Health and Safety Code) from accounts within the Cigarette and Tobacco Products Surtax Fund (commencing with Section 30122 of the Revenue and Taxation Code) as follows:

- (1) Nine million fifteen thousand dollars (\$9,015,000) from the Hospital Services Account within the Cigarette and Tobacco Products Surtax Fund;
- (2) Two million three hundred twenty-eight thousand dollars (\$2,328,000) from the Physician Services Account within the Cigarette and Tobacco Products Surtax Fund;
- (3) Thirteen million four hundred sixty thousand dollars (\$13,460,000) from the Unallocated Account within the Cigarette and Tobacco Products Surtax Fund
- (b) This transfer shall be made on June 30 of the first fiscal year following adoption of this Act, and on June 30 each fiscal year thereafter.
- (c) Nothing in this section shall preclude the Legislature from making additional appropriations from any source for the benefit of the Emergency and Trauma Physician Unpaid Account.

Section 16950.3 of Article 3, Chapter 5, Part 4.7 of Division 9 of the Welfare and Institutions Code is added to read:

§16950.3(a) An amount, equal to the amount allocated by the Department of Health Services pursuant to Item 4260-111-0001 (16) of Chapter 157 of the Statutes of 2003 (six million seven hundred fifty six thousand dollars (\$6,756,000), shall be transferred and credited to the state account, created pursuant to Revenue and Taxation Code section 41135(d), to be used only for reimbursement of community clinic uncompensated primary care as provided in Chapter 7 of Part 4 of Division 106 of the Health and Safety Code (commencing with Section 124900) from the unallocated account within the Cigarette and Tobacco Products Surtax Fund (commencing with Section 30122 of the Revenue and Taxation Code).

- (b) This transfer shall be made on June 30 of the first fiscal year following adoption of this Act, and on June 30 each fiscal year thereafter.
- (c) Nothing in this section shall preclude the Legislature from making additional appropriations from any source for the benefit of the state account, created pursuant to Revenue and Taxation Code section 41135(d).

Sections 16951, 16952, 16953, 16953.1, 16953.2, 16953.3, 16955, 16955.1, 16956, 16957, 16958, 16959 of Article 3.5 of Division 9 of the Welfare and Institutions Code are repealed.

§ 16951. As a condition of receiving funds pursuant to this chapter, each county shall establish an emergency medical services fund as authorized by subdivision (a) of Section 1797.98 of the Health and Safety Code. This section shall not be interpreted to require any county to impose the assessment authorized by Section 1465 of the Penal Code.

- § 16952(a)(1) Each county shall establish within its emergency medical services fund a Physician Services Account those funds appropriated by the Legislature for the purposes of the Physician Services Account of the fund.
- (2)(A) Each county may encumber sufficient funds to reimburse physician losses incurred during the fiscal year for which bills will not be received until after the fiscal year.
- (B) Each county shall provide a reasonable basis for its estimate of the necessary amountencumbered.
- (C) All funds which are encumbered for a fiscal year shall be expended or disencumbered prior to the submission of the report of actual expenditures required by Sections 16938 and 16980.
- (b) Funds deposited in the Physician Services Account in the county emergency medical services fund shall be exempt from the percentage allocations set forth in subdivision (a) of Section 1797.98. However, funds in the county Physician Services Account shall not be used to reimburse for physician services provided by physicians employed by county hospitals.

No physician who provides physician services in a primary care clinic which receives funds from this act shall be eligible for reimbursement from the Physician Services Account for any losses incurred in the provision of those services.

- (c) The county physician services account shall be administered by each county, except that a county electing to have the state administer its medically indigent adult program as authorized by Section 16809, may also elect to have its county physician services account administered by the state in accordance with Section 16954.
- (d) Costs of administering the account shall be reimbursed by the account, up to 10 percent of the account.
- (e) For purposes of this article "administering agency" means the agency designated by the board of supervisors to administer this article, or the department, in the case of those CMSP counties electing to have the state administer this article on their behalf.
- (f) The county Physician Services Account shall be used to reimburse physicians for losses incurred for services provided during the fiscal year of allocation due to patients who cannot afford to pay for those services, and for whom payment will not be made through any private coverage or by any program funded in whole or in part by the federal government.
- (g)(1) Reimbursement for losses shall be limited to emergency services as defined in Section 16953, obstetric, and pediatric services as defined in Sections 16905.5 and 16907.5, respectively.
- (2) It is the intent of this subdivision to allow reimbursement for all of the following:

- (A) All inpatient and outpatient obstetric services which are medically necessary, as determined by the attending physician.
- (B) All inpatient and outpatient pediatric services which are medically necessary, as determined by the attending physician.
- (h) No physician shall be reimbursed for more than 50 percent of the losses submitted to the administering agency.
- § 16953(a) For purposes of this chapter "emergency services" means physician services in one of the following:
- (1) A general acute care hospital which provides basic or comprehensive emergency services for emergency medical conditions.
- (2) A site which was approved by a county prior to January 1, 1990, as a paramedic receiving station for the treatment of emergency patients, for emergency medical conditions.
- (3) Beginning in the 1991-92 fiscal year and each fiscal year thereafter, in a facility which contracted prior to January 1, 1990, with the National Park Service to provide emergency medical services, for emergency medical conditions.
- (4) A standby emergency room in a hospital specified in Section 124840 of the Health and Safety Code, for emergency medical conditions.
- (b) For purposes of this chapter, "emergency medical condition" means a medical condition manifesting itself by acute symptoms of sufficient severity, including severe pain, which in the absence of immediate medical attention could reasonably be expected to result in any of the following:
- (1) Placing the patient's health in serious jeopardy.
- (2) Serious impairment to bodily functions.
- (3) Serious dysfunction to any bodily organ or part.
- (e) It is the intent of this section to allow reimbursement for all inpatient and outpatient services which are necessary for the treatment of an emergency medical condition as certified by the attending physician or other appropriate provider.
- § 16953.1. Notwithstanding any other provision of this chapter, an emergency physician and surgeon, or an emergency physician group, with a gross billings arrangement with a hospital shall be entitled to receive reimbursement from the physician services account in the county's emergency medical services fund for services provided in that hospital, if all of the following conditions are met: