C3 6lr0200

By: Chair, Health and Government Operations Committee (By Request -

Departmental - Insurance Administration, Maryland)

Introduced and read first time: February 10, 2006 Assigned to: Health and Government Operations

A BILL ENTITLED

4	4 % T	4 000	
1	AN	ACT	concerning

2 **Urgent Care Centers - Membership Programs - Regulation and Registration**

3	FOR the purpose	of providing	g for the reg	gulation by the	Maryland Insurance

- 4 Commissioner of certain membership programs; providing that an urgent care
- 5 center membership program is not insurance; requiring the registration of
- certain entities as urgent care centers selling membership programs in the 6
- State; providing for the application and renewal process for registration; 7
- 8 requiring certain entities to obtain a certain bond in certain circumstances;
- authorizing the Commissioner to deny a registration or refuse to renew, 9
- suspend, or revoke a registration under certain circumstances; prohibiting 10
- certain actions by an urgent care center that sells a membership program; 11
- 12 requiring certain disclosures to be made by a membership program in a certain
- 13 manner; requiring that a membership program provide certain evidence of
- 14 membership to a member; permitting an urgent care center membership
- 15 program to charge certain fees under a membership agreement; requiring a
- 16 member to receive certain reimbursement if the membership is terminated;
- 17 authorizing the Commissioner to take certain actions to enforce certain
- 18 provisions of law; providing for certain penalties; authorizing the Commissioner
- 19 to adopt certain regulations; defining certain terms; altering a certain
- 20 definition; providing for the application of this Act; and generally relating to
- membership programs and urgent care centers. 21
- 22 BY repealing and reenacting, with amendments,
- 23 Article - Insurance
- 24 Section 1-101(t)
- 25 Annotated Code of Maryland
- 26 (2003 Replacement Volume and 2005 supplement)
- 27 BY adding to
- 28 Article - Insurance
- 29 Section 14-601 through 14-612, inclusive, to be under the new subtitle "Subtitle
- 30 6. Urgent Care Center Membership Programs"
- 31 Annotated Code of Maryland

1	(2002 Replacement Volume and 2005 Supplement)						
2 3	 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows: 						
4			Article - Insurance				
5	1-101.						
6	(t) (1)	"Insurar	ace business" includes the transaction of:				
7 8	after it takes effect; an	(i) d	all matters pertaining to an insurance contract, either before or				
9 10	it.	(ii)	all matters arising from an insurance contract or a claim under				
11	(2)	"Insurar	ace business" does not include:				
12 13	property, or health ris	(I) ks; OR	pooling by public entities for self-insurance of casualty,				
14 15	OPERATED IN ACC	(II) CORDAN	AN URGENT CARE MEMBERSHIP PROGRAM REGISTERED AND NCE WITH TITLE 14, SUBTITLE 6 OF THIS ARTICLE.				
16			SUBTITLE 6. URGENT CARE CENTER MEMBERSHIP PROGRAMS.				
17	14-601.						
18 19	18 (A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS 19 INDICATED.						
20	(B) (1)	"HEAL"	TH CARE CENTER" MEANS A MEDICAL PRACTICE GROUP THAT:				
21		(I)	IS OPEN 7 DAYS EACH WEEK;				
22		(II)	IS OPEN AT LEAST 10 OR MORE HOURS EACH DAY;				
23 24	RECEIVE CARE;	(III)	DOES NOT REQUIRE AN APPOINTMENT FOR A PATIENT TO				
25 26	INSURANCE TO RE	(IV) ECEIVE	DOES NOT REQUIRE A PATIENT TO BE A MEMBER OR HAVE CARE;				
27		(V)	PROVIDES MEDICAL SERVICES;				
28 29	LICENSED BY THE	(VI) DEPAR	OFFERS ON-SITE LABORATORY SERVICES IN A LABORATORY TMENT OF HEALTH AND MENTAL HYGIENE;				
30 31	LICENSED BY THE	(VII) DEPAR	OFFERS ON-SITE RADIOLOGY SERVICES IN A LABORATORY TMENT OF HEALTH AND MENTAL HYGIENE; AND				

