By: Representative Bain

To: Public Health and Human Services

HOUSE BILL NO. 1296

AN ACT TO AMEND SECTION 41-13-35, MISSISSIPPI CODE OF 1972, TO EXPAND THE POWERS AND AUTHORITY OF THE BOARDS OF TRUSTEES OF COMMUNITY HOSPITALS; TO PROVIDE FOR STATE ACTION IMMUNITY FROM STATE AND FEDERAL ANTITRUST LAWS FOR COMMUNITY HOSPITALS; TO AMEND 5 SECTION 41-13-29, MISSISSIPPI CODE OF 1972, TO INCREASE THE 6 MAXIMUM AMOUNT THAT A BOARD OF TRUSTEES OF A COMMUNITY HOSPITAL 7 MAY COMPENSATE EACH TRUSTEE FOR ATTENDING MEETINGS OF THE BOARD OF TRUSTEES; TO BRING FORWARD SECTION 41-13-15, MISSISSIPPI CODE OF 8 9 1972, WHICH PRESCRIBES THE PROCEDURES FOR THE LEASE OR SALE OF A 10 COMMUNITY HOSPITAL, FOR THE PURPOSE OF POSSIBLE AMENDMENT; TO AMEND SECTION 37-115-50, MISSISSIPPI CODE OF 1972, TO DEFINE 11 12 "HEALTH CARE COLLABORATIVE" FOR THE PURPOSE OF JOINT AGREEMENTS OF 13 THE UNIVERSITY OF MISSISSIPPI MEDICAL CENTER; TO CREATE NEW SECTION 37-115-50.2, MISSISSIPPI CODE OF 1972, TO MAKE CERTAIN 14 15 LEGISLATIVE FINDINGS ABOUT THE OPERATIONS OF THE MEDICAL CENTER 16 AND TO PROVIDE FOR STATE ACTION IMMUNITY FROM STATE AND FEDERAL 17 ANTITRUST LAWS FOR THE MEDICAL CENTER AND HEALTH CARE 18 COLLABORATIVES ORGANIZED BY THE MEDICAL CENTER; TO CREATE NEW 19 SECTION 37-115-50.3, MISSISSIPPI CODE OF 1972, TO EXPAND THE POWERS AND AUTHORITY OF THE MEDICAL CENTER AND ITS HEALTH CARE 20 21 COLLABORATIVES; AND FOR RELATED PURPOSES. 22 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI: 23 **SECTION 1.** Section 41-13-35, Mississippi Code of 1972, is 24 amended as follows: 25 41-13-35. (1) The board of trustees of any community 26 hospital shall have full authority to appoint an administrator,

who shall not be a member of the board of trustees, and to

- 28 delegate reasonable authority to such administrator for the
- 29 operation and maintenance of such hospital and all property and
- 30 facilities otherwise appertaining thereto.
- 31 (2) The board of trustees shall have full authority to
- 32 select from its members, officers and committees and, by
- 33 resolution or through the board bylaws, to delegate to such
- 34 officers and committees reasonable authority to carry out and
- 35 enforce the powers and duties of the board of trustees during the
- 36 interim periods between regular meetings of the board of trustees;
- 37 provided, however, that any such action taken by an officer or
- 38 committee shall be subject to review by the board, and actions may
- 39 be withdrawn or nullified at the next subsequent meeting of the
- 40 board of trustees if the action is in excess of delegated
- 41 authority.
- 42 (3) The board of trustees shall be responsible for governing
- 43 the community hospital under its control and shall make and
- 44 enforce staff and hospital bylaws and/or rules and regulations
- 45 necessary for the administration, government, maintenance and/or
- 46 expansion of such hospitals. The board of trustees shall keep
- 47 minutes of its official business and shall comply with Section
- 48 41-9-68.
- 49 (4) The decisions of said board of trustees of the community
- 50 hospital shall be valid and binding unless expressly prohibited by
- 51 applicable statutory or constitutional provisions.

| 52 (| (5) |) The | power | of | the | board | of | trustees | shall | specifically | 7 |
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- 53 include, but not be limited to, the following authority:
- 54 (a) To deposit and invest funds of the community
- 55 hospital in accordance with Section 27-105-365;
- 56 (b) To establish such equitable wage and salary
- 57 programs and other employment benefits as may be deemed expedient
- 58 or proper, and in so doing, to expend reasonable funds for such
- 59 employee salary and benefits. Allowable employee programs shall
- 60 specifically include, but not be limited to, medical benefit,
- 61 life, accidental death and dismemberment, disability, retirement
- 62 and other employee coverage plans. The hospital may offer and
- 63 fund such programs directly or by contract with any third party
- 64 and shall be authorized to take all actions necessary to
- 65 implement, administer and operate such plans, including payroll
- 66 deductions for such plans;
- 67 (c) To authorize employees to attend and to pay actual
- 68 expenses incurred by employees while engaged in hospital business
- 69 or in attending recognized educational or professional meetings;
- 70 (d) To enter into loan or scholarship agreements with
- 71 employees or students to provide educational assistance where such
- 72 student or employee agrees to work for a stipulated period of time
- 73 for the hospital;
- 74 (e) To devise and implement employee incentive
- 75 programs;

| 76 | (f) To recruit and financially assist physicians and |
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| 77 | other health care practitioners in establishing, or relocating |
| 78 | practices within the service area of the community hospital |
| 79 | including, without limitation, direct and indirect financial |
| 80 | assistance, loan agreements, agreements guaranteeing minimum |
| 81 | incomes for a stipulated period from opening of the practice and |
| 82 | providing free office space or reduced rental rates for office |
| 83 | space where such recruitment would directly benefit the community |
| 84 | hospital and/or the health and welfare of the citizens of the |
| 85 | service area; |

- otherwise, with any agency, department or other office of government or any individual, partnership, corporation, owner, other board of trustees, or other health care facility, for the providing of property, equipment or services by or to the community hospital or other entity or regarding any facet of the construction, management, funding or operation of the community hospital or any division or department thereof, or any related activity, including, without limitation, shared management expertise or employee insurance and retirement programs, and to terminate said contracts when deemed in the best interests of the community hospital;
- 98 (h) To file suit on behalf of the community hospital to 99 enforce any right or claims accruing to the hospital and to defend

| 100 | and/or | settle | claims | against | the | community | hospital | and/or | its |
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| 101 | board o | of trust | cees; | | | | | | |

