



TWO NEW BILLS INTRODUCED IN LAST MONTH...

As we take a break (for the moment) from the out of network legislation, a couple of fairly positive bills emerged over the last month.

The first, A-3754 (Greenwald) / S-2642 (Sweeney & Kean), provides a credit against the ambulatory care facility assessment liability for the value of unreimbursed care provided to hospital charity care patients.

This bill, introduced at the end of January, has bi-partisan sponsorship and, therefore, will likely advance quickly.

In summary, this bill provides for a more equitable tax burden for owners of ambulatory care facilities that are subject to the uniform gross receipts

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assessment, by recognizing, by means of a tax credit, the value of the charity care services provided by physician owners and their employees at general hospitals to patients who qualify for charity care. Since the revenues derived from the ambulatory care facility gross receipts assessment are dedicated to fund charity care provided at hospitals, under current law physician owners of the facilities subject to the assessment effectively contribute to funding charity care twice, through the facility assessment and through the uncompensated care they render to patients in hospitals who qualify for charity care.

Each facility may take as a credit against the liability due, the Medicaid-priced amount of the health care services provided by physician owners of an ambulatory care facility and their employees at

general hospitals in this State to patients who qualify for charity care, for which care the physician or employee has not received any compensation from the hospital, patient, or any third party payer.

Under the bill, the credit would not exceed the facility's liability due in any fiscal year and any unused credit may not be applied in any other fiscal year in which a liability is due.

Beginning in calendar year 2011, the ambulatory care facility shall include in its annual report to the Department of Health and Senior Services (DHSS) the amount of health care services provided by physician owners of the ambulatory care facility and their employees at a general hospital in this State to patients who qualify for charity care.

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The New Jersey Patient Care and Access Coalition (NJPCAC) was organized to promote and represent the common interests of urological care physicians in the State of New Jersey who are dedicated to the highest standards of practice and focused on addressing the challenges that confront our healthcare system. NJPCAC's membership includes nearly 200 practicing urologists and scores of additional healthcare professionals, including radiation oncologists, pathologists, nurses and administrative staff, that have come together to educate policy makers, regulators, insurers and other key stakeholders, including patients and peers about regulatory changes that will adversely affect the quality and accessibility to care provided to patients in New Jersey and those that will advance care in New Jersey. NJPCAC promotes and pursues educational, legislative and regulatory interests that are common to these urological care physicians and the advancement of patient care and access in the State of New Jersey.



Around the State

St. Barnabas CEO to retire

It was reported last week that St. Barnabas Health Care System's CEO, Ronald J. Del Mauro, will retire by the end of 2011. He will be succeeded by President Barry H. Ostrowsky.

Ostrowsky joined St. Barnabas in 1991 as Executive Vice President and General Counsel, and was named President and COO in February 2010.

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DHSS, in consultation with the Department of Human Services, shall price the health care services at the Medicaid amount for those services and notify the ambulatory care facility of the amount that may be credited against the liability due for that year.

DHSS may require the ambulatory care facility to submit such additional information as may be necessary to verify the facility's claim for unreimbursed health care services provided by physician owners and their employees at a general hospital.

Once signed by the Governor, the bill would take effect immediately.

Also, on February 3, The Assembly Health Committee heard testimony on A-2882, which requires certain health benefits plans to include coverage for treatment at ambulatory surgical centers and surgical practices and prohibits riders to the contrary. There was no action taken on the bill.

In summary, the bill provides that health benefits plans to include coverage for treatment provided at ambulatory surgical centers and surgical practices, and to provide those benefits to the same extent as provided at other health care facilities. The bill also prohibits the Commissioner of Banking and Insurance from approving riders for coverage inconsistent with the requirements set forth in the bill.

As defined in the bill, an ambulatory surgical center means an ambulatory care facility that is licensed by the Department of Health and Senior Services to provide surgical and related services to individuals who come to the facility to receive services and depart from the facility on the same day. The term "surgical practice" means a structure or suite of rooms that is established by a physician, physician professional association surgical practice, or other professional practice solely for the physician's, association's or other professional entity's private medical practice.