- 1 (VIII) OFFERS A BROAD ARRAY OF DIAGNOSTIC AND THERAPEUTIC 2 SERVICES.
- 3 (2) "HEALTH CARE CENTER" DOES NOT INCLUDE:
- 4 (I) A FACILITY OWNED BY A LICENSED HEALTH MAINTENANCE
- 5 ORGANIZATION;
- 6 (II) A FACILITY OWNED BY A HOSPITAL LICENSED UNDER THE 7 HEALTH GENERAL ARTICLE; OR
- 8 (III) A FREESTANDING AMBULATORY SURGICAL FACILITY AS 9 DEFINED IN THE HEALTH GENERAL ARTICLE.
- 10 (C) "MEDICAL SERVICES" MEANS THE DELIVERY OF PRIMARY CARE AND
- 11 DIAGNOSIS, OBSERVATION, TREATMENT, AND REHABILITATION OF MEDICAL
- 12 CONDITIONS THAT IS PROVIDED ON AN OUTPATIENT BASIS OUTSIDE OF A HOSPITAL
- 13 EMERGENCY DEPARTMENT.
- 14 (D) "MEMBER" MEANS AN INDIVIDUAL WHO IS ENROLLED IN A MEMBERSHIP 15 PROGRAM.
- 16 (E) "MEMBERSHIP AGREEMENT" MEANS AN AGREEMENT BETWEEN A
- 17 MEMBER AND AN URGENT CARE CENTER THAT ESTABLISHES THE TERMS OF THE
- 18 MEMBERSHIP PROGRAM.
- 19 (F) "MEMBERSHIP PROGRAM" MEANS A PROGRAM THAT PERMITS A MEMBER
- 20 TO ACCESS SPECIFIED MEDICAL SERVICES AS DESCRIBED IN THE MEMBERSHIP
- 21 AGREEMENT.
- 22 (G) "URGENT CARE CENTER" MEANS A PERSON THAT OWNS A HEALTH CARE
- 23 CENTER.
- 24 14-602.
- 25 (A) THE PURPOSE OF THIS SUBTITLE IS TO PERMIT REGISTERED URGENT
- 26 CARE CENTERS IN THE STATE TO PROVIDE MEDICAL SERVICES THROUGH A
- 27 MEMBERSHIP PROGRAM.
- 28 (B) A MEMBERSHIP PROGRAM IS NOT INSURANCE.
- 29 14-603.
- 30 (A) A PERSON MAY NOT ENTER INTO A MEMBERSHIP AGREEMENT IN THE
- 31 STATE UNLESS THE PERSON IS AN URGENT CARE CENTER THAT HAS REGISTERED
- 32 WITH THE COMMISSIONER.
- 33 (B) AN APPLICANT FOR REGISTRATION SHALL:
- 34 (1) FILE WITH THE COMMISSIONER AN APPLICATION ON THE FORM
- 35 THAT THE COMMISSIONER REQUIRES;

