

1 S.31

2 Introduced by Senator Pearson

3 Referred to Committee on Health and Welfare

4 Date: January 18, 2019

5 Subject: Health; hospitals; patient rights; health insurance; surprise billing

6 Statement of purpose of bill as introduced: This bill proposes to require
7 hospitals to provide certain financial information to patients. It would also
8 prohibit surprise billing for emergency medical services provided out-of-
9 network and require health insurers to maintain up-to-date provider network
10 information on their websites.

11 ~~An act relating to requiring hospitals to provide certain financial~~
12 ~~information to patients and prohibiting surprise billing for emergency~~
13 ~~medical services.~~

An act relating to informed health care financial decision making

14 It is hereby enacted by the General Assembly of the State of Vermont:

15 ~~Sec. 1, 18 V.S.A. § 1852 is amended to read:~~

16 § 1852. PATIENTS' BILL OF RIGHTS; ADOPTION

17 (a) The General Assembly hereby adopts the "Bill of Rights for Hospital
18 Patients" as follows:

19

1 ~~(2) The failure of a hospital to comply with any provision of this section~~
2 ~~may constitute a deficiency in violation of the hospital's obligations under~~
3 ~~chapter 43 of this title. A complaint may be filed with the licensing agency or~~
4 ~~with the Department of Disabilities, Aging, and Independent Living's Division~~
5 ~~of Licensing and Protection.~~

6 (c) A summary of the hospital's obligations under this section, written in
7 clear language and in easily readable print, shall be distributed to patients upon
8 admission and posted conspicuously at each nurse's station. Such notice shall
9 also indicate that as an alternative or in addition to the hospital's complaint
10 procedures, the patient may directly contact the licensing agency, the
11 Department of Disabilities, Aging, and Independent Living's Division of
12 Licensing and Protection, or the Board of Medical Practice. The address and
13 telephone number of the licensing agency, the Division of Licensing and
14 Protection, and the Board of Medical Practice shall be included in the notice.

15 Sec. 2. 18 V.S.A. § 9417 is added to read:

16 § 9417. INSUREDS' FINANCIAL RIGHTS

17 (a) If an individual insured under a health insurance plan receives
18 emergency services from a health care provider that does not participate in the
19 health insurer's provider network, the plan shall ensure that the insured
20 individual incurs no greater out-of-pocket costs for the emergency services

1 ~~than the insured would have incurred if the services were provided by a health~~
2 ~~care provider that does participate in the health insurer's provider network.~~

3 (b) A health insurance plan shall maintain up-to-date information on its
4 website regarding which health care providers participate in its network.

5 Sec. 3. EFFECTIVE DATE

6 ~~This act shall take effect on July 1, 2019.~~

Sec. 1. 18 V.S.A. § 1852 is amended to read:

§ 1852. PATIENTS' BILL OF RIGHTS; ADOPTION

(a) The General Assembly hereby adopts the "Bill of Rights for Hospital Patients" as follows:

** * **

(12) The patient has the right to receive an itemized, detailed, and understandable explanation of charges, regardless of the source of payment, and to be provided with information about:

(A) health care prices;

(B) financial assistance; and

(C) billing and collections practices.

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Sec. 2. PRICE TRANSPARENCY; BILLING PROCESSES; REPORT

(a) ~~Building on its efforts pursuant to 2015 Acts and Resolves No. 54, Sec. 21, the~~ The Green Mountain Care Board, in consultation with interested stakeholders, shall examine health care price transparency initiatives in other states to identify possible options for making applicable health care pricing information readily available to consumers of health care services in this State to help inform their health care decision making.

(b) The Green Mountain Care Board, in consultation with interested stakeholders, shall consider and provide recommendations regarding potential financial procedures for health care services that would coordinate processes between hospitals and payers without requiring the patient's involvement and would provide patients who receive hospital services with a single, comprehensive bill that reflects the patient's entire, actual financial obligation.

(c) On or before November 15, 2019, the Green Mountain Care Board shall provide its findings and recommendations pursuant to subsections (a) and (b) of this section to the House Committee on Health Care, the Senate Committees on Health and Welfare and on Finance, and the Health Reform Oversight Committee.

Sec. 3. EFFECTIVE DATE

This act shall take effect on July 1, 2019.