- (i) To sell or otherwise dispose of any chattel

 property of the community hospital by any method deemed

 appropriate by the board where such disposition is consistent with

 the hospital purposes or where such property is deemed by the

 board to be surplus or otherwise unneeded;
 - (j) To let contracts for the construction, remodeling, expansion or acquisition, by lease or purchase, of hospital or health care facilities, including real property, within the service area for community hospital purposes where such may be done with operational funds without encumbrancing the general funds of the county or municipality, provided that any contract for the purchase of real property must be ratified by the owner;
 - (k) To borrow money and enter other financing arrangements for community hospital and related purposes and to grant security interests in hospital equipment and other hospital assets and to pledge a percentage of hospital revenues as security for such financings where needed; provided that the owner shall specify by resolution the maximum borrowing authority and maximum percent of revenue which may be pledged by the board of trustees during any given fiscal year;
- 122 (1) To expend hospital funds for public relations or 123 advertising programs;

| 125 | services, after complying with applicable health planning, |
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| 126 | licensure statutes and regulations, whether or not heretofore |
| 127 | offered by such hospital or other similar hospitals in this state |
| 128 | and whether or not heretofore authorized to be offered, long-term |
| 129 | care, extended care, home care, after-hours clinic services, |
| 130 | ambulatory surgical clinic services, preventative health care |
| 131 | services including wellness services, health education, |
| 132 | rehabilitation and diagnostic and treatment services; to promote, |
| 133 | develop, operate and maintain a center providing care or |
| 134 | residential facilities for the aged, convalescent or handicapped; |
| 135 | and to promote, develop and institute any other services having an |
| 136 | appropriate place in the operation of a hospital offering complete |
| 137 | community health care; |
| 138 | (n) To promote, develop, acquire, operate and maintain |
| 139 | on a nonprofit basis, or on a profit basis if the community |
| 140 | hospital's share of profits is used solely for community hospital |
| 141 | and related purposes in accordance with this chapter, either |
| 142 | separately or jointly with one or more other hospitals or |
| 143 | health-related organizations, facilities and equipment for |
| 144 | providing goods, services and programs for hospitals, other health |
| 145 | care providers, and other persons or entities in need of such |
| 146 | goods, services and programs and, in doing so, to provide for |
| 147 | contracts of employment or contracts for services and ownership of |
| 148 | property on terms that will protect the public interest; |

(m) To offer the following inpatient and outpatient

| 149 | (o) To establish and operate medical offices, child |
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| 150 | care centers, wellness or fitness centers and other facilities and |
| 151 | programs which the board determines are appropriate in the |
| 152 | operation of a community hospital for the benefit of its |
| 153 | employees, personnel and/or medical staff which shall be operated |
| 154 | as an integral part of the hospital and which may, in the |
| 155 | direction of the board of trustees, be offered to the general |
| 156 | public. If such programs are not established in existing |
| 157 | facilities or constructed on real estate previously acquired by |
| 158 | the owners, the board of trustees shall also have authority to |
| 159 | acquire, by lease or purchase, such facilities and real property |
| 160 | within the service area, whether or not adjacent to existing |
| 161 | facilities, provided that any contract for the purchase of real |
| 162 | property shall be ratified by the owner. The trustees shall lease |
| 163 | any such medical offices to members of the medical staff at rates |
| 164 | deemed appropriate and may, in its discretion, establish rates to |
| 165 | be paid for the use of other facilities or programs by its |
| 166 | employees or personnel or members of the public whom the trustees |
| 167 | may determine may properly use such other facilities or programs; |
| 168 | (p) Provide, at its discretion, ambulance service |

- 168 (p) Provide, at its discretion, ambulance service
 169 and/or to contract with any third party, public or private, for
 170 the providing of such service;
- (q) Establish a fair and equitable system for the billing of patients for care or users of services received through the community hospital, which in the exercise of the board of

| 174 | trustees' prudent fiscal discretion, may allow for rates to be |
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| 175 | classified according to the potential usage by an identified group |
| 176 | or groups of patients of the community hospital's services and may |
| 177 | allow for standard discounts where the discount is designed to |
| 178 | reduce the operating costs or increase the revenues of the |
| 179 | community hospital. Such billing system may also allow for the |
| 180 | payment of charges by means of a credit card or similar device and |
| 181 | allow for payment of administrative fees as may be regularly |
| 182 | imposed by a banking institution or other credit service |
| 183 | organization for the use of such cards; |

- (r)To establish as an organizational part of the hospital or to aid in establishing as a separate entity from the hospital, hospital auxiliaries designed to aid the hospital, its patients, and/or families and visitors of patients, and when the auxiliary is established as a separate entity from the hospital, the board of trustees may cooperate with the auxiliary in its operations as the board of trustees deems appropriate; * * *
- To make any agreements or contracts with the (s) federal government or any agency thereof, the State of Mississippi or any agency thereof, and any county, city, town, supervisors district or election district within this state, jointly or separately, for the maintenance of charity facilities * * *;
- 196 (t) To acquire hospitals, health care facilities and other health care-related operations and assets, through direct 197 198 purchase, merger, consolidation, lease or other means;

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| 199 | (u) To enter into joint ventures, joint operating |
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| 200 | agreements, or similar arrangements with other public or private |
| 201 | health care related organizations, or with for-profit or nonprofit |
| 202 | corporations, limited liability companies, or other organizations, |
| 203 | either directly or through a nonprofit corporation formed or owned |
| 204 | by the community hospital, for the joint operation of all or part |
| 205 | of the community hospital, or the joint operation of any health |
| 206 | care facilities or health care services, and in doing so, to |
| 207 | convey the community hospital's assets, service lines, or |
| 208 | facilities to the joint venture or to any other organization or |
| 209 | entity for fair market value, and to provide for contracts of |
| 210 | employment or contracts for services and ownership of property |
| 211 | that will protect the public interest; |
| 212 | (v) To form, establish, fund and operate nonprofit |
| 213 | corporations, limited liability companies or other organizations, |
| 214 | either directly or through a nonprofit corporation formed by the |
| 215 | community hospital, which are jointly owned with other public or |
| 216 | private hospitals, nonprofit or for-profit corporations, or other |
| 217 | health care related organizations, for the purpose of conducting |
| 218 | activities within or outside of the community hospital's service |
| 219 | area for the benefit of the community hospital, including, but not |
| 220 | limited to, joint hospital acquisitions, group purchasing, |
| 221 | clinically integrated networks, payor contracting, and joint |
| 222 | requests for federal and state grants and funding; |

| 223 | (w) To make capital contributions, loans, debt or |
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| 224 | equity financing to or for any joint venture or similar |
| 225 | arrangement in which the community hospital, or any nonprofit |
| 226 | corporation formed or owned by the community hospital, has or |
| 227 | acquires an ownership interest, and to guarantee loans and any |
| 228 | other obligations for such purposes; |
| 229 | (x) To establish arrangements for the community |
| 230 | hospital to participate in financial integration and/or clinical |
| 231 | integration or clinically integrated networks with a joint |
| 232 | venture, with other public or private health-related |
| 233 | organizations, or through a joint operating agreement; |
| 234 | (y) To have an ownership interest in, make capital |
| 235 | contributions to, and assume financial risk under, accountable |
| 236 | care organizations or similar organizations; |
| 237 | (z) To enter into any contract for a term of any |
| 238 | length, regardless of whether the length or term of the contract |
| 239 | exceeds the term of the board of trustees of the community |
| 240 | hospital; |
| 241 | (aa) To elect any or all of the members of the board of |
| 242 | directors of any nonprofit corporation of which the community |
| 243 | hospital is a member; |
| 244 | (bb) To create, establish, acquire, operate or support |
| 245 | subsidiaries and affiliates, either for-profit or nonprofit, to |
| 246 | assist the community hospital in fulfilling its purposes; |

