

(4) COMMUNICATING IN AN OPEN AND FREQUENT MANNER BETWEEN THE STAFF OR MEMBERS OF EACH COMMISSION AT ANY TIME.

(B) (1) THE COMMISSIONS SHALL JOINTLY SUBMIT AN ANNUAL REPORT TO THE FOLLOWING:

(I) THE GOVERNOR;

(II) THE SECRETARY OF HEALTH AND MENTAL HYGIENE; AND

(III) SUBJECT TO § 2-1312 OF THE STATE GOVERNMENT ARTICLE, THE GENERAL ASSEMBLY.

(2) THE REPORT SHALL DESCRIBE:

(I) SPECIFIC EFFORTS AND ACTIVITIES OF THE COMMISSIONS TO WORK IN A COOPERATIVE AND COORDINATED MANNER; AND

(II) RECOMMENDATIONS FOR INITIATIVES THAT REQUIRE ACTION BY THE EXECUTIVE OR LEGISLATIVE BRANCHES THAT ARE NECESSARY TO IMPLEMENT AND FACILITATE THE COORDINATION OF THE ACTIVITIES AND DUTIES OF THE COMMISSIONS.

(C) TO THE EXTENT APPROPRIATE, THE HEALTH RESOURCES PLANNING COMMISSION, THE HEALTH SERVICES COST REVIEW COMMISSION, AND THE HEALTH CARE ACCESS AND COST COMMISSION SHALL INVOLVE THE SECRETARY OF HEALTH AND MENTAL HYGIENE AND THE STATE INSURANCE COMMISSIONER IN ANY COORDINATED ACTIVITIES, MEETINGS, REPORTS, AND COMMUNICATIONS AMONG THE COMMISSIONS.

SECTION 3. AND BE IT FURTHER ENACTED, That the Laws of Maryland read as follows:

Article – Health – General

19-101.

(a) In Part I of this subtitle the following words have the meanings indicated.

(B) (1) "AMBULATORY SURGICAL FACILITY" MEANS ANY CENTER, SERVICE, OFFICE, FACILITY, OR OFFICE OF ONE OR MORE HEALTH CARE PRACTITIONERS OR A GROUP PRACTICE, AS DEFINED IN § 1-301 OF THE HEALTH OCCUPATIONS ARTICLE, THAT:

(I) HAS TWO OR MORE OPERATING ROOMS;

(II) OPERATES PRIMARILY FOR THE PURPOSE OF PROVIDING SURGICAL SERVICES TO PATIENTS WHO DO NOT REQUIRE OVERNIGHT HOSPITALIZATION; AND

(III) SEEKS REIMBURSEMENT FROM PAYORS AS AN AMBULATORY SURGICAL FACILITY.