be limited to those normally performed during uncomplicated childbirth, such as episiotomy and repair, and shall not include operative obstetrics or caesarean sections; (ii) labor shall not be inhibited, stimulated or augmented with chemical agents during the first or second stage of labor; (iii) systemic analgesia may be administered and local
anesthesia for pudendal block and episiotomy repair may be performed. General and conductive anesthesia shall not be administered at birthing centers; (iv) patients shall not remain in the facility in excess of twenty-four (24) hours.

Hospitals are excluded from the definition of a "birthing center" unless they choose to and are qualified to designate a portion or part of the hospital as a birthing center, and nothing herein shall be construed as referring to the usual service provided the pregnant female in the obstetric-gynecology service of an acute care hospital. Such facility or center, as heretofore stated, shall include the offices of physicians in private practice alone or in groups of two (2) or more; and such facility or center rendering service to pregnant female persons, as stated heretofore and by the rules and regulations promulgated by the licensing agency in furtherance thereof, shall be deemed to be a "birthing center" whether using a similar or different name. Such center or facility if in any manner is deemed to be or considered to be operated or owned by a hospital or a hospital holding leasing or management company, for profit or not for profit, is required to comply with all birthing center standards governing a "hospital affiliated" birthing center as adopted by the licensing authority.

(b) "Hospital affiliated" birthing center shall mean a separate and distinct unit of a hospital or a building owned, leased, rented or utilized by a hospital and located in the same county as the hospital for the purpose of providing the service of a "birthing center." Such center or facility is not required to be licensed separately, and may operate under the license issued to the hospital if it is in compliance with Section 41-9-1 et seq., where applicable, and the rules and regulations promulgated by the licensing agency in furtherance thereof.

(c) "Freestanding" birthing center shall mean a separate and distinct facility or center or a separate and...
distinct organized unit of a hospital or other person
for the purpose of performing the service of a "birthing center."

Such facility or center must be separately licensed and must comply with all licensing standards promulgated by the licensing agency by virtue of this chapter. Further, such facility or center must be a separate, identifiable entity and must be physically, administratively and financially independent from other operations of any hospital or other health care facility or service and shall maintain a separate and required staff, including administrative staff.

(d) "Licensing agency" shall mean the State Department of Health.

SECTION 14. Section 41-77-5, Mississippi Code of 1972, is amended as follows:

41-77-5. No person, acting severally or jointly with any other person, shall establish, conduct or maintain a "birthing center" in this state without a license under this chapter.

SECTION 15. Section 41-77-21, Mississippi Code of 1972, is amended as follows:

41-77-21. Any applicant or licensee aggrieved by the decision of the licensing agency after a hearing may, within thirty (30) days after the mailing or serving of notice of the decision as provided in Section 43-11-11, file a notice of appeal to the Chancery Court of the First Judicial District of Hinds County or in the chancery court of the county in which the institution is located or proposed to be located. Thereupon, the licensing agency shall certify and file with the court a copy of the record and decision, including the transcript of the hearings in which the decision is based. No new or additional evidence shall be introduced in court; the case shall be determined upon the record certified to the court. The court may sustain or dismiss the appeal, modify or vacate the order complained of in whole or in part, as the case may be; but in case
the order is wholly or partly vacated, the court may also, in its
discretion, remand the matter to the licensing agency for such
further proceedings, not inconsistent with the court's order, as,
in the opinion of the court, justice may require. The order may
not be vacated or set aside, either in whole or in part, except
for errors of law, unless the court finds that the order of the
licensing agency is not supported by substantial evidence, is
contrary to the manifest weight of the evidence, is in excess of
the statutory authority or jurisdiction of the licensing agency,
or violates any vested constitutional rights of any party involved
in the appeal. Pending final disposition of the matter, the
status quo of the applicant or licensee shall be preserved, except
as the court otherwise orders in the public interest. Rules with
respect to court costs in other cases in chancery shall apply
equally to cases hereunder. Appeals in accordance with law may be
had to the Supreme Court of the State of Mississippi from any
final judgment of the chancery court.

SECTION 16. Section 41-77-23, Mississippi Code of 1972, is
amended as follows:

41-77-23. Any person or persons or other entity or entities
establishing, managing or operating a "birthing center" or
conducting the business of a "birthing center" without the
required license, or which otherwise violate any of the provisions
of this chapter or the rules, regulations or standards
promulgated in furtherance of any law in which the licensing
agency has authority therefor, shall be subject to the following
penalties and sanctions:

(a) Revocation of the license of the birthing center or
a designated section, component or service thereof; or

(b) Nonlicensure of a specific or designated service
offered by the birthing center.