| 247 | (cc) To create, establish or support nonaffiliated |
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| 248 | for-profit or nonprofit corporations or other lawful business |
| 249 | organizations that operate and have as their purposes the |
| 250 | furtherance of the community hospital's purposes; |
| 251 | (dd) Without limiting the generality of any provisions |
| 252 | of this section, to accomplish and facilitate the creation, |
| 253 | establishment, acquisition, operation or support of any such |
| 254 | subsidiary, affiliate, nonaffiliated corporation or other lawful |
| 255 | business organization, by means of loans of funds, acquisition or |
| 256 | transfer of assets, leases of real or personal property, gifts and |
| 257 | grants of funds or guarantees of indebtedness of such |
| 258 | subsidiaries, affiliates and nonaffiliated corporations; |
| 259 | (ee) To exercise all powers granted under this section |
| 260 | in such a manner as the community hospital, through its board of |
| 261 | trustees, may determine to be consistent with the purposes of this |
| 262 | chapter, including the state action immunity provided by this |
| 263 | section from state and federal antitrust laws to the fullest |
| 264 | extent possible, notwithstanding that as a consequence of such |
| 265 | exercise of such powers it engages in activities that may be |
| 266 | deemed "anticompetitive" or that displace competition within the |
| 267 | meaning or contemplation of the antitrust laws of this state or of |
| 268 | the United States; and |
| 269 | (ff) To make contributions, as defined in Section |
| 270 | 23-15-801(e)(i), to political committees, as defined in Section |
| 271 | <u>23-15-801(c).</u> |
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| 272 | (6) No board of trustees of any community hospital may |
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| 273 | accept any grant of money or other thing of value from any |
| 274 | not-for-profit or for-profit organization established for the |
| 275 | purpose of supporting health care in the area served by the |
| 276 | facility unless two-thirds (2/3) of the trustees vote to accept |
| 277 | the grant. |

- (7) No board of trustees, individual trustee or any other person who is an agent or servant of the trustees of any community hospital shall have any personal financial interest in any not-for-profit or for-profit organization which, regardless of its stated purpose of incorporation, provides assistance in the form of grants of money or property to community hospitals or provides services to community hospitals in the form of performance of functions normally associated with the operations of a hospital.
- 286 (8) The Legislature finds and declares as follows:
 - (a) The needs of the residents of Mississippi can best be served by community hospitals having the legal, financial and operational flexibility to take full advantage of opportunities and challenges presented by the evolving health care environment and to take whatever actions are necessary to enable the community hospitals' continuation as health systems that provide the finest possible quality of care consistent with reasonable costs.
 - (b) In this environment, the community hospitals must have the ability to respond to changing conditions by having the power to develop efficient and cost-effective methods and

| 297 | structures to provide for health care needs, while maintaining a |
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| 298 | public mission and character. In addition, community hospitals in |
| 299 | Mississippi are political subdivisions of the state. Accordingly, |
| 300 | the Legislature finds that there is a compelling interest in |
| 301 | establishing a structure and process for community hospitals to |
| 302 | adapt to this dynamic environment, to operate efficiently, to |
| 303 | offer competitive health care services, to respond more |
| 304 | effectively to new developments and regulatory changes in the |
| 305 | health care area, and to continue to serve and promote the health, |
| 306 | wellness and welfare of the citizens of Mississippi. The |
| 307 | acquisition, operation and financing of hospitals and other health |
| 308 | care facilities by the community hospitals are declared to be for |
| 309 | a public and governmental purpose and a matter of public |
| 310 | necessity. |
| 311 | (c) The geographic areas served by community hospitals |
| 312 | include rural populations and other groups that experience |
| 313 | significant health disparities. Health disparities are |
| 314 | differences in health status when compared to the population |
| 315 | overall, often characterized by indicators such as higher |
| 316 | incidence of disease and/or disability, increased mortality rates, |
| 317 | and lower life expectancies. Rural risk factors for health |
| 318 | disparities include geographic isolation, lower socioeconomic |
| 319 | status, higher rates of health risk behaviors, and limited access |
| 320 | to health care specialists and subspecialists. As a result of |
| 321 | these health disparities, the residents of areas served by |
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| 322 | community hospitals have high rates of mortality and morbidity, |
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| 323 | heart disease, cancer, and other illnesses. The areas also |
| 324 | include a high percentage of uninsured individuals and Medicaid |
| 325 | patients, which are medically underserved groups. Community |
| 326 | hospitals have demonstrated their ability to provide high quality |
| 327 | health care and to improve health conditions and outcomes as well |
| 328 | as access to care. The provisions of this section will |
| 329 | significantly strengthen the ability of community hospitals to |
| 330 | serve the health care needs of the residents of their service |
| 331 | areas. |
| 332 | (d) The community hospitals' investment of significant |
| 333 | public assets and their efforts to provide high quality health |
| 334 | care services to medically underserved populations are jeopardized |
| 335 | by potential limits on the ability of community hospitals to |
| 336 | collaborate and consolidate with other public and private health |
| 337 | care facilities and providers. The Legislature expressly finds |
| 338 | that the benefits of collaboration and consolidation by the |
| 339 | community hospitals outweigh any adverse impact on competition. |
| 340 | The benefits of the community hospitals' efforts to collaborate |
| 341 | and consolidate include, but are not limited to, preserving and |
| 342 | expanding needed health care services in its service area; |
| 343 | consolidating unneeded or duplicative health care services; |
| 344 | enhancing the quality of, and expanding access to, health care |
| 345 | delivered to medically underserved and rural populations; and |
| 346 | lowering costs and improving the efficiency of the health care |

| 347 | services it delivers. Based on the findings contained in this |
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| 348 | section, the Legislature affirmatively expresses a policy to allow |
| 349 | community hospitals to consolidate with other hospitals, health |
| 350 | care facilities and providers and to engage in collaborative |
| 351 | activities consistent with their health care purposes, |
| 352 | notwithstanding that those consolidations and collaborations may |
| 353 | have the effect of displacing competition in the provision of |
| 354 | hospital or other health care related services. In engaging in |
| 355 | such consolidations and collaborations with other hospitals, |
| 356 | health care facilities and providers, the community hospital shall |
| 357 | be considered to be acting pursuant to clearly articulated state |
| 358 | policy as established in this section and shall not be subject to |
| 359 | federal or state antitrust laws while so acting. With respect to |
| 360 | the consolidations, collaborative activities and other activities |
| 361 | contemplated in this section, the community hospital and the |
| 362 | public or private entities with which it consolidates, |
| 363 | collaborates, or enters into any of the transactions set forth in |
| 364 | this section, shall be immune from liability under the federal and |
| 365 | state antitrust laws and those activities are provided with state |
| 366 | action immunity from federal and state antitrust laws to the |
| 367 | fullest extent possible; however, the state action immunity from |
| 368 | federal and state antitrust laws shall not apply to health care |
| 369 | facility acquisitions or joint ventures in which the community |
| 370 | hospital does not maintain a majority, controlling interest in the |
| 371 | acquired health care facility or joint venture. Additionally, |

| 372 | state a | act: | ion immun | ity s | hall | not | apply | to | the | acti | _vit | ies | of a | <u>a</u> |
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| 373 | communi | ity | hospital | that | has | been | acqu | irec | d by, | lea | ased | to, | or | whose |
| 374 | assets | or | business | line | is | contr | olled | in | any | way | by, | a p | oriva | ate_ |

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376 **SECTION 2.** Section 41-13-29, Mississippi Code of 1972, is amended as follows:

41-13-29. (1) (a) The owners are authorized to appoint trustees for the purpose of operating and governing community hospitals. The owner of a community hospital may remove a trustee after appointment for good cause shown, upon a unanimous vote of all members of the governing board of the owner that appointed the trustee, or upon a majority vote of the governing board of the owner that appointed the trustee after a recommendation from the board of trustees of the hospital that the trustee be removed. be eligible for appointment, an appointee must be an adult legal resident of the county which has an ownership interest in the community hospital or the county in which the municipality or other political subdivision holding the ownership interest in the community hospital is located. The authority to appoint trustees shall not apply to leased facilities, unless specifically reserved by the owner in the applicable lease agreement.