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These facilities usually contain no more than one room that is used primarily to perform surgically-related procedures, and several rooms that are used for post-anesthesia care or recovery area where physicians and their staff can closely monitor and observe patients until they are discharged from the facility.

Currently, services that are provided at ambulatory surgical centers or surgical practices by out-of-network providers could be subject to caps or limitations through riders that may be approved by the Department of Banking and Insurance. The purpose of this bill is to make services performed at these facilities a basic component of health benefits plans and prohibit the department from issuing a rider to cap or limit services performed at these facilities to ensure that there is no discrimination in the way in which insurers, health service corporations and health maintenance organizations provide benefits for procedures performed at these facilities.

We will actively monitor the progress of these bills, and of all other legislation of interest to the Coalition, and will advise you promptly of all developments.

Christie won't join NJ to lawsuit opposing Prez healthcare reform

By Max Pizarro, PolitickerNJ

LINCOLN PARK - Minus the soft shoe and burlesque and heavy on self-reflection, Gov. Chris Christie brought his stage act to this north country burgh this morning, where bumper stickers like "Obama: Impeach Him!" plaster the backs of the cars in the Police Athletic League (PAL) parking lot.

In the interest of cost-savings, he said he won't hitch New Jersey to a lawsuit filed by nearly 30 states against President Barack Obama's healthcare reform, which the governor opposes.

"No," the governor said in response to an audience member's question. "For once I would like the citizens of New Jersey to get a free ride. Other states are carrying the freight (of legal costs associated with the lawsuit)."

Morris County residents packed the gym to welcome their home county hero, former Freeholder Christie. Forty-five minutes before the event started, bundled-up cops motioned the cars forward on 202. Don't bother making the turn. Too many cars. Too few spaces.

Crafted as a people-power launch pad into his budget address a week from now and chock-full of shout-outs to conservative pundit George Will, an old eye poke at Senate President Steve Sweeney (D-West Deptford) in retreading last year's budget process and plenty of buildup rhetoric to

more friction between himself and the teachers' union, Christie took credit for budging President Barack Obama toward talking about "the big things" in the President's State of the Union address.

"I told Mary Pat, (we're making progress)," the governor joked in recalling his reaction to hearing Obama's speech two weeks after making the same comment.

However tough the coming days, Christie said he won't be planting a cot in the governor's office as he negotiates with Democrats.

"If you guys close the government, I'm getting in the black SUVs, I'm getting the state troopers, I'm ordering a pizza, I'm opening a beer and I'm watching the Mets," said the governor.

He also promised to amputate the hackneyed screen-shot ops of special interest faces from his speech. He told his advisors he doesn't want the predictable, requisite siren song notes grafted to his speech to appease various groups and emblematic power centers.

Targeting pension and healthcare benefits, Christie identified the most critical divide in New Jersey as that between "the people who get fringe benefits and the people who pay for them."

He kickstarted his war on the teachers' union, identifying per-pupil costs in Newark (\$24,000); Asbury Park (\$28,000); and nearly \$25,000 in

Members

NJPCAC consists of nearly 200 practicing urologists and scores of additional healthcare personnel including radiation oncologists, pathologists, nurses and administrative staff. NJPCAC's multi-specialty physician practices and The Stone Center of New Jersey touch virtually all portions of the state, having offices and caring for patients in 52 towns across the State.

Camden; 104,000 children trapped in 200 chronically failing schools. And yet the union wants more money to perpetuate the system as it stands.

The problem, said Christie, is "There is no reward for excellence and no consequence for failure."

He busted up the *Star-Ledger*, referring to a "psycho" story the paper of record ran last year trying to discern the roots of his anger at public education, and moments later celebrated the messaging of "any cable television news show," which now depict New Jersey, in

Christie's view, as a bluntly communicating state beyond the stereotypic confines of the *Jersey Shore* show and the *Sopranos*.

He lamented the unravelling of COAH (Council on Affordable Housing) reform, which he vetoed after being able to live with one of the early incarnation compromise bills.

"Assemblyman Green actually came up with a bill that is worse than what we have now," Christie said.

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