- 1 (2) PAY TO THE COMMISSIONER AN APPLICATION FEE AS SET BY THE 2 COMMISSIONER; AND
- 3 (3) EXCEPT AS PROVIDED IN § 14-604(E) OF THIS SUBTITLE, FILE WITH 4 THE COMMISSIONER EVIDENCE OF THE BOND REQUIRED UNDER § 14-604 OF THIS 5 SUBTITLE.
- 6 14-604.
- 7 (A) THE BOND REQUIRED FOR AN URGENT CARE CENTER THAT REGISTERS 8 UNDER THIS SUBTITLE MUST:
- 9 (1) PROVIDE PROTECTION TO THE MEMBERS OF THE MEMBERSHIP 10 PROGRAM AGAINST THE LOSS OF UNEARNED MEMBERSHIP FEES COLLECTED BY 11 THE URGENT CARE CENTER; AND
- 12 (2) BE ISSUED BY AN AUTHORIZED CORPORATE SURETY INSURER THAT 13 IS AN ACCEPTABLE SURETY ON FEDERAL BONDS UNDER AUTHORITY GRANTED BY 14 THE SECRETARY OF THE TREASURY.
- 15 (B) (1) IN DETERMINING THE AMOUNT OF THE BOND, THE URGENT CARE 16 CENTER SHALL CONSIDER:
- 17 (I) THE ESTIMATED AVERAGE AMOUNT OF MEMBERSHIP FEES TO 18 BE COLLECTED BY THE URGENT CARE CENTER IN A YEAR; AND
- 19 (II) THE AVERAGE AMOUNT OF MEMBERSHIP FEES COLLECTED BY 20 THE URGENT CARE CENTER IN THE PREVIOUS YEAR.
- 21 (2) THE AMOUNT OF THE BOND MAY NOT BE LESS THAN \$2,500 AND 22 NEED NOT BE MORE THAN \$500,000.
- 23 (C) SUBJECT TO APPROVAL BY THE COMMISSIONER, THE AMOUNT OF THE
- 24 BOND SHALL BE DETERMINED AT THE TIME AN APPLICATION FOR REGISTRATION OR
- 25 RENEWAL OF REGISTRATION IS FILED.
- 26 (D) SUBJECT TO APPROVAL BY THE COMMISSIONER, THE BOND MAY BE AN
- 27 INDIVIDUAL BOND OR A BLANKET BOND THAT COVERS A GROUP OR CLASS.
- 28 (E) THE COMMISSIONER MAY WAIVE THE REQUIREMENT FOR AN APPLICANT
- 29 TO FILE EVIDENCE OF A BOND AS A CONDITION OF REGISTRATION OR RENEWAL OF
- 30 REGISTRATION IF THE COMMISSIONER FINDS THAT OTHER ARRANGEMENTS,
- 31 INCLUDING PROVIDING LETTERS OF CREDIT OR SIMILAR INSTRUMENTS, WOULD BE
- 32 ADEQUATE TO PROTECT THE INTERESTS OF MEMBERS.
- 33 14-605.
- 34 (A) A REGISTRATION EXPIRES ON THE SECOND JUNE 30 AFTER ITS EFFECTIVE
- 35 DATE UNLESS IT IS RENEWED AS PROVIDED IN THIS SECTION.

- 1 (B) BEFORE A REGISTRATION EXPIRES, THE REGISTRANT MAY RENEW IT FOR 2 AN ADDITIONAL 2-YEAR TERM, IF THE REGISTRANT:
- 3 (1) OTHERWISE IS ENTITLED TO BE REGISTERED;
- 4 (2) FILES WITH THE COMMISSIONER A RENEWAL APPLICATION ON THE 5 FORM THAT THE COMMISSIONER REQUIRES;
- 6 (3) EXCEPT AS PROVIDED IN § 14-604(E) OF THIS SUBTITLE, FILES WITH
- 7 THE COMMISSIONER EVIDENCE OF THE BOND REQUIRED UNDER \S 14-604 OF THIS
- 8 SUBTITLE; AND
- 9 (4) PAYS TO THE COMMISSIONER A RENEWAL FEE OF \$50.
- 10 (C) AN APPLICATION FOR RENEWAL OF A REGISTRATION SHALL BE
- 11 CONSIDERED MADE IN A TIMELY MANNER IF IT IS POSTMARKED ON OR BEFORE
- 12 JUNE 30 OF THE YEAR OF RENEWAL.
- 13 (D) SUBJECT TO § 14-606 OF THIS SUBTITLE, THE COMMISSIONER SHALL
- 14 RENEW THE REGISTRATION OF EACH REGISTRANT THAT MEETS THE
- 15 REQUIREMENTS OF THIS SECTION.
- 16 14-606.
- 17 (A) SUBJECT TO THE HEARING PROVISIONS OF TITLE 2 OF THIS ARTICLE, THE
- 18 COMMISSIONER MAY DENY A REGISTRATION TO AN APPLICANT OR REFUSE TO
- 19 RENEW, SUSPEND, OR REVOKE THE REGISTRATION OF A REGISTRANT IF THE
- 20 APPLICANT OR REGISTRANT, OR AN OFFICER, DIRECTOR, OR EMPLOYEE OF THE
- 21 APPLICANT OR REGISTRANT:
- 22 (1) MAKES A MATERIAL MISSTATEMENT OR MISREPRESENTATION IN AN
- 23 APPLICATION FOR REGISTRATION;
- 24 (2) FRAUDULENTLY OR DECEPTIVELY OBTAINS OR ATTEMPTS TO
- 25 OBTAIN A REGISTRATION FOR THE APPLICANT OR REGISTRANT OR FOR ANOTHER;
- 26 (3) IS CONVICTED OF A FELONY OR OF A MISDEMEANOR INVOLVING
- 27 MORAL TURPITUDE;
- 28 (4) IN CONNECTION WITH THE ADMINISTRATION OF AN MEMBERSHIP
- 29 PROGRAM, COMMITS FRAUD OR ENGAGES IN ILLEGAL OR DISHONEST ACTIVITIES;
- 30 (5) VIOLATES ANY PROVISION OF THIS SUBTITLE OR A REGULATION
- 31 ADOPTED UNDER IT;
- 32 (6) PROVIDES A FALSE, FALSELY DISPARAGING, OR MISLEADING ORAL
- 33 OR WRITTEN STATEMENT, VISUAL DESCRIPTION, OR OTHER REPRESENTATION OF
- 34 ANY KIND THAT HAS THE CAPACITY, TENDENCY, OR EFFECT OF DECEIVING OR
- 35 MISLEADING CONSUMERS;

