

2018 Regular Session

HOUSE BILL NO. 824

BY REPRESENTATIVE TALBOT

INSURANCE/HEALTH: Provides relative to facility disclosure requirements

1 AN ACT

2 To amend and reenact R.S. 22:1880(C)(introductory paragraph) and (1), to enact R.S.
3 22:1880.1, and to repeal R.S. 22:1880(C)(4), relative to balance billing facility
4 disclosure requirements; to require a healthcare facility to provide a notice to
5 insureds of possible balance billing for services provided at a healthcare facility; to
6 require the posting of potential facility charges; and to provide for related matters.

7 Be it enacted by the Legislature of Louisiana:

8 Section 1. R.S. 22:1880(C)(introductory paragraph) and (1) are hereby amended and
9 reenacted and R.S. 22:1880.1 is hereby enacted to read as follows:

10 §1880. Balance billing disclosure

11 * * *

12 C. Facility disclosure requirements. Each healthcare facility shall do all of
13 the following:

14 (1) Provide a written notice ~~to an enrollee or insured at the first registration~~
15 ~~contact with the enrollee or insured at the healthcare facility regarding~~
16 ~~nonemergency services. A copy of the written notice shall be signed by the enrollee~~
17 ~~or insured and be maintained by the healthcare facility. The written notice shall~~
18 regarding nonemergency services to a patient whenever a healthcare facility provides
19 a notice of privacy practices pursuant to 45 CFR 164.520 to a patient for whom the
20 healthcare facility has knowledge that a contract with a health insurance issuer is

1 effective or upon the request of the patient. The written notice shall be signed by the
2 patient and disclose all of the following items:

3 * * *

4 §1880.1. Provider-based entity disclosure

5 If a facility meets the definition of a provider-based entity, as defined by 42
6 CFR 413.65, and the facility is located off of the main hospital campus, the facility
7 shall publicly post a notice to every patient disclosing the following:

8 (1) That the enrollee or insured is receiving services in a hospital-based
9 outpatient facility where the facility provides the use of the facility, medical, or
10 technical equipment, supplies, staff, and services.

11 (2) That depending on the enrollee's or insured's health insurance benefit plan
12 and the actual services furnished by the facility, the patient may receive a facility
13 charge billed separately from the physician that covers the fees for the use of the
14 facility, medical, or technical equipment, supplies, staff, and services.

15 Section 2. R.S. 22:1880(C)(4) is hereby repealed in its entirety.

DIGEST

The digest printed below was prepared by House Legislative Services. It constitutes no part of the legislative instrument. The keyword, one-liner, abstract, and digest do not constitute part of the law or proof or indicia of legislative intent. [R.S. 1:13(B) and 24:177(E)]

HB 824 Engrossed

2018 Regular Session

Talbot

Abstract: Requires a healthcare facility to provide a notice to a patient of the potential use of out-of-network providers when the federally required privacy notice is given.

Present law requires a healthcare facility, at the first registration contact with a patient, to provide a written notice to the patient regarding the possibility of services being rendered to the patient by facility-based providers who are out-of-network providers. Present law 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.

Proposed law requires the healthcare facility to provide the notice at the same time the facility provides the federally required notice of privacy practices for protected health information to a patient for whom the healthcare facility has knowledge that a contract with a health insurance issuer is effective or upon the request of the patient.

Present law requires a facility that meets the definition of a provider-based entity, as defined in federal regulation, and is located off of the main hospital campus to publicly post a notice to every patient disclosing the following:

- (1) That the enrollee or insured is receiving services in a hospital-based outpatient facility where the facility provides the use of the facility, medical, or technical equipment, supplies, staff, and services.
- (2) That depending on the enrollee's or insured's health insurance benefit plan and the actual services furnished by the facility, the patient may receive a facility charge billed separately from the physician that covers the fees for the use of the facility, medical, or technical equipment, supplies, staff, and services.

Proposed law retains present law but relocates present law to a new statutory cite.

(Amends R.S. 22:1880(C)(intro. para.) and (1); Adds R.S. 22:1880.1; Repeals R.S. 22:1880(C)(4))

Summary of Amendments Adopted by House

The Committee Amendments Proposed by House Committee on Insurance to the original bill:

1. Require the facility disclosure to be provided when the federally required privacy notice is given to the patient or upon request of the patient.
2. Relocate provisions of present law relative to facility fee disclosures.
3. Make technical changes.