HOUSE SUMMARY OF SENATE AMENDMENTS

HB 435 2017 Regular Session Talbot

INSURANCE/HEALTH: Requires a healthcare facility to provide notice of balance billing

Synopsis of Senate Amendments

1. Requires a healthcare facility to disclose to a patient receiving services in a hospital-based outpatient facility that the patient may be charged a fee for use of the facility that is not included in the healthcare provider's bill, and that this fee may not be covered by the patient's health insurance.

Digest of Bill as Finally Passed by Senate

<u>Present law</u> requires that a healthcare facility provide a written notice to a patient regarding the possible provision of services to a patient by facility-based providers who are out-of-network providers. <u>Present law</u> further requires that the patient be informed in the written notice that the patient may be responsible for all or part of the fees for out-of-network services. <u>Proposed law</u> rewrites the notice to clarify what balance billing is and that the patient will be responsible for charges by those out-of-network providers.

<u>Proposed law</u> requires that the patient sign a copy of the balance billing notice provided to him which the facility is responsible for maintaining in the patient's records on-site.

<u>Present law</u> requires that a healthcare facility provide a patient upon request with the name and contact information for providers who are contracted to provide services at the facility, and inform the patient that he may request information from his insurer as to whether those providers are in-network or out-of-network, and under what circumstances the patient may be responsible for payment of amounts not paid by the insurer. <u>Proposed law</u> requires the facility to provide this information to the patient.

<u>Proposed law</u> requires that a healthcare facility provide notice when a patient is receiving services in a hospital-based outpatient facility that the patient may be charged a facility fee billed separately from the healthcare provider's fee, and that this facility fee may not be covered by the patient's health insurance.

<u>Proposed law</u> provides that <u>proposed law</u> will be enforced by the Department of Health and the commissioner of insurance.

(Amends R.S. 22:1880(C)(1) and (2); Adds R.S. 22:1880(C)(4) and (E))