- 1 (7) MAKES A REPRESENTATION THAT AN MEMBERSHIP PROGRAM HAS A 2 SPONSORSHIP, APPROVAL, CHARACTERISTIC, USE, OR BENEFIT THAT IT DOES NOT 3 HAVE;
- 4 (8) FAILS TO MAINTAIN LICENSURE OF THE RADIOLOGY LABORATORY 5 OF THE HEALTH CARE CENTER BY THE DEPARTMENT OF HEALTH AND MENTAL 6 HYGIENE;
- 7 (9) FAILS TO MAINTAIN LICENSURE OF THE LABORATORY OF THE 8 HEALTH CARE CENTER BY THE DEPARTMENT OF HEALTH AND MENTAL HYGIENE; OR
- 9 (10) VIOLATES § 13-301 OF THE COMMERCIAL LAW ARTICLE.
- 10 (B) THIS SECTION DOES NOT LIMIT ANY REGULATORY POWER OF THE 11 COMMISSIONER UNDER TITLE 2 OF THIS ARTICLE.
- 12 14-607.
- 13 (A) AN URGENT CARE CENTER THAT SELLS A MEMBERSHIP PROGRAM MAY 14 NOT:
- 15 (1) ENTER INTO A MEMBERSHIP AGREEMENT WITH A SMALL EMPLOYER 16 AS DEFINED IN § 15-1201 OF THIS ARTICLE ON BEHALF OF THE EMPLOYEES OF THE 17 SMALL EMPLOYER; OR
- 18 (2) ACCEPT PAYMENT FOR MEMBERSHIP PROGRAMS FROM A SMALL 19 EMPLOYER THAT ALLOWS ITS EMPLOYEES TO PAY FOR MEMBERSHIP PROGRAMS 20 THROUGH PAYROLL DEDUCTIONS.
- 21 (B) AN URGENT CARE CENTER THAT PROVIDES SERVICES TO A MEMBER 22 UNDER A MEMBERSHIP AGREEMENT MAY NOT RECEIVE REIMBURSEMENT FROM A 23 THIRD PARTY PAYOR FOR THOSE SAME SERVICES.
- 24 (C) AN URGENT CARE CENTER THAT SELLS A MEMBERSHIP PROGRAM MAY 25 NOT:
- 26 (1) USE IN ITS ADVERTISEMENTS, MARKETING MATERIAL, BROCHURES, 27 AND MEMBERSHIP CARDS THE TERM "INSURANCE" EXCEPT:
- 28 (I) WHEN COMPARING THE MEMBERSHIP PROGRAM TO
 29 INSURANCE OR OTHERWISE DISTINGUISHING THE MEMBERSHIP PROGRAM FROM
 30 INSURANCE; OR
- 31 (II) AS OTHERWISE PROVIDED IN THIS SUBTITLE;
- 32 (2) USE IN ITS ADVERTISEMENTS, MARKETING MATERIAL, BROCHURES,
- 33 AND MEMBERSHIP CARDS THE TERMS "HEALTH PLAN", "COVERAGE", "CO-PAY",
- 34 "CO-PAYMENTS", "PREEXISTING CONDITIONS", "GUARANTEED ISSUE", "PREMIUM",
- 35 "PPO", "PREFERRED PROVIDER ORGANIZATION", OR OTHER TERMS, IN A CONTEXT

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33 CARE CENTER.

