

(II) "HEALTH CARE SERVICE" INCLUDES a medical service [under paragraph (3) of this subsection].

[(3)](4) "Medical service" means:

(i) Any of the following categories of health care services:

1. Medicine, surgery, gynecology, addictions;
2. Obstetrics;
3. Pediatrics;
4. Psychiatry;
5. Rehabilitation;
6. Chronic care;
7. Comprehensive care;
8. Extended care;
9. Intermediate care; or
10. Residential treatment; or

(ii) Any subcategory of the rehabilitation, psychiatry, comprehensive care, or intermediate care categories of health care services for which need is projected in the State health plan.

(5) "~~PRIMARY SERVICE AREA~~" MEANS:

~~(I) THE STATE POSTAL ZIP CODES FROM WHICH THE FIRST 60 PERCENT OF A HOSPITAL'S PATIENT DISCHARGE ORIGINATE DURING THE MOST RECENT 12 MONTH PERIOD, WHERE THE DISCHARGES FROM EACH ZIP CODE ARE ORDERED FROM LARGEST TO SMALLEST NUMBER OF DISCHARGES;~~

~~(II) POINT ZIP CODES PHYSICALLY WITHIN ANY OF THE ZIP CODES DESIGNATED IN SUBPARAGRAPH (I) OF THIS PARAGRAPH;~~

~~(III) THE STATE ZIP CODES PHYSICALLY CONTIGUOUS TO ANY ZIP CODES DESIGNATED IN SUBPARAGRAPH (I) OF THIS PARAGRAPH THAT PROVIDED 50 PERCENT OR MORE OF THE DISCHARGE TO THE HOSPITAL IN THE MOST RECENT 12 MONTH PERIOD; AND~~

~~(IV) FOR A MERGED ASSET SYSTEM, THE ZIP CODES ARE TABULATED SEPARATELY FOR EACH HOSPITAL, AND ALL ZIP CODES IDENTIFIED FOR EITHER ARE INCLUDED IN THE PRIMARY SERVICE AREA OF THE MERGED ASSET SYSTEM.~~

(b) The Commission may set an application fee for a certificate of need for HEALTH CARE facilities not assessed a user fee under § 19-122 of this subtitle.