House Bill 834

By: Representatives Newton of the 123rd and Hatchett of the 150th

A BILL TO BE ENTITLED AN ACT

- 1 To amend Code Section 31-6-70 of the Official Code of Georgia Annotated, relating to
- 2 reports to the Department of Community Health by certain health care facilities and all
- 3 ambulatory surgical centers and imaging centers and public availability, so as to provide for
- 4 hospital reporting requirements for extraordinary collection actions; to provide for
- 5 definitions; to provide for an effective date; to provide for other matters; to repeal conflicting
- 6 laws; and for other purposes.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

8 SECTION 1.

- 9 Code Section 31-6-70 of the Official Code of Georgia Annotated, relating to reports to the
- 10 Department of Community Health by certain health care facilities and all ambulatory surgical
- centers and imaging centers and public availability, is amended as follows:
- 12 "31-6-70.

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- 13 (a) As used in this Code section, the term:
- (1) 'Credit agency' means a consumer credit reporting agency or a credit bureau.
- 15 (2) 'Extraordinary collection action' means any action taken by a hospital against an
- individual related to such hospital's attempt to collect on a bill for care provided to such

17 individual or such individual's dependent under such hospital's financial assistance 18 policies that: 19 (A) Involves selling such individual's debt to another party; 20 (B) Involves reporting adverse information about such individual to a credit agency; 21 (C) Involves deferring, denying, or requiring a payment before providing medically necessary care because of such individual's nonpayment of one or more bills for 22 23 previously provided care covered under the hospital financial assistance policies; or 24 (D) Requires a legal or judicial process; and (E) Includes, but is not limited to: 25 26 (i) Placing a lien on such individual's property; 27 (ii) Foreclosing on such individual's real property; (iii) Attaching or seizing such individual's bank account or any other personal 28 29 property; (iv) Commencing a civil action against such individual; 30 31 (v) Causing such individual's arrest; 32 (vi) Causing such individual to be subject to a writ of body attachment: or 33 (vii) Garnishing such individual's wages. 34 This term shall not include a claim filed by a hospital in any bankruptcy proceeding. 35 This term shall also not include a lien placed on the proceeds of a judgment, settlement, 36 or compromise owed to such individual or his or her parent or guardian or other 37 representative as a result of personal injuries caused by a third party to such individual 38 for which the hospital provided care. 39 (a)(b) There shall be required from each health care facility in this state requiring a 40 certificate of need and all ambulatory surgical centers and imaging centers, whether or not 41 exempt from obtaining a certificate of need under this chapter, an annual report of such 42 health care information as determined by the department. The report shall be due on the

date determined by the department and shall cover the 12 month period preceding each

- such calendar year.
- 45 (b)(c) The report required under subsection (a)(b) of this Code section shall contain the
- 46 following information:
- 47 (1) Total gross revenues;
- 48 (2) Bad debts;
- 49 (3) Amounts of medical debt collected through the judicial system, including wage
- 50 garnishments, property liens, and means otherwise included as extraordinary collection
- 51 <u>actions</u>;
- 52 (4) Amounts of medical debt sold to third parties based on charges;
- 53 (5) Amounts of revenue received for the sale of medical debt;
- 54 (3)(6) Amounts of free care extended, excluding bad debts;
- (4)(7) Contractual adjustments;
- 56 (5)(8) Amounts of care provided under a Hill-Burton commitment;
- 57 (6)(9) Amounts of charity care provided to indigent and nonindigent persons;
- 58 (7)(10) Amounts of outside sources of funding from governmental entities, philanthropic
- groups, or any other source, including the proportion of any such funding dedicated to the
- care of indigent persons;
- 61 (8)(11) For cases involving indigent persons and nonindigent persons receiving
- 62 charity care:
- 63 (A) The number of persons treated;
- (B) The number of inpatients and outpatients;
- 65 (C) Total patient days;
- (D) The number of patients categorized by county of residence; and
- (E) The indigent and nonindigent care costs incurred by the health care facility by
- county of residence;

69 (9)(12) Transfers to a hospital or hospital emergency department, including both direct

- 70 transfers and transfers by emergency medical services;
- 71 (10)(13) Number of rooms, beds, procedures, and patients, including, without limitation,
- demographic information and payer source;
- 73 (11)(14) Patient origin by county; and
- 74 (12)(15) Operational information such as procedure types, volumes, and charges: and
- 75 (16) For cases involving extraordinary collection actions and sales of medical debt to
- 76 <u>third parties:</u>
- 77 (A) Number of unique patients for which an extraordinary collection action was taken
- on behalf of the hospital;
- 79 (B) Number of unique patients for which medical debt was sold; and
- 80 (C) Information disclosing the name and location of any third party purchasing the
- 81 <u>patient's debt to the hospital.</u>
- 82 (c)(d) As used in subsection (b)(c) of this Code section, 'indigent persons' means persons
- having as a maximum allowable income level an amount corresponding to 125 percent of
- 84 the federal poverty guideline.
- 85 (d)(e) The department shall provide a form for the reports required by this Code section
- and may provide in said form for further categorical divisions of the information listed in
- subsection $\frac{(b)(c)}{(c)}$ or $\frac{(c.1)}{(c.1)}$ of this Code section.
- $\frac{\text{(e)}(f)(1)}{\text{(f)}(1)}$ In the event the department does not receive an annual report from a health care
- facility requiring a certificate of need or an ambulatory surgical center or imaging center,
- whether or not exempt from obtaining a certificate of need under this chapter, on or
- before the date such report was due or receives a timely but incomplete report, the
- department shall notify the health care facility or center regarding the deficiencies and
- shall be authorized to fine such health care facility or center an amount not to
- exceed \$500.00 per day for every each day up to 30 days and \$1,000.00 per day for every
- day over 30 days for every each day of such untimely or deficient report.

(2) In the event the department does not receive an annual report from a health care facility within 180 days following the date such report was due or receives a timely but incomplete report which is not completed within such 180 days, the department shall be authorized to revoke such health care facility's certificate of need in accordance with Code Section 31-6-45.
(f)(g) No application for a certificate of need under Article 3 of this chapter shall be

(f)(g) No application for a certificate of need under Article 3 of this chapter shall be considered as complete if the applicant has not submitted the annual report required by subsection (a)(b) of this Code section.

(g)(h) The department shall make publicly available all annual reports submitted pursuant to this Code section on the department website. The department shall also provide a copy of such annual reports to the Governor, the President of the Senate, the Speaker of the House of Representatives, and the chairpersons of the House Committee on Health and Human Services and the Senate Health and Human Services Committee.

 $\frac{(h)(i)}{(i)}$ All health care facilities, ambulatory surgical centers, and imaging centers required to submit an annual report pursuant to subsection $\frac{(a)(b)}{(a)}$ of this Code section shall make such annual reports publicly available on their websites."

112 SECTION 2.

113 This Act shall become effective on July 1, 2021.

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114 SECTION 3.

All laws and parts of laws in conflict with this Act are repealed.