1 THAT COULD REASONABLY MISLEAD A PERSON INTO BELIEVING THE MEMBERSHIP 2 PROGRAM WAS HEALTH INSURANCE; OR REFUSE TO MODIFY A MEMBER'S METHOD OF PAYMENT ON 4 REQUEST, UNLESS A SPECIFIC METHOD OF PAYMENT IS REQUIRED AS A TERM OF 5 THE MEMBERSHIP AGREEMENT AND WAS AGREED TO IN WRITING IN ADVANCE BY 6 THE MEMBER. 7 14-608. THE FOLLOWING DISCLOSURES SHALL BE MADE IN WRITING IN AT LEAST 12 9 POINT TYPE WITH EACH ENROLLMENT FORM: 10 (1) A STATEMENT THAT THE MEMBERSHIP PROGRAM IS NOT 11 INSURANCE: A CLEAR STATEMENT OF THE SERVICES THAT THE HEALTH CARE 12 (2) 13 CENTER PROVIDES TO MEMBERS OF THE MEMBERSHIP PROGRAM; THE NAME, LOCATION, AND CONTACT INFORMATION, INCLUDING A 15 TELEPHONE NUMBER, FOR THE MEMBERSHIP PROGRAM; THE LIMITS ON THE AVAILABILITY OF HOSPITALIZATION OR 16 (4) 17 SPECIALTY CARE AVAILABLE THROUGH THE MEMBERSHIP PROGRAM; THE INITIATION FEE, PERIODIC MEMBERSHIP FEE, AND 18 19 DISHONORED CHECK FEE THAT WILL BE CHARGED UNDER THE MEMBERSHIP 20 PROGRAM: AND 21 (6)ALL SERVICE FEES OR CHARGES FOR MEDICAL SERVICES TO BE 22 PROVIDED BY THE HEALTH CARE CENTER UNDER A MEMBERSHIP AGREEMENT. 23 14-609. AN URGENT CARE CENTER SHALL PROVIDE EACH MEMBER OR EACH 25 HOUSEHOLD OF MEMBERS WRITTEN EVIDENCE OF MEMBERSHIP IN THE 26 MEMBERSHIP PROGRAM AT THE TIME OF ENROLLMENT. 27 14-610. AN URGENT CARE CENTER MEMBERSHIP PROGRAM MAY ONLY CHARGE: 28 (A) 29 (1) AN INITIAL ENROLLMENT FEE;

A PERIODIC MEMBERSHIP FEE;