(b) The board of trustees shall consist of not more than seven (7) members nor less than five (5) members, except where specifically authorized by statute, and shall be appointed by the respective owners on a pro rata basis comparable to the

397 ownership interests in the community hospital. Where the

398 community hospital is owned solely by a county, or any supervisors

399 districts, judicial districts or election district of a county, or

400 by a municipality, the trustees shall be residents of the owning

401 entity.

402 (c) Trustees for municipally owned community hospitals

403 shall be appointed by the governing authority of the municipality.

404 Trustees for a community hospital owned by a county shall be

405 appointed by the board of supervisors with each supervisor having

406 the right to nominate one (1) trustee from his district or from

407 the county at large. Appointments exceeding five (5) in number

408 shall be from the county at large. Trustees for a community

409 hospital owned solely by supervisors districts, judicial districts

410 or election district of a county, shall be appointed by the board

411 of supervisors of the county from nominees submitted by the

412 supervisor or supervisors representing the owner district or

413 districts.

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414 (2) (a) Initially the board of trustees shall be appointed

as follows: one (1) for a term of one (1) year, one (1) for a

416 term of two (2) years, one (1) for a term of three (3) years, one

417 (1) for a term of four (4) years, and one (1) for a term of five

418 (5) years. Appointments exceeding five (5) in number shall be for

419 terms of four (4) and five (5) years, respectively. Thereafter,

420 all terms shall be for five (5) years. No community hospital

421 trustee holding office on July 1, 1982, shall be affected by this

- 422 provision, but the terms shall be filled at the expiration thereof
- 423 according to the provisions of this section; provided, however,
- 424 that any other specific appointment procedures presently
- 425 authorized shall likewise not be affected by the terms hereof.
- 426 Any vacancy on the board of trustees shall be filled within ninety
- 427 (90) days by appointment by the applicable owner for the remainder
- 428 of the unexpired term.
- 429 (b) From and after January 1, 2016, to be eligible for
- 430 appointment, an appointee must have no felony convictions, possess
- 431 at least a high school diploma or the equivalent, owe no
- 432 outstanding debt to the community hospital, and not be a plaintiff
- 433 in any pending lawsuit against the community hospital. The
- 434 appointee may not own an interest in, or be an officer or employee
- 435 of, a company or business that provides goods or services in
- 436 direct competition with the community hospital, nor may the
- 437 appointee's spouse own an interest in, or be an officer of, such
- 438 company or business.
- 439 (3) (a) Any community hospital erected, owned, maintained
- 440 and operated by any county located in the geographical center of
- 441 the State of Mississippi and in which State Highways No. 12 and
- 442 No. 35 intersect, shall be operated by a board of trustees of five
- 443 (5) members who have the qualifications set forth in this section
- 444 to be appointed by the board of supervisors from the county at
- 445 large, one (1) for a term of one (1) year, one (1) for a term of
- 446 two (2) years, one (1) for a term of three (3) years, one (1) for

| 447 | a term | of four | (4) yea | rs, and | one (1) | for a | term of | five | (5) | |
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| 448 | years. | Thereaf | ter all | trustee | es shall | be ap | pointed | from | the o | county |
| 449 | at larg | e for a | period | of five | (5) yea: | rs. | | | | |

- 450 (b) Any community hospital erected, owned, maintained 451 and operated by any county situated in the Yazoo-Mississippi Delta 452 Levee District and bordering on the Mississippi River and having a 453 population of not less than forty-five thousand (45,000) and 454 having an assessed valuation of not less than Thirty Million 455 Dollars (\$30,000,000.00) for the year 1954, shall be operated by a 456 board of trustees which may consist of not more than eleven (11) 457 members who have the qualifications set forth in this section.
 - operated by any county having two (2) judicial districts, which is traversed by U.S. Interstate Highway 59, which intersects Highway 84 therein, shall be operated by a board of trustees which shall consist of seven (7) members who have the qualifications set forth in this section. The first seven (7) members appointed under authority of this paragraph shall be appointed by the board of supervisors for terms as follows:

Each supervisor of Supervisors Districts One and Two shall
nominate and the board of supervisors shall appoint one (1) person
from each said beat for a one-year term. Each supervisor of
Supervisors Districts Three and Four shall nominate and the board
of supervisors shall appoint one (1) person from each beat for a
two-year term. The supervisor of Supervisors District Five shall

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| 472 | nominate and the board of supervisors shall appoint one (1) person |
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| 473 | from the beat for a three-year term. The medical staff at the |
| 474 | hospital shall submit a list of four (4) nominees and the |
| 475 | supervisors shall appoint two (2) trustees from the list of |
| 476 | nominees, one (1) for a three-year term and one (1) for a one-year |
| 477 | term. Thereafter, as the terms of the board of trustee members |
| 478 | authorized by this paragraph expire, all but the trustee |
| 479 | originally appointed from the medical staff nominees for a |
| 480 | one-year term shall be appointed by the board of supervisors for |
| 481 | terms of three (3) years. The term of the trustee originally |
| 482 | appointed from the medical staff nominees by the board of |
| 483 | supervisors for a term of one (1) year shall remain a term of one |
| 484 | (1) year and shall thereafter be appointed for a term of one (1) |
| 485 | year. The two (2) members appointed from medical staff nominees |
| 486 | shall be appointed from a list of two (2) nominees for each |
| 487 | position to be submitted by the medical staff of the hospital for |
| 488 | each vacancy to be filled. It is the intent of the Legislature |
| 489 | that the board of trustees which existed prior to July 1, 1985, |
| 490 | was abolished by amendment to this section under Section 5, |
| 491 | Chapter 511, Laws of 1985, and the amendment authorized the |
| 492 | appointment of a new board of trustees on or after July 1, 1985, |
| 493 | in the manner provided in this paragraph. Any member of the board |
| 494 | of trustees which existed before July 1, 1985, who has the |
| 495 | qualifications set forth in this section shall be eligible for |
| 496 | reappointment subject to the provisions of this paragraph. |

| 497 | (d) Any community hospital erected, owned, maintained |
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| 498 | and operated by any county bordering on the Mississippi River |
| 499 | having two (2) judicial districts, wherein U.S. Highway 61 and |
| 500 | Mississippi Highway 8 intersect, lying wholly within a levee |
| 501 | district, shall be operated by a board of trustees which may |
| 502 | consist of not more than nine (9) members who have the |
| 503 | qualifications set forth in this section. |

