

BILL ANALYSIS

C.S.H.B. 2576
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Public Health
Committee Report (Substituted)

BACKGROUND AND PURPOSE

Hospital-owned outpatient facilities sometimes charge inpatient rates for services such as testing, medical imaging, and diagnostic services. Because an insurance company will assume that the services were provided at an outpatient care facility not affiliated with a hospital, these rates are sometimes considerably more than a consumer's insurance company will pay and the consumer usually gets billed for the difference.

C.S.H.B. 2576 would require a hospital-owned outpatient facility to provide a conspicuous written disclosure statement to a consumer at the time the consumer seeks a health care service or supply at the clinic relating to relative out-of-pocket costs that may be incurred by the consumer for a health care service or supply provided at the clinic.

RULEMAKING AUTHORITY

It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution.

ANALYSIS

C.S.H.B. 2576 amends the Health and Safety Code to require the written policies developed, implemented, and enforced by a licensed ambulatory surgical center, birthing center, or hospital for the billing of facility health care services and supplies to address, for a health care service or supply provided on an outpatient basis at a hospital outpatient clinic, the providing of a conspicuous written disclosure statement to a consumer at the time the consumer seeks outpatient care at such a clinic that contains a specified statement providing that, depending on the consumer's insurance coverage, the consumer may incur more out-of-pocket costs for a health care service or supply provided at the clinic than the consumer might otherwise incur if the health care service or supply is received at a physician's office.

EFFECTIVE DATE

September 1, 2011.

COMPARISON OF ORIGINAL AND SUBSTITUTE

C.S.H.B. 2576 contains a provision not included in the original requiring the written policies developed by certain health care facilities for the billing of facility health care services and supplies to address the providing of a specified disclosure statement to a consumer seeking outpatient care at a hospital outpatient clinic relating to the relative out-of-pocket costs that may be incurred by a consumer for a health care service or supply provided at the clinic.

C.S.H.B. 2576 omits provisions included in the original prohibiting a facility that provides inpatient and outpatient health care from charging for a health care service or supply provided to a consumer receiving outpatient care at the facility an amount that exceeds the amount the

consumer's third-party payor pays, computed without consideration of certain payments for which the consumer is responsible, for the same health care service or supply provided by a facility to a consumer in an outpatient care setting and making that prohibition inapplicable to a service or supply provided in a hospital emergency room. The substitute differs from the original in nonsubstantive ways.