A DISHONORED CHECK FEE OF NOT MORE THAN \$25: AND

SERVICE FEES FOR MEDICAL SERVICES PROVIDED BY THE HEALTH

- 1 (B) A MEMBERSHIP AGREEMENT SHALL ALLOW A MEMBER TO CANCEL 2 ENROLLMENT IN A MEMBERSHIP PROGRAM AT ANY TIME.
- 3 (C) IF A MEMBER CANCELS ENROLLMENT IN A MEMBERSHIP PROGRAM, THE
- 4 URGENT CARE CENTER THAT SOLD THE MEMBERSHIP PROGRAM SHALL REFUND TO
- 5 THE MEMBER ALL UNEARNED MEMBERSHIP FEES.
- 6 (D) A MEMBERSHIP AGREEMENT TERMINATES ON THE LAST DAY OF THE
- 7 CALENDAR MONTH IN WHICH NOTICE OF CANCELLATION IS RECEIVED BY THE
- 8 URGENT CARE CENTER.
- 9 (E) UNEARNED MEMBERSHIP FEES SHALL BE CALCULATED ON A PRO RATA 10 BASIS.
- 11 (F) IF A MEMBER'S ENROLLMENT IN A MEMBERSHIP PROGRAM TERMINATES
- 12 BECAUSE OF A FAILURE TO PAY THE MEMBERSHIP FEE. THE URGENT CARE CENTER
- 13 SHALL REINSTATE THE MEMBER WITHOUT FINANCIAL PENALTY OR CHARGING A
- 14 NEW INITIAL ENROLLMENT FEE IF:
- 15 (1) THE URGENT CARE CENTER HAS RECEIVED WITHIN 7 DAYS AFTER
- 16 TERMINATION A WRITTEN REQUEST FROM THE MEMBER TO BE REINSTATED; AND
- 17 (2) THE MEMBER TENDERS PAYMENT FOR ALL OUTSTANDING FEES
- 18 WHICH ARE DUE AND ALLOWABLE UNDER SUBSECTION (A) OF THIS SECTION.
- 19 14-611.
- 20 (A) TO ENFORCE THIS SUBTITLE AND ANY REGULATION ADOPTED UNDER IT,
- 21 THE COMMISSIONER MAY ISSUE AN ORDER:
- 22 (1) THAT REQUIRES THE VIOLATOR TO CEASE AND DESIST FROM THE
- 23 IDENTIFIED VIOLATION AND FURTHER SIMILAR VIOLATIONS:
- 24 (2) THAT REQUIRES THE VIOLATOR TO TAKE SPECIFIC AFFIRMATIVE
- 25 ACTION TO CORRECT THE VIOLATION; AND
- 26 (3) THAT REQUIRES THE VIOLATOR TO PAY RESTITUTION TO A MEMBER.
- 27 (B) (1) AN ORDER OF THE COMMISSIONER ISSUED UNDER THIS SECTION
- 28 MAY BE SERVED ON A VIOLATOR THAT IS REGISTERED UNDER THIS SUBTITLE IN THE
- 29 MANNER PROVIDED IN TITLE 2 OF THIS ARTICLE.
- 30 (2) AN ORDER OF THE COMMISSIONER ISSUED UNDER THIS SECTION
- 31 MAY BE SERVED ON A VIOLATOR THAT IS NOT REGISTERED UNDER THIS SUBTITLE IN
- 32 THE MANNER PROVIDED FOR SERVICE ON AN UNAUTHORIZED INSURER THAT DOES
- 33 AN ACT OF INSURANCE BUSINESS IN TITLE 4, SUBTITLE 2 OF THIS ARTICLE.
- 34 (3) A REQUEST FOR A HEARING ON ANY ORDER ISSUED UNDER THIS
- 35 SUBSECTION DOES NOT STAY THAT PART OF THE ORDER THAT REQUIRES THE
- 36 VIOLATOR TO CEASE AND DESIST FROM CONDUCT IDENTIFIED IN THE ORDER.

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- 1 (4) THE COMMISSIONER MAY FILE A PETITION IN THE CIRCUIT COURT
- 2 OF ANY COUNTY TO ENFORCE AN ORDER ISSUED UNDER THIS SECTION, WHETHER
- 3 OR NOT A HEARING HAS BEEN REQUESTED OR, IF REQUESTED, WHETHER OR NOT A
- 4 HEARING HAS BEEN HELD.
- 5 (5) IN AN ACTION BROUGHT BY THE COMMISSIONER UNDER THIS
- 6 SECTION, THE COMMISSIONER MAY RECOVER FOR THE USE OF THE STATE
- 7 REASONABLE ATTORNEY'S FEES AND THE COSTS OF THE ACTION.
- 8 (C) (1) IN ADDITION TO ANY OTHER ENFORCEMENT ACTION TAKEN BY THE
- 9 COMMISSIONER UNDER THIS SECTION, THE COMMISSIONER MAY IMPOSE A CIVIL
- 10 PENALTY OF NOT MORE THAN \$10,000 FOR EACH VIOLATION OF THIS SUBTITLE.
- 11 (2) NOTWITHSTANDING PARAGRAPH (1) OF THIS SUBSECTION, THE
- 12 COMMISSIONER MAY IMPOSE A CIVIL PENALTY OF NOT MORE THAN \$1,000 PER DAY
- 13 FOR EACH DAY THAT A PERSON IS IN VIOLATION OF § 14-606 OF THIS SUBTITLE.
- 14 (D) THIS SECTION DOES NOT LIMIT ANY REGULATORY POWER OF THE
- 15 COMMISSIONER UNDER THIS ARTICLE.
- 16 14-612.
- 17 THE COMMISSIONER MAY ADOPT REGULATIONS TO CARRY OUT THIS SUBTITLE.
- 18 SECTION 2. AND BE IT FURTHER ENACTED, That the Maryland
- 19 Insurance Administration shall begin accepting applications for registrations from
- 20 Urgent Care Centers on January 1, 2007.
- 21 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take
- 22 effect October 1, 2006.