- (e) Any community hospital system owned, maintained and operated by any county bordering on the Gulf of Mexico and the State of Alabama shall be operated by a board of trustees constituted as follows: seven (7) members shall be selected as provided in subsection (1) of this section and two (2) advisors who shall be the chiefs of staff at those hospitals which are a part of the hospital system; the members must have the qualifications set forth in this section. The term of the chiefs of staff on the board of trustees shall coincide with their service as chiefs of staff at their respective hospitals.
- (4) Any community hospital owned, maintained and operated by any county wherein Mississippi Highways 16 and 19 intersect, having a land area of five hundred sixty-eight (568) square miles, and having a population in excess of twenty-three thousand seven hundred (23,700) according to the 1980 federal decennial census, shall be operated by a board of trustees of five (5) members who have the qualifications set forth in this section, one (1) of whom shall be elected by the qualified electors of each supervisors

| 522 | district of the county in the manner provided herein. Each member |
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| 523 | so elected shall be a resident and qualified elector of the |
| 524 | district from which he is elected. The first elected members of |
| 525 | the board of trustees shall be elected at the regular general |
| 526 | election held on November 4, 1986. At the election, the members |
| 527 | of the board from Supervisors Districts One and Two shall be |
| 528 | elected for a term of six (6) years; members of the board from |
| 529 | Supervisors Districts Three and Four shall be elected for a term |
| 530 | of two (2) years; and the member of the board from Supervisors |
| 531 | District Five shall be elected for a term of four (4) years. Each |
| 532 | subsequent member of the board shall be elected for a term of six |
| 533 | (6) years at the same time as the general election in which the |
| 534 | member of the county board of education representing the same |
| 535 | supervisors district is elected. All members of the board shall |
| 536 | take office on the first Monday of January following the date of |
| 537 | their election. The terms of all seven (7) appointed members of |
| 538 | the board of trustees holding office on the effective date of this |
| 539 | act (Laws 1986, Chapter 462) shall expire on the date that the |
| 540 | first elected members of the board take office. The board of |
| 541 | trustees provided for herein shall not lease or sell the community |
| 542 | hospital property under its jurisdiction unless the board of |
| 543 | supervisors of the county calls for an election on the proposition |
| 544 | and a majority voting in the election shall approve the lease or |
| 545 | sale. |

| The members of the board of trustees provided for in this |
|---|
| subsection shall be compensated a per diem and reimbursed for |
| their expenses and mileage in the same amount and subject to the |
| same restrictions provided for members of the county board of |
| education in Section 37-5-21 and may, at the discretion of the |
| board, choose to participate in any hospital medical benefit plan |
| which may be in effect for hospital employees. Any member of the |
| board of trustees choosing to participate in the plan shall pay |
| the full cost of his participation in the plan so that no |
| expenditure of hospital funds is required. |

The name of any qualified elector who is a candidate for the community hospital board of trustees shall be placed on the ballot used in the general elections by the county election commissioners, if the candidate files with the county election commissioners, not more than ninety (90) days and not less than thirty (30) days before the date of the general election, a petition of nomination signed by not less than fifty (50) qualified electors of the county residing within each supervisors district. The candidate in each supervisors district who receives the highest number of votes cast in the district shall be declared elected.

(5) A board of trustees provided for herein may, in its discretion, where funds are available, compensate each trustee per diem in at least the amount established by Section 25-3-69 up to the maximum amount of not more than * * Two Hundred Dollars

- (\$200.00) for each meeting of the board of trustees or meeting of a committee established by the board of trustees where the trustee was in attendance, and in addition thereto provide meals at the meetings and compensate each member attending travel expenses at the rate authorized by Section 25-3-41 for actual mileage traveled to and from the place of meeting.
- 577 (6) The owner which appointed a trustee may likewise remove
 578 him from office by majority vote for failure to attend at least
 579 fifty percent (50%) of the regularly scheduled meetings of the
 580 board during the twelve-month period preceding the vote, or for
 581 violation of any statute relating to the responsibilities of his
 582 office, based upon the recommendation of a majority of the
 583 remaining trustees.
 - (7) For community hospitals located in a county having a population of less than one hundred thousand (100,000) according to the most recent federal decennial census, the members of the board of trustees, administrator and any other officials of the community hospital as may be deemed necessary or proper by the board of trustees shall be under bond in an amount not less than Ten Thousand Dollars (\$10,000.00) nor more than One Hundred Thousand Dollars (\$100,000.00) with some surety company authorized to do business in the State of Mississippi to faithfully perform the duties of his office. For community hospitals located in a county having a population of one hundred thousand (100,000) or more according to the most recent federal decennial census, the

- 596 bond shall be in an amount not less than Fifty Thousand Dollars
- 597 (\$50,000.00) nor more than Five Hundred Thousand Dollars
- 598 (\$500,000.00). Premiums for the bonds shall be paid from funds of
- 599 the community hospital.
- 600 (8) The members of the board of trustees of a community
- 601 hospital may, at the discretion of the board, choose to
- 602 participate in any hospital medical benefit plan or health
- 603 insurance plan, whether self-funded or otherwise, which may be in
- 604 effect for hospital employees. Any member of the board of
- 605 trustees choosing to participate in such plan shall pay the same
- 606 amount for his or her participation in the plan as hospital
- 607 employees are required to pay for their participation in such
- 608 plan.
- 609 **SECTION 3.** Section 41-13-15, Mississippi Code of 1972, is
- 610 brought forward as follows:
- 611 41-13-15. (1) Any county and/or any political or judicial
- 612 subdivision of a county and/or any municipality of the State of
- 613 Mississippi, acting individually or jointly, may acquire and hold
- 614 real estate for a community hospital either recognized and/or
- 615 licensed as such by either the State of Mississippi or the United
- 616 States Government, and may, after complying with applicable health
- 617 planning and licensure statutes, construct a community hospital
- 618 thereon and/or appropriate funds according to the provisions of
- 619 this chapter for the construction, remodeling, maintaining,

- 620 equipping, furnishing and expansion of such facilities by the 621 board of trustees upon such real estate.
- 622 Where joint ownership of a community hospital is 623 involved, the owners are hereby authorized to contract with each 624 other for determining the pro rata ownership of such community 625 hospital, the proportionate cost of maintenance and operation, and 626 the proportionate financing that each will contribute to the 627 community hospital.
 - The owners may likewise contract with each other, or on (3) behalf of any subordinate political or judicial subdivision, or with the board of trustees of a community hospital, and/or any agency of the State of Mississippi or the United States Government, for necessary purposes related to the establishment, operation or maintenance of community hospitals and related programs wherever located, and may either accept from, sell or contribute to the other entities, monies, personal property or existing health facilities. The owners or the board of trustees may also receive monies, property or any other valuables of any kind through gifts, donations, devises or other recognized means from any source for the purpose of hospital use.
 - Owners and boards of trustees, acting jointly or severally, may acquire and hold real estate for offices for physicians and other health care practitioners and related health care or support facilities, provided that any contract for the purchase of real property must be ratified by the owner, and may

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PAGE 26 (RF\KW)

- thereon construct and equip, maintain and remodel or expand such offices and related facilities, and the board of trustees may lease same to members of the hospital staff or others at a rate deemed to be in the best interest of the community hospital.
- (5) If any political or judicial subdivision of a county is obligated hereunder, the boundaries of such district shall not be altered in such a manner as to relieve any portion thereof of its obligation hereunder.
- 653 Owners may convey to any other owner any or all (6) property, real or personal, comprising any existing community 654 655 hospital, including related facilities, wherever located, owned by 656 such conveying owner. Such conveyance shall be upon such terms 657 and conditions as may be agreed upon and may make such provisions 658 for transfers of operating funds and/or for the assumption of liabilities of the community hospital as may be deemed appropriate 659 660 by the respective owners.
- 661 Except as provided for in subsection (11) of this (7) section, owners may lease all or part of the property, real or 662 663 personal, comprising a community hospital, including any related 664 facilities, wherever located, and/or assets of such community 665 hospital, to any individual, partnership or corporation, whether 666 operating on a nonprofit basis or on a profit basis, or to the 667 board of trustees of such community hospital or any other owner or board of trustees, subject to the applicable provisions of 668 669 subsections (8), (9) and (10) of this section. The term of such

