

HB1053/566086/1

BY: Health and Government Operations Committee

AMENDMENTS TO HOUSE BILL 1053  
(First Reading File Bill)

AMENDMENT NO. 1

On page 1, in line 9, after the first “certain” insert “application”; in the same line, after “fee,” insert “a certain participation fee,”; in line 13, after “Commission,” insert “that the proposed integrated community oncology center meets”; and in line 14, strike “qualifications;” and substitute “requirements; requiring that a certain number of certain applicants be approved before a certain program may begin; requiring that certain integrated community oncology centers be given a certain preference;”; and in line 22, after “care;” insert “prohibiting a certain health care practitioner from increasing the ordering of care beyond a certain volume and cost of services;”.

On page 2, in line 12, after “terms;” insert “requiring the Commission to include certain individuals in the composition of the clinical advisory workgroup; requiring the Commission to contract with a consultant to serve as the program review manager to perform certain duties;”.

AMENDMENT NO. 2

On page 6, in line 22, after “(H)” insert “(1)”; in lines 23 and 26, strike “(1)” and “(2)”, respectively, and substitute “(I)” and “(II)”, respectively; in line 25, strike “OR”; and in line 27, after “DIAGNOSIS” insert “; OR”

(III) BOARD-CERTIFIED OR BOARD-ELIGIBLE IN ANOTHER ONCOLOGY SPECIALTY RECOGNIZED BY THE AMERICAN BOARD OF MEDICAL SPECIALTIES.

(2) “ONCOLOGIST” DOES NOT INCLUDE A GENERAL UROLOGIST.”.

(Over)

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AMENDMENT NO. 3

On page 7, in line 18, strike “CASE MIX-ADJUSTED” and substitute “RISK-ADJUSTED”.

On page 8, in line 13, strike “; AND” and substitute “THAT PAYS FOR THE COST OF THE APPLICATION PROCESS AND IS SHARED EQUALLY BY ALL APPLICANTS WHO APPLY TO PARTICIPATE IN THE PROGRAM;”

**(3) A PARTICIPATION FEE:**

**(I) THAT IS SHARED EQUALLY BY THE INTEGRATED COMMUNITY ONCOLOGY CENTERS THAT ARE APPROVED BY THE COMMISSION; AND**

**(II) THAT PAYS THE COST OF THE COLLECTION AND REPORTING OF INFORMATION, THE EVALUATIONS, THE STUDIES, AND THE REPORTS REQUIRED UNDER THIS SUBTITLE; AND**”;

in line 14, strike “(3)” and substitute “(4)”; and in line 29, strike “APPLICANT” and substitute “PROPOSED INTEGRATED COMMUNITY ONCOLOGY CENTER”.

On page 9, in line 5, strike “A SHORTAGE OF” and substitute “LIMITED ACCESS TO”; in line 6, after “PRACTITIONERS” insert “AS DEFINED BY THE CLINICAL ADVISORY WORKGROUP”; and in line 23, strike “PHYSICIAN” and substitute “PATIENT”.

AMENDMENT NO. 4

On page 10, after line 3, insert:

**“(D) BEFORE THE PROGRAM MAY BEGIN, AT LEAST TWO APPLICANTS SHALL BE APPROVED TO PARTICIPATE IN THE PROGRAM AS FOLLOWS:**

**(1) AT LEAST ONE INTEGRATED COMMUNITY ONCOLOGY CENTER THAT IS OWNED WHOLLY BY AN ONCOLOGY GROUP PRACTICE; AND**

**(2) AT LEAST ONE INTEGRATED COMMUNITY ONCOLOGY CENTER THAT IS OWNED JOINTLY BY:**

**(i) AN ONCOLOGY GROUP PRACTICE THAT HAS AT LEAST A 50% OWNERSHIP INTEREST IN THE INTEGRATED COMMUNITY ONCOLOGY CENTER; AND**

**(ii) A HOSPITAL, A HOSPITAL SYSTEM, OR AN ACADEMIC MEDICAL CENTER THAT HAS THE REMAINDER OF THE OWNERSHIP INTEREST IN THE INTEGRATED COMMUNITY ONCOLOGY CENTER.**

**(E) WHEN APPROVING CENTERS TO PARTICIPATE IN THE PROGRAM, THE COMMISSION SHALL GIVE PREFERENCE TO PROPOSED INTEGRATED COMMUNITY ONCOLOGY CENTERS THAT DEMONSTRATE THE ABILITY TO SERVE PATIENTS IN:**

**(1) MARKETS WITH LIMITED CONSUMER CHOICES IN RADIATION THERAPY PROVIDERS;**

**(2) MEDICALLY UNDERSERVED AREAS; OR**

**(3) AREAS OF THE STATE WITH LIMITED ACCESS TO PRIMARY CARE HEALTH PRACTITIONERS AS DEFINED BY THE CLINICAL ADVISORY WORKGROUP.”.**

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AMENDMENT NO. 5

On page 11, in line 9, strike the second “OR”; and in line 11, after “NECESSARY” insert “; OR

**(III) INCREASE THE ORDERING OF CARE BEYOND THE VOLUME AND COST OF SERVICES PROVIDED BY OTHER PROVIDERS OF SIMILAR SERVICES IN SIMILAR SETTINGS**”.

On page 12, in line 9, strike the second “OR”; and in line 11, after “NECESSARY” insert “; OR

**(III) THE INCREASE IN ORDERING OF CARE BEYOND THE VOLUME AND COST OF SERVICES PROVIDED BY OTHER PROVIDERS OF SIMILAR SERVICES IN SIMILAR SETTINGS**”.

AMENDMENT NO. 6

On page 14, after line 4, insert:

“SECTION 2. AND BE IT FURTHER ENACTED, That the Maryland Health Care Commission shall include the following members in the clinical advisory workgroup established under § 1-3B-03(b) of the Health Occupations Article, as enacted by Section 1 of this Act:

- (1) one representative of the Office of the Attorney General;
- (2) one physician who is board-certified or board-eligible in an oncology specialty recognized by the American Board of Medical Specialties;
- (3) one provider of oncology services in the State;
- (4) one representative of a hospital in the State;

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(5) one representative of the health insurance industry in the State;

(6) one representative of the Health Services Cost Review Commission;

and

(7) any other members as determined by the Commission to be beneficial in carrying out the functions of the workgroup.

SECTION 3. AND BE IT FURTHER ENACTED, That the Maryland Health Care Commission shall select a consultant to serve as the program review manager to collect clinical, administrative, and patient satisfaction information and conduct the studies and reports using this information and other data as required by Section 1 of this Act.”;

and in line 5, strike “2.” and substitute “4.”.