§ 4708. Shared health facilities; prohibited practices; administrative requirements. With regard to shared health facilities: 1. The rental fee for letting of space to providers in a shared health facility shall not be calculated wholly or partially, directly or indirectly, as a percentage of earnings or billings of the provider for services rendered on the premises in which the shared health facility is located. The operator of each facility shall file a copy of each lease and any renewal thereof with the department;

2. No purveyor, whether or not located in a building which houses a shared health facility, shall directly or indirectly offer, pay or give to any provider, and no provider shall directly or indirectly solicit, request, receive or accept from any purveyor any sum of money, credit or other valuable consideration for:

(a) recommending or procuring goods, services or equipment of such purveyor, or

(b) directing patronage or clientele to such purveyor, or

(c) influencing any person to refrain from using or utilizing goods, services or equipment of any purveyor;

3. No provider or purveyor may demand or collect any compensation in excess of the fee specified in the fee schedule of the program;

4. No purveyor shall provide to a patient eligible to receive benefits under the provisions of the program any services, equipment, pharmaceutical or other medical supplies differing in quantity or in any other respect from that described in the payment invoice submitted by such purveyor to the department. No purveyor shall provide to any patient eligible to receive benefits under the provisions of the program any services, equipment, pharmaceutical or medical supplies differing in quality, quantity or in any other respect from that prescribed by the provider;

5. (a) No provider in a shared health facility or person employed in such facility shall refer a patient to another provider located in such facility unless there is a medical need for such referral and unless the records of the referring provider pertaining to such patient clearly

sets forth the justification for such referral;

(b) Every provider practicing in a shared health facility who treats a patient referred to him by another provider practicing in the same facility shall communicate in writing to the referring provider the diagnostic evaluation and the therapy rendered. The referring provider shall incorporate such information into the patient's permanent record;

(c) The invoice submitted to the program by the provider to whom such patient has been referred shall (i) contain the actual signature and provider number of the referring provider and (ii) identify the medical problem which necessitated the referral;

6. Any pharmacy maintaining a business in or adjacent to the building in which a shared health facility is located shall prominently post a notice informing patients that all pharmaceuticals prescribed in the program may be obtained at any pharmacy of the patient's choice enrolled in the program;

7. No purveyor who maintains a business in the building in which a shared health facility is located shall maintain a door or window opening into the offices or waiting room of the facility, except where the profession of the provider permits the provider to function simultaneously as a purveyor;

8. All provider invoices submitted for services rendered at a shared health facility shall: (a) contain the registration code of the facility at which the service was performed, (b) clearly identify the practitioner who provided the service, and (c) be signed by the provider only after the service has been performed;

9. All orders issued by providers for ancillary clinical services, including but not limited to, x-rays, electrocardiograms, clinical laboratory services, electroencephalograms, as well as orders for medical supplies and equipment, shall contain the code number assigned to the facility at which the order was written; and

10. Each provider or purveyor shall submit a true bill or invoice for services rendered in the program.