| 670 | lease shall not exceed fifty (50) years. Such lease shall be |
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| 671 | conditioned upon (i) the leased facility continuing to operate in |
| 672 | a manner safeguarding community health interests; (ii) the |
| 673 | proceeds from the lease being first applied against such bonds, |
| 674 | notes or other evidence of indebtedness as are issued pursuant to |
| 675 | Section 41-13-19 as and when they are due, provided that the terms |
| 676 | of the lease shall cover any indebtedness pursuant to Section |
| 677 | 41-13-19; and (iii) any surplus proceeds from the lease being |
| 678 | deposited in the general fund of the owner, which proceeds may be |
| 679 | used for any lawful purpose. Such lease shall be subject to the |
| 680 | express approval of the board of trustees of the community |
| 681 | hospital, except in the case where the board of trustees of the |
| 682 | community hospital will be the lessee. However, owners may not |
| 683 | lease any community hospital to the University of Mississippi |
| 684 | Medical Center unless first the University of Mississippi Medical |
| 685 | Center has obtained authority to lease such hospital under |
| 686 | specific terms and conditions from the Board of Trustees of State |
| 687 | Institutions of Higher Learning. |
| 688 | If the owner wishes to lease a community hospital without an |
| 689 | option to sell it and the approval of the board of trustees of the |
| 690 | community hospital is required but is not given within thirty (30) |
| 691 | days of the request for its approval by the owner, then the owner |
| 692 | may enter such lease as described herein on the following |
| 693 | conditions: A resolution by the owner describing its intention to |
| 694 | enter such lease shall be published once a week for at least three |

695 (3) consecutive weeks in at least one (1) newspaper published in 696 the county or city, as the case may be, or if none be so 697 published, in a newspaper having a general circulation therein. 698 The first publication of such notice shall be made not less than 699 twenty-one (21) days prior to the date fixed in such resolution 700 for the lease of the community hospital and the last publication 701 shall be made not more than seven (7) days prior to such date. 702 If, on or prior to the date fixed in such resolution for the lease 703 of the community hospital, there shall be filed with the clerk of 704 the owner a petition signed by twenty percent (20%) or fifteen 705 hundred (1500), whichever is less, of the qualified voters of such 706 owner, requesting that an election be called and held on the question of the lease of the community hospital, then it shall be 707 708 the duty of the owner to call and provide for the holding of an 709 election as petitioned for. In such case, no such lease shall be entered into unless authorized by the affirmative vote of the 710 711 majority of the qualified voters of such owner who vote on the 712 proposition at such election. Notice of such election shall be 713 given by publication in like manner as hereinabove provided for 714 the publication of the initial resolution. Such election shall be 715 conducted and the return thereof made, canvassed and declared as 716 nearly as may be in like manner as is now or may hereafter be 717 provided by law in the case of general elections in such owner. 718 If, on or prior to the date fixed in the owner's resolution for 719 the lease of the community hospital, no such petition as described 720 above is filed with the clerk of the owner, then the owner may 721 proceed with the lease subject to the other requirements of this 722 Subject to the above conditions, the lease agreement 723 shall be upon such terms and conditions as may be agreed upon and may make such provision for transfers of tangible and intangible 724 725 personal property and operating funds and/or for the assumption of 726 liabilities of the community hospital and for such lease payments, 727 all as may be deemed appropriate by the owners.

Owners may sell and convey all or part of the property, real or personal, comprising a community hospital, including any related facilities, wherever located, and/or assets of such community hospital, to any individual, partnership or corporation, whether operating on a nonprofit basis or on a profit basis, or to the board of trustees of such community hospital or any other owner or board of trustees, subject to the applicable provisions of subsections (8) and (10) of this section. Such sale and conveyance shall be upon such terms and conditions as may be agreed upon by the owner and the purchaser that are consistent with the requirements of this section, and the parties may make such provisions for the transfer of operating funds or for the assumption of liabilities of the facility, or both, as they deem appropriate. However, such sale and conveyance shall be conditioned upon (i) the facility continuing to operate in a manner safeguarding community health interests; (ii) the proceeds from such sale being first applied against such bonds, notes or

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745 other evidence of indebtedness as are issued pursuant to Section 746 41-13-19 as and when they are due, provided that the terms of the 747 sale shall cover any indebtedness pursuant to Section 41-13-19; 748 and (iii) any surplus proceeds from the sale being deposited in 749 the general fund of the owner, which proceeds may be used for any 750 lawful purpose. However, owners may not sell or convey any 751 community hospital to the University of Mississippi Medical Center 752 unless first the University of Mississippi Medical Center has 753 obtained authority to purchase such hospital under specific terms 754 and conditions from the Board of Trustees of State Institutions of 755 Higher Learning.

- (8) Whenever any owner decides that it may be in its best interests to sell or lease a community hospital as provided for under subsection (7) of this section, the owner shall first contract with a certified public accounting firm, a law firm or competent professional health care or management consultants to review the current operating condition of the community hospital. The review shall consist of, at minimum, the following:
- 763 (a) A review of the community's inpatient facility
 764 needs based on current workload, historical trends and
 765 projections, based on demographic data, of future needs.
- 766 (b) A review of the competitive market for services,
 767 including other hospitals which serve the same area, the services
 768 provided and the market perception of the competitive hospitals.

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- 769 (c) A review of the hospital's strengths relative to
 770 the competition and its capacity to compete in light of projected
 771 trends and competition.
- 772 (d) An analysis of the hospital's options, including 773 service mix and pricing strategies. If the study concludes that a 774 sale or lease should occur, the study shall include an analysis of 775 which option would be best for the community and how much revenues 776 should be derived from the lease or sale.
- 777 (9) After the review and analysis under subsection (8) of 778 this section, an owner may choose to sell or lease the community 779 hospital. If an owner chooses to sell such hospital or lease the 780 hospital with an option to sell it, the owner shall follow the 781 procedure specified in subsection (10) of this section. If an 782 owner chooses to lease the hospital without an option to sell it, 783 it shall first spread upon its minutes why such a lease is in the 784 best interests of the persons living in the area served by the 785 facility to be leased, and it shall make public any and all 786 findings and recommendations made in the review required under 787 proposals for the lease, which shall state clearly the minimum 788 required terms of all respondents and the evaluation process that 789 will be used when the owner reviews the proposals. 790 shall lease to the respondent submitting the highest and best 791 proposal. In no case may the owner deviate from the process 792 provided for in the request for proposals.

| 793 | (10) If an owner wishes to sell such community hospital or |
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| 794 | lease the hospital with an option to sell it, the owner first |
| 795 | shall conduct a public hearing on the issue of the proposed sale |
| 796 | or lease with an option to sell the hospital. Notice of the date, |
| 797 | time, location and purpose of the public hearing shall be |
| 798 | published once a week for at least three (3) consecutive weeks in |
| 799 | at least one (1) newspaper published in the county or city, as the |
| 800 | case may be, or if none be so published, in a newspaper having a |
| 801 | general circulation therein. The first publication of the notice |
| 802 | shall be made not less than twenty-one (21) days before the date |
| 803 | of the public hearing and the last publication shall be made not |
| 804 | more than seven (7) days before that date. If there is filed with |
| 805 | the clerk of the owner not more than twenty-one (21) days after |
| 806 | the date of the public hearing, a petition signed by twenty |
| 807 | percent (20%) or fifteen hundred (1500), whichever is less, of the |
| 808 | qualified voters of the owner, requesting that an election be |
| 809 | called and held on the question of whether the owner should |
| 810 | proceed with the process of seeking proposals for the sale or |
| 811 | lease with an option to sell the hospital, then it shall be the |
| 812 | duty of the owner to call and provide for the holding of an |
| 813 | election as petitioned for. Notice of the election shall be given |
| 814 | by publication in the same manner as provided for the publication |
| 815 | of the notice of the public hearing. The election shall be |
| 816 | conducted and the return thereof made, canvassed and declared in |
| 817 | the same manner as provided by law in the case of general |

