

AMENDMENT #1

OFFERED IN THE HOUSE
TO: CSHB 123(HSS)

BY REPRESENTATIVE REINBOLD

1 Page 1, line 1:

2 Delete "services and" *(title change)*

3

4 Page 1, line 4, through page 3, line 15:

5 Delete all material and insert:

6 **"* Section 1.** AS 18.23 is amended by adding a new section to read:

7 **Article 4. Health Care Price Information.**

8 **Sec. 18.23.400. Disclosure of health care price information.** (a) Upon
9 written request by a patient or prospective patient, a health care provider shall provide
10 the patient or prospective patient with an estimate of reasonably anticipated charges
11 for treating the patient's or prospective patient's specific condition. The health care
12 provider shall provide the estimate in writing or by electronic means before providing
13 nonemergency health care services and not later than 10 business days after receiving
14 the request. The health care provider is not required to disclose the charges for the
15 total anticipated course of treatment for the patient or prospective patient, but if the
16 estimate does not include charges for the total anticipated course of treatment, the
17 estimate must include a statement explaining that the estimate only includes costs for a
18 portion of the total anticipated course of treatment. If the charge for a health care
19 service varies significantly in response to conditions that the health care provider
20 cannot reasonably assess before providing the service, the estimate may include a
21 reasonable range of charges for the service.

22 (b) Upon written request by a patient or prospective patient, a health care
23 facility shall provide the patient or prospective patient with an estimate of reasonably

1 anticipated charges for treating the patient's or prospective patient's specific condition.
2 The health care facility shall provide the estimate in writing or by electronic means
3 before providing nonemergency health care services and not later than 10 business
4 days after receiving the request. The health care facility is not required to disclose the
5 charges for the total anticipated course of treatment for the patient or prospective
6 patient, but if the estimate does not include charges for the total anticipated course of
7 treatment, the estimate must include a statement explaining that the estimate only
8 includes costs for a portion of the total anticipated course of treatment. If the charge
9 for a health care service varies significantly in response to conditions that the health
10 care facility cannot reasonably assess before providing the service, the estimate may
11 include a reasonable range of charges for the service.

12 (c) An estimate required under (a) or (b) of this section must include, for the
13 patient's or prospective patient's specific condition, the following information:

14 (1) a brief description, in plain language that an individual with no
15 medical training can understand, of all health care services, procedures, products, and
16 supplies for which the health care provider or health care facility is likely to charge for
17 treatment;

18 (2) the standardized billing code for each health care service,
19 procedure, product, and supply described under (1) of this subsection;

20 (3) any facility fee or other additional fee, along with a brief statement,
21 in plain language that an individual with no medical training can understand,
22 describing the fee;

23 (4) for each charge included in the estimate,

24 (A) the amount the health care provider or health care facility
25 charges a patient or prospective patient with no health care insurance, along
26 with a statement explaining that the charges disclosed do not account for any
27 insurance benefits to which the patient or prospective patient may be entitled
28 and explaining that the amount the patient or prospective patient pays may
29 vary by insurer;

30 (B) the amount the health care provider or health care facility
31 anticipates charging the patient or prospective patient who requests the

1 estimate, taking into account any insurance policy held by the patient or
2 prospective patient and any status of the patient or prospective patient that may
3 affect the charge; in this paragraph, "status" includes a person's status as an
4 Alaska Native, American Indian, or veteran or indigent status;

5 (5) the identity, or suspected identity, of any other person, entity,
6 health care provider, or health care facility that may charge the patient or prospective
7 patient in connection with any health care service, procedure, product, or supply
8 included in the estimate; the estimate must also state whether the amount of any
9 charges described under this paragraph are included in the estimate or would be
10 charged in addition to the total amount of the estimate;

11 (6) a notification that the patient or prospective patient may contact the
12 patient's or prospective patient's insurer for additional information regarding cost-
13 sharing responsibilities; and

14 (7) a notice disclosing the health care provider's or health care facility's
15 in-network or out-of-network status that is substantially similar to one of the following
16 forms:

17 (A) "(Name of health care provider or health care facility) is a
18 contracted, in-network, preferred provider for ONLY the following plan
19 networks: (list each network or state 'NONE. YOU MAY INCUR OUT-OF-
20 NETWORK CHARGES.');" ;

21 (B) "(Name of health care provider or health care facility) is a
22 contracted, in-network, preferred provider for your insurance plan."; or

23 (C) "(Name of health care provider or health care facility) is
24 NOT a contracted, in-network, preferred provider for your insurance plan.
25 YOU MAY INCUR OUT-OF-NETWORK CHARGES."

26 (d) A health care provider and a health care facility shall post a sign in a
27 conspicuous public reception area at the office of the health care provider or at the
28 health care facility where the services are performed that contains at least the
29 following language: "You will be provided with an estimate of the anticipated charges
30 for your care upon request. Please do not hesitate to ask for information.
31 AS 18.23.400.

1 (e) A health care provider or health care facility that fails to comply with the
2 requirements under this section is liable for a civil penalty. The department may
3 impose a civil penalty of not more than \$100 for each day after the time allowed to
4 provide an estimate under (a) or (b) of this section that a health care provider or a
5 health care facility fails to provide an estimate in compliance with the requirements
6 under (a) - (c) of this section. The total penalty may not exceed \$1,000. The
7 department may impose a civil penalty of not more than \$100 for each day that a
8 health care provider or health care facility fails to post a sign as required under (d) of
9 this section. The total penalty may not exceed \$1,000. A person penalized under this
10 subsection is entitled to a hearing conducted by the office of administrative hearings
11 under AS 44.64."

12
13 Renumber the following bill section accordingly.

14
15 Page 3, line 16:

16 Delete "(h)"

17 Insert "(f)"

18
19 Page 3, line 18, through page 4, line 3:

20 Delete all material and insert:

21 "(2) "health care facility" means a private, municipal, state, or federal
22 hospital, psychiatric hospital, independent diagnostic testing facility, primary care
23 outpatient facility, residential psychiatric treatment center as defined in AS 47.32.900,
24 tuberculosis hospital, skilled nursing facility, kidney disease treatment center
25 (including freestanding hemodialysis units), an intermediate care facility, a private,
26 municipal, or state facility employing one or more public health nurses, a long-term
27 care facility, an ambulatory surgical center as defined in AS 47.32.900, and the office
28 of a private physician or dentist in group or individual practice; "health care facility"
29 does not include the Alaska Pioneers' Home and the Alaska Veterans' Home
30 administered by the department under AS 47.55."

31

1 Page 4, lines 11 - 21:

2 Delete all material and insert:

3 "(5) "nonemergency health care service" means a health care service
4 that is not provided in response to the perceived need for immediate health care to
5 prevent loss of life or aggravation of physiological or psychological illness or injury;

6 (6) "standardized billing code" includes an international classification
7 of diseases code, a current procedural terminology code published by the American
8 Medical Association, a current dental terminology code published by the American
9 Dental Association, or a code used in the Healthcare Common Procedure Coding
10 System."