In addition, any violation of any provision of this chapter
or any rules or regulations promulgated in furtherance thereof by
intent, fraud, deceit, unlawful design, willful and/or deliberate
misrepresentation, or by careless, negligent or incautious
disregard for such statutes or rules and regulations, either by
persons acting individually or in concert with others, shall
constitute a misdemeanor and shall be punishable by a fine not to
exceed One Thousand Dollars ($1,000.00) for each such offense.
Each day of continuing violation shall be considered a separate
offense. The venue for prosecution of any such violation shall be
in any county of the state in which any such violation, or portion
thereof, occurred.

SECTION 17. Section 41-77-25, Mississippi Code of 1972, is
amended as follows:

41-77-25. Upon receipt of an application for license and the
license fee, the licensing agency shall issue a license if the
applicant and the institutional facilities meet the requirements
established under this chapter. A license, unless suspended
or revoked, shall be renewable annually upon payment of a renewal
fee of Three Hundred Dollars ($300.00), which shall be paid to the
licensing agency, and upon filing by the licensee and approval by
the licensing agency of an annual report upon such uniform dates
and containing such information in such form as the licensing
agency requires. Each license shall be issued only for the
premises and person or persons named in the application and shall
not be transferable or assignable. Licenses shall be posted in a
conspicuous place on the licensed premises.

SECTION 18. Section 41-95-3, Mississippi Code of 1972, is
amended as follows:

41-95-3. As used in this chapter:

(a) "Authority" means the Mississippi Health Finance
Authority created under Section 41-95-5.

(b) "Board" means the Mississippi Health Finance
Authority Board created under Section 41-95-5.
(c) "Health care facility" means all facilities and institutions, whether public or private, proprietary or nonprofit, which offer diagnosis, treatment, inpatient or ambulatory care to two (2) or more unrelated persons.

(d) "Health care provider" means a person, partnership or corporation, other than a facility or institution, licensed or certified or authorized by state or federal law to provide professional health care service in this state to an individual during that individual's health care, treatment or confinement.

(e) "Health insurer" means any health insurance company, nonprofit hospital and medical service corporation, health maintenance organization and, to the extent permitted under federal law, any administrator of an insured, self-insured or publicly funded health care benefit plan offered by public and private entities.

(f) "Resident" means a person who is domiciled in Mississippi as evidenced by an intent to maintain a principal dwelling place in Mississippi indefinitely and to return to Mississippi if temporarily absent, coupled with an act or acts consistent with that intent.

(g) "Primary care" or "primary health care" includes those health care services provided to individuals, families and communities, at a first level of care, which preserve and improve health, and encompasses services which promote health, prevent disease, treat and cure illness. It is delivered by various health care providers in a variety of settings including hospital outpatient clinics, private provider offices, group practices, health maintenance organizations, public health departments and community health centers. A primary care system is characterized by coordination of comprehensive services, cultural sensitivity, community orientation, continuity, prevention, the absence of barriers to receive and provide services, and quality assurance.
SECTION 19. Section 43-11-9, Mississippi Code of 1972, is amended as follows:

43-11-9. (1) Upon receipt of an application for license and the license fee, the licensing agency shall issue a license if the applicant and the institutional facilities meet the requirements established under this chapter. A license, unless suspended or revoked, shall be renewable annually upon payment by (a) the licensee of an institution for the aged or infirm, except for personal care homes, of a renewal fee of Twenty Dollars ($20.00) for each bed in the institution, with a minimum fee per institution of Two Hundred Dollars ($200.00), or (b) the licensee of a personal care home of a renewal fee of Fifteen Dollars ($15.00) for each bed in the institution, with a minimum fee per institution of One Hundred Dollars ($100.00), which shall be paid to the licensing agency, and upon filing by the licensee and approval by the licensing agency of an annual report upon such uniform dates and containing such information in such form as the licensing agency prescribes by regulation. Each license shall be issued only for the premises and person or persons or other legal entity or entities named in the application and shall not be transferable or assignable except with the written approval of the licensing agency. Licenses shall be posted in a conspicuous place on the licensed premises.

(2) A fee known as a "User Fee" shall be applicable and shall be paid to the licensing agency as set out in subsection (1) hereof. This user fee shall be assessed for the purpose of the required reviewing and inspections of the proposal of any institution in which there are additions, renovations, modernizations, expansion, alterations, conversions, modifications or replacement of the entire facility involved in such proposal. This fee includes the reviewing of architectural plans in all steps required. There shall be a minimum user fee of Fifty
Dollars ($50.00) and a maximum user fee of Five Thousand Dollars ($5,000.00).

(3) No governmental entity or agency shall be required to pay the fee or fees set forth in this section.

SECTION 20. Section 43-11-19, Mississippi Code of 1972, is amended as follows:

43-11-19. Information received by the licensing agency through filed reports, inspection, or as otherwise authorized under this chapter, shall not be disclosed publicly in such manner as to identify individuals, except in a proceeding involving the questions of licensure; however, the licensing agency may utilize statistical data concerning types of services and the utilization of those services for institutions for the aged or infirm in performing the statutory duties imposed upon it by section 43-11-21.

SECTION 21. This act shall take effect and be in force from and after July 1, 2001.