818 elections in the owner. If less than a majority of the qualified 819 voters of the owner who vote on the proposition at such election 820 vote in favor of the owner proceeding with the process of seeking 821 proposals for the sale or lease with an option to sell the 822 hospital, then the owner is not authorized to sell or lease the 823 hospital. If a majority of the qualified voters of the owner who 824 vote on the proposition at such election vote in favor of the 825 owner proceeding with the process of seeking proposals for the 826 sale or lease with an option to sell the hospital, then the owner may seek proposals for the sale or lease of the hospital. 827 828 such petition is timely filed with the clerk of the owner, then 829 the owner may proceed with the process of seeking proposals for 830 the sale or lease with an option to sell the hospital. 831 shall adopt a resolution describing its intention to sell or lease with an option to sell the hospital, which shall include the 832 833 owner's reasons why such a sale or lease is in the best interests 834 of the persons living in the area served by the facility to be 835 sold or leased. The owner then shall publish a copy of the 836 resolution; the requirements for proposals for the sale or lease 837 with an option to sell the hospital, which shall state clearly the 838 minimum required terms of all respondents and the evaluation 839 process that will be used when the owner reviews the proposals; and the date proposed by the owner for the sale or lease with an 840 option to sell the hospital. Such publication shall be made once 841 842 a week for at least three (3) consecutive weeks in at least one

(1) newspaper published in the county or city, as the case may be, or if none be so published, in a newspaper having a general circulation therein. The first publication of the notice shall be made not less than twenty-one (21) days before the date proposed for the sale or lease with an option to sell the hospital and the last publication shall be made not more than seven (7) days before that date. After receiving proposals, such sale or lease shall be made to the respondent submitting the highest and best proposal. In no case may the owner deviate from the process provided for in the request for proposals.

(11) A lessee of a community hospital, under a lease entered into under the authority of Section 41-13-15, in effect prior to July 15, 1993, or an affiliate thereof, may extend or renew such lease whether or not an option to renew or extend the lease is contained in the lease, for a term not to exceed fifteen (15) years, conditioned upon (a) the leased facility continuing to operate in a manner safeguarding community health interest; (b) proceeds from the lease being first applied against such bonds, notes or other evidence of indebtedness as are issued pursuant to Section 41-13-19; (c) surplus proceeds from the lease being used for health related purposes; (d) subject to the express approval of the board of trustees of the community hospital; and (e) subject to the express approval of the owner. If no board of trustees is then existing, the owner shall have the right to enter into a lease upon such terms and conditions as agreed upon by the

- 868 parties. Any lease entered into under this subsection (11) may
- 869 contain an option to purchase the hospital, on such terms as the
- 870 parties shall agree.
- 871 **SECTION 4.** Section 37-115-50, Mississippi Code of 1972, is
- 872 amended as follows:
- 873 37-115-50. For purposes of Sections 37-115-50 * * * through
- 874 37-115-50.3, the following terms shall have the following
- 875 meanings:
- 876 (a) "Academic medical center" means the teaching,
- 877 research, and clinical facilities and services provided,
- 878 established, or operated by a public university under Chapter 115,
- 879 Title 37, Mississippi Code of 1972.
- (b) "Health sciences school" means any school of
- 881 medicine, dentistry, nursing, pharmacy and any other health
- 882 care-related educational program operated or provided by an
- 883 academic medical center in this state.
- (c) "Health care collaborative" means any consolidation
- 885 or collaboration involving the academic center and any other
- 886 public or private health care facilities and providers.
- 887 **SECTION 5.** The following shall be codified as Section
- 888 37-115-50.2, Mississippi Code of 1972:
- 889 37-115-50.2. The Legislature finds and declares all of the
- 890 following:
- 891 (a) The academic medical center and health care

892 collaboratives organized under Section 37-115-50.1, together with

| 893 | the Board of Trustees of State Institutions of Higher Learning |
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| 894 | under which the academic medical center operates, are each (acting |
| 895 | individually and collectively) performing essential public |
| 896 | functions on behalf of the state, and other governmental entities |
| 897 | in the state. |

- (b) The needs of the residents of Mississippi can best be served by the academic medical center and health care collaboratives having the legal, financial and operational flexibility to take full advantage of opportunities and challenges presented by the evolving health care environment and to take whatever actions are necessary to enable the academic medical center and health care collaboratives' continuation as a health system that provides the finest possible quality of care consistent with reasonable costs and that serves the health care needs of uninsured, under-insured residents in addition to its scientific and educational missions.
- 909 In this environment, the academic medical center (C) 910 and its health care collaboratives must have the ability to 911 respond to changing conditions by having the power to develop 912 efficient and cost-effective methods and structures to provide for 913 health care needs, while maintaining a public mission and 914 character. In addition, the academic medical center is an institution of the state. Accordingly, the Legislature finds that 915 there is a compelling interest in establishing a structure and 916 process for the academic medical center to adapt to this dynamic 917

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918 environment, to operate efficiently, to offer competitive health 919 care services, to respond more effectively to new developments and 920 regulatory changes in the health care area, and to continue to 921 serve and promote the health, wellness and welfare of the citizens of Mississippi. The acquisition, operation and financing of 922 923 hospitals and other health care facilities by the academic medical 924 center are declared to be for a public and governmental purpose 925 and a matter of public necessity.

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H. B. No. 1296

23/HR26/R1904 PAGE 38 (RF\KW)

The geographic areas served by the academic medical (d) center and its health care collaboratives include rural populations and other groups that experience significant health disparities. Health disparities are differences in health status when compared to the population overall, often characterized by indicators such as higher incidence of disease and/or disability, increased mortality rates, and lower life expectancies. Rural risk factors for health disparities include geographic isolation, lower socioeconomic status, higher rates of health risk behaviors, and limited access to health care specialists and subspecialists. As a result of these health disparities, the residents of areas served by the academic medical center and its health care collaboratives have high rates of mortality and morbidity, heart disease, cancer, and other illnesses. The areas also include a high percentage of uninsured individuals and Medicaid patients, which are medically underserved groups. The academic medical center and its health care collaboratives have demonstrated their

ability to provide high quality health care and to improve health conditions and outcomes as well as access to care. This section and Section 37-115-50.3 will significantly strengthen the ability of the academic medical center and its health care collaboratives to serve the health care needs of the residents of their service areas.

