

(3) A HEALTH CARE PRACTITIONER WITH A BENEFICIAL INTEREST IN A HEALTH CARE ENTITY WHO REFERS A PATIENT TO THAT HEALTH CARE ENTITY FOR HEALTH CARE SERVICES OR TESTS, IF THE SERVICES OR TESTS ARE PERSONALLY PERFORMED BY OR UNDER THE DIRECT SUPERVISION OF THE REFERRING HEALTH CARE PRACTITIONER;

(4) A HEALTH CARE PRACTITIONER WHO REFERS IN-OFFICE ANCILLARY SERVICES OR TESTS THAT ARE:

(I) PERSONALLY FURNISHED BY:

1. THE REFERRING HEALTH CARE PRACTITIONER;
2. A HEALTH CARE PRACTITIONER IN THE SAME GROUP PRACTICE AS THE REFERRING HEALTH CARE PRACTITIONER; OR
3. AN INDIVIDUAL WHO IS EMPLOYED AND PERSONALLY SUPERVISED BY THE QUALIFIED REFERRING HEALTH CARE PRACTITIONER OR A HEALTH CARE PRACTITIONER IN THE SAME GROUP PRACTICE AS THE REFERRING HEALTH CARE PRACTITIONER;

(II) PROVIDED IN THE SAME BUILDING WHERE THE REFERRING HEALTH CARE PRACTITIONER OR A HEALTH CARE PRACTITIONER IN THE SAME GROUP PRACTICE AS THE REFERRING HEALTH CARE PRACTITIONER FURNISHES SERVICES; AND

(III) BILLED BY:

1. THE HEALTH CARE PRACTITIONER PERFORMING OR SUPERVISING THE SERVICES; OR
2. A GROUP PRACTICE OF WHICH THE HEALTH CARE PRACTITIONER PERFORMING OR SUPERVISING THE SERVICES IS A MEMBER;

(5) A HEALTH CARE PRACTITIONER WHO HAS A BENEFICIAL INTEREST IN A HEALTH CARE ENTITY IF, IN ACCORDANCE WITH REGULATIONS ADOPTED BY THE SECRETARY:

(I) THE SECRETARY DETERMINES THAT THE HEALTH CARE PRACTITIONER'S BENEFICIAL INTEREST IS ESSENTIAL TO FINANCE AND TO PROVIDE THE HEALTH CARE ENTITY; AND

(II) THE SECRETARY, IN CONJUNCTION WITH THE HEALTH RESOURCES PLANNING COMMISSION, DETERMINES THAT THE HEALTH CARE ENTITY IS NEEDED TO ENSURE APPROPRIATE ACCESS FOR THE COMMUNITY TO THE SERVICES PROVIDED AT THE HEALTH CARE ENTITY;

(6) A HEALTH CARE PRACTITIONER EMPLOYED OR AFFILIATED WITH A HOSPITAL, WHO REFERS A PATIENT TO A HEALTH CARE ENTITY THAT IS OWNED OR CONTROLLED BY A HOSPITAL OR UNDER COMMON OWNERSHIP OR CONTROL WITH A HOSPITAL IF THE HEALTH CARE PRACTITIONER DOES NOT HAVE A DIRECT BENEFICIAL INTEREST IN THE HEALTH CARE ENTITY;