SENATE BILL 505:
Medical Billing Transparency.

2021-2022 General Assembly

Committee:	Senate Commerce and Insurance. If favorable, re-refer to Rules and Operations of the Senate	**Date:**	April 26, 2021
Introduced by:	Sens. Krawiec, Burgin, Perry	**Prepared by:**	Jason Moran-Bates Staff Attorney
Analysis of:	Second Edition		

OVERVIEW: Senate Bill 505 would require healthcare facilities to notify patients of any healthcare providers at the facility who may not be in the patients' insurance network.

BILL ANALYSIS: Under Senate Bill 505, when a patient makes an appointment for healthcare at an in-network health service facility, the facility would be required to notify the patient of any out-of-network health care providers who may be providing care to the patient. The notification would have to be given at least 72 hours prior to the appointment for appointments made that far in advance, on the day of the appointment for appointments made less than 72 hours in advance, and as soon as reasonably possible for emergency care. The notification would have to include all the out-of-network providers who will be involved in the patient's care and the approximate cost to the insured for that care.

"Health care provider" would be defined to include anyone licensed under Chapter 90 to provide healthcare services. "Health services facility" would be defined to include a hospital; long-term care hospital; psychiatric facility; rehabilitation facility; nursing home facility; adult care home; kidney disease treatment center, including freestanding hemodialysis units; intermediate care facility for individuals with intellectual disabilities; home health agency office; chemical dependency treatment facility; diagnostic center; hospice office, hospice inpatient facility, hospice residential care facility; and ambulatory surgical facility.

EFFECTIVE DATE: The bill would be effective January 1, 2022, and would apply to contracts entered into, amended, or renewed on or after that date.

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Director

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