The investment of significant public assets by the (e) academic medical center, the academic medical center's investment in health care collaboratives and their collective efforts to provide high quality health care services to medically underserved populations are jeopardized by potential limits on the ability of the academic medical center and its health care collaboratives to collaborate and consolidate with other public and private health care facilities and providers. The Legislature expressly finds that the benefits of collaboration and consolidation by the academic medical center and its health care collaboratives outweigh any adverse impact on competition. The benefits of the academic medical center and its health care collaboratives efforts to collaborate and consolidate include, but are not limited to, preserving and expanding needed health care services in its service areas; consolidating unneeded or duplicative health care services; enhancing the quality of, and expanding access to, health care delivered to medically underserved and rural populations; and lowering costs and improving the efficiency of the health care services it delivers. Based on the findings

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| 968 | contained in this section, the Legislature affirmatively expresses |
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| 969 | a policy to allow the academic medical center and health care |
| 970 | collaboratives to consolidate with hospitals, health care |
| 971 | facilities and other health care providers and to engage in |
| 972 | collaborative activities consistent with their health care |
| 973 | purposes, notwithstanding that those consolidations and |
| 974 | collaborations may have the effect of displacing competition in |
| 975 | the provision of hospital or other health care related services. |
| 976 | In engaging in such consolidations and collaborations with other |
| 977 | hospitals, health care facilities and providers, the academic |
| 978 | medical center and its health care collaboratives (acting |
| 979 | individually or collectively) shall be considered to be acting |
| 980 | pursuant to clearly articulated state policy as established in |
| 981 | this section and shall not be subject to federal or state |
| 982 | antitrust laws while so acting. With respect to the |
| 983 | consolidations, collaborative activities and other activities |
| 984 | contemplated in this section and Section 37-115-50.3, the academic |
| 985 | medical center and its health care collaboratives (acting |
| 986 | individually or collectively) and the public or private entities |
| 987 | with which it (or they) consolidate(s), collaborate(s), or |
| 988 | enter(s) into any of the transactions set forth in this section |
| 989 | and Section 37-115-50.3, shall be immune from liability under the |
| 990 | federal and state antitrust laws and those activities are provided |
| 991 | with state action immunity from federal and state antitrust laws |
| 992 | to the fullest extent possible; however, the state action immunity |

993 from federal and state antitrust laws shall not apply to health 994 care facility acquisitions or joint ventures in which the academic 995 medical center and its health care collaboratives (acting 996 individually or collectively) does not maintain a majority, 997 controlling interest in the acquired health care facility or joint 998 venture. Additionally, state action immunity shall not apply to 999 the activities of the academic medical center or any of its health 1000 care collaboratives that are under the control of a private third 1001 party.

In furtherance of the findings and authorizations 1002 (f) 1003 contained in paragraph (e) of this section, if a court of 1004 competent jurisdiction were to find that any of the activities of 1005 the academic medical center and its health care collaboratives 1006 (acting individually or collectively) authorized under this section or Section 37-115-50.3 would be immune from the 1007 1008 application of state and federal antitrust laws under the state 1009 action antitrust immunity doctrine pursuant to applicable jurisprudence only if such activities were subject to what has 1010 1011 come to be known in relevant antitrust jurisprudence as "active 1012 supervision" by the state, the Legislature finds that the academic 1013 medical center and its health care collaboratives are subject to 1014 direct and indirect supervision of the Board of Trustees of State 1015 Institutions of Higher Learning, which supervision has been, is currently, and is required to continue to be actively exercised by 1016 1017 such constitutional body of state government such that, even if

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such judicial requirements were applied to the academic medical center and its health care collaboratives with respect to application of the state action antitrust immunity doctrine, the academic medical center and each of its health care collaboratives (acting individually or collectively), when exercising its powers under this section and Section 37-115-50.3, shall be immune from liability under the state and federal antitrust laws.

1025 **SECTION 6.** The following shall be codified as Section 1026 37-115-50.3, Mississippi Code of 1972:

37-115-50.3. In addition to all powers granted in Section 37-115-50.1, subject to any required approval of the Board of Trustees of State Institutions of Higher Learning, the academic medical center and its health care collaboratives (acting individually or collectively) shall be empowered under this section:

- (a) To acquire hospitals, health care facilities and other health care-related operations and assets, through direct purchase, merger, consolidation, lease or other means;
- (b) To form, establish, fund and operate nonprofit

 1037 corporations, limited liability companies or other organizations,

 1038 either directly or through a nonprofit corporation formed by the

 1039 academic medical center and its health care collaboratives (acting

 1040 individually or collectively), which are jointly owned with other

 1041 public or private hospitals, nonprofit or for-profit corporations,

 1042 or other health care related organizations, for the purpose of

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| L043 | conducting activities within or outside of the service area the |
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| L044 | academic medical center or its health care collaboratives for the |
| L045 | benefit of the academic medical center and its health care |
| L046 | collaboratives including, but not limited to, joint hospital |
| L047 | acquisitions, group purchasing, clinically integrated networks, |
| L048 | payor contracting, and joint requests for federal and state grants |
| L049 | and funding; |

- 1050 To make capital contributions, loans, debt or (C) 1051 equity financing to or for any joint venture or similar arrangement in which the academic medical center and its health 1052 1053 care collaboratives (acting individually or collectively), or any nonprofit corporation formed or owned by the academic medical 1054 1055 center or one of its health care collaboratives, has or acquires 1056 an ownership interest, and to quarantee loans and any other 1057 obligations for such purposes;
- 1058 (d) To have an ownership interest in, make capital contributions to, and assume financial risk under, accountable care organizations or similar organizations;
- 1061 (e) To enter into any contract for a term of any
 1062 length, regardless of whether the length or term of the contract
 1063 exceeds the term of the board of trustees of a health care
 1064 collaborative;
- 1065 (f) To create, establish, acquire, operate or support
 1066 subsidiaries and affiliates, either for-profit or nonprofit, to
 1067 assist the academic medical center and its health care

| L068 | collaboratives | (acting | individually | or | collectively) | in | fulfilling |
|------|----------------|---------|--------------|----|---------------|----|------------|
| 1069 | its purposes; | | | | | | |

- 1070 (g) To create, establish or support nonaffiliated

 1071 for-profit or nonprofit corporations or other lawful business

 1072 organizations that operate and have as their purposes the

 1073 furtherance of the purposes of the academic medical center and its

 1074 health care collaboratives (acting individually or collectively);
 - (h) Without limiting the generality of any provisions of this section, to accomplish and facilitate the creation, establishment, acquisition, operation or support of any such subsidiary, affiliate, nonaffiliated corporation or other lawful business organization, by means of loans of funds, acquisition or transfer of assets, leases of real or personal property, gifts and grants of funds or guarantees of indebtedness of such subsidiaries, affiliates and nonaffiliated corporations; and
 - (i) Subject to the approval of the Board of Trustees of State Institutions of Higher Learning where applicable, to exercise all powers granted under this section in such a manner as the academic medical center and its health care collaboratives (acting individually or collectively) may determine to be consistent with the purposes of Sections 37-115-50.1 through 37-115-50.3, including the state action immunity provided by Section 37-115-50.2 from state and federal antitrust laws to the fullest extent possible, notwithstanding that as a consequence of such exercise of such powers it engages in activities that may be

| L094 | meaning or contemplation of the antitrust laws of this state or of | | | | | | |
|------|--|--|--|--|--|--|--|
| L095 | the United States. | | | | | | |
| L096 | SECTION 7. It is the intent of the Legislature that this act | | | | | | |
| L097 | be liberally construed so as to give effect to the intent, | | | | | | |
| L098 | purposes and findings described in this act. | | | | | | |
| L099 | SECTION 8. This act shall take effect and be in force from | | | | | | |
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deemed "anticompetitive" or which displace competition within the

1100 and after its passage.

