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patient's request.

1	S.50
2	Introduced by Senator Cummings
3	Referred to Committee on
4	Date:
5	Subject: Health; health insurance; hospitals; COVID-19 testing
6	Statement of purpose of bill as introduced: This bill proposes to limit the
7	amount a health care provider may charge for a diagnostic test for the
8	coronavirus to twice the Medicare rate. It would prohibit a hospital from
9	imposing a lien on a patient injured in an accident without first billing and
10	accepting payment from the patient's health insurance and would prohibit the
11	hospital from balance billing the patient or from filing a lien for sums charged
12	in excess of the insurance reimbursement amounts. The bill would require all
13	Vermont hospitals to report wait times for their services to the Department of
14	Financial Regulation annually and would prohibit a hospital from placing any
15	limitations on its providers' discretion to refer a patient to another provider.
16	The bill would also require health care providers to submit their claims for
17	payment to an insurer or other payer within 60 days following the date of
18	service and would require a custodian of medical records to send a patient's

medical records to the patient or another provider within 10 days following the

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1	An act relating to patient access to and payment for health care services
2	It is hereby enacted by the General Assembly of the State of Vermont:
3	Sec. 1. 18 V.S.A. § 1140 is amended to read:
4	§ 1140. DEFINITIONS
5	As used in this subchapter:
6	* * *
7	(11) "Health insurer" has the same meaning as in section 9402 of this
8	title.
9	Sec. 2. 18 V.S.A. § 1142 is added to read:
10	§ 1142. CORONAVIRUS TESTING
11	A health care provider shall not charge a patient or the patient's health
12	insurer more than two times the Medicare reimbursement rate for a diagnostic
13	test for coronavirus.
14	Sec. 3. 18 V.S.A. § 2251 is amended to read:
15	§ 2251. LIEN ESTABLISHED
16	(a) A hospital in Vermont, as defined in section 1801 of this title,
17	furnishing medical or other service, including charges of private duty nurses, to
18	a patient injured by reason of an accident not covered by the Workers'
19	Compensation Act, 21 V.S.A. § 601 et seq., workers' compensation or by the
20	patient's health insurance. Medicare, or Medicaid shall have a lien upon any

recovery for damages to be received by the patient, or by his or her the

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December.

1	patient's heirs or personal representatives in the case of his or her the patient's
2	death, whether by judgment or by settlement or compromise after the date of
3	the services. This lien shall not attach to one-third of the recovery or \$500.00,
4	whichever shall be the lesser, and in addition the lien shall be subordinate to an
5	attorney's lien.
6	(b) A hospital shall bill and accept payment through a patient's health
7	insurance, Medicaid, or Medicare coverage prior to seeking payment through a
8	lien. A hospital shall not seek payments directly from the patient or through a
9	lien for amounts in excess of the reimbursement rates set by the patient's
10	health insurance coverage, Medicaid, or Medicare.
11	(c) As used in this section, "health insurance" means a health insurance
12	policy or other health benefit plan offered by a health insurer, as that term is
13	defined in section 9402 of this title.
14	Sec. 4. 18 V.S.A. § 9406 is added to read:
15	§ 9406. ACCESS TO HOSPITAL SERVICES
16	(a) On or before February 1 annually, each hospital shall report to the
17	Department of Financial Regulation the average wait time for an appointment
18	with a provider in each of the 50 most frequently used specialties offered by
19	the hospital during the previous year, with wait times calculated and reported
20	separately for the periods from January through June and from July through

1	(b) A hospital shall not place any limitations on the discretion of its
2	employed or affiliated providers to refer a patient, formally or informally, to
3	any another provider, regardless of whether a referral is to a provider who is
4	not employed by or affiliated with the hospital.
5	Sec. 5. 18 V.S.A. § 9418 is amended to read:
6	§ 9418. PAYMENT FOR HEALTH CARE SERVICES
7	* * *
8	(n) A health care provider shall submit all claims for payment to the payer
9	within 60 days following the date of service.
10	Sec. 6. 18 V.S.A. § 9419 is amended to read:
11	§ 9419. CHARGES FOR PATIENT ACCESS TO MEDICAL RECORDS
12	(a) Upon request of a patient, a custodian shall send all or a requested
13	portion of a patient's medical records to the patient or to any health care
14	provider specified by the patient within 10 business days following the request.
15	(b) A custodian may impose a charge that is no not more than a flat \$5.00
16	fee or not more than \$0.50 per page, whichever is greater, for providing
17	copies of an individual's health care record. A custodian shall provide an
18	individual or the authorized recipient with an itemized bill for the charges
19	assessed. A custodian shall not charge for providing copies of any health care
20	record requested to support a claim or an appeal under any provision of the

1	Social Security Act or for any other federal or State needs-based benefit or
2	program.
3	(b)(c) A custodian may charge an individual a fee, reasonably related to the
4	associated costs, for providing copies of X-rays, films, models, disks, tapes, or
5	other health care record information maintained in other formats.
6	(c)(d) As used in this section:
7	(1) "Custodian" means any person who maintains health care
8	information for any lawful purpose, including a health care provider, a health
9	care facility, or a health insurer.
10	(2) "Health care record" means all written and recorded health care
11	information about an individual maintained by a custodian.
12	(3) "Individual" means a natural person, alive or dead, who is the
13	subject of health care information and includes, when appropriate, the
14	individual's attorney-in-fact; legal guardian; health care agent, as defined in
15	chapter 231 of this title; executor; or administrator.
16	Sec. 7. EFFECTIVE DATE
17	This act shall take effect on July 1, 2023.