THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL No. 1723 Session of 2021

INTRODUCED BY FRANKEL, SANCHEZ, D. WILLIAMS, FREEMAN, GUENST, VITALI, HOHENSTEIN, WEBSTER, SIMS, GALLOWAY, MADDEN, INNAMORATO, DELLOSO, DeLUCA, ISAACSON, CIRESI, DRISCOLL, McCLINTON, ROZZI, CONKLIN, KINKEAD, LONGIETTI, McNEILL, A. DAVIS, HENNESSEY AND FITZGERALD, JULY 19, 2021

REFERRED TO COMMITTEE ON HEALTH, JULY 19, 2021

AN ACT

1 2 3 4 5 6 7 8 9 10	Amending the act of July 19, 1979 (P.L.130, No.48), entitled "An act relating to health care; prescribing the powers and duties of the Department of Health; establishing and providing the powers and duties of the State Health Coordinating Council, health systems agencies and Health Care Policy Board in the Department of Health, and State Health Facility Hearing Board in the Department of Justice; providing for certification of need of health care providers and prescribing penalties," providing for off-campus facility fees.
11	The General Assembly of the Commonwealth of Pennsylvania
12	hereby enacts as follows:
13	Section 1. The act of July 19, 1979 (P.L.130, No.48), known
14	as the Health Care Facilities Act, is amended by adding a
15	chapter to read:
16	<u>CHAPTER 8-A</u>
17	OFF-CAMPUS FACILITY FEES
18	Section 801-A. Definitions.
19	The following words and phrases when used in this chapter
20	shall have the meanings given to them in this section unless the

1 <u>context clearly indicates otherwise:</u>

2	"Campus." The following:
3	(1) the main buildings of a health care facility;
4	(2) the physical area immediately adjacent to the main
5	buildings or other areas or structures not strictly
6	contiguous to the main buildings of a health care facility
7	that are located within 250 yards of the main buildings; or
8	(3) any other area determined on an individual case
9	basis by the Centers for Medicare & Medicaid Services to be
10	part of the campus of a health care facility.
11	"Council." The Health Care Cost Containment Council.
12	"COVID-19." The novel coronavirus as identified in the
13	Governor's proclamation of disaster emergency issued on March 6,
14	2020, published at 50 Pa.B. 1644 (March 21, 2020).
15	"COVID-19 fee." Any fee charged or billed by a health care
16	provider for additional personal protective equipment, cleaning
17	supplies or cleaning services utilized as a result of the SARS-
18	<u>CoV-2 pandemic.</u>
19	"Current procedural terminology." The codes, descriptions
20	and guidelines as included in the current procedural terminology
21	manual published by the American Medical Association in effect
22	at the time of the effective date of this section.
23	"Facility fee." Any fee charged or billed by a health care
24	provider for outpatient services provided in an off-campus
25	health care facility that is:
26	(1) Intended to compensate the health care provider for
27	the operational expenses of the health care provider.
28	(2) Separate and distinct from a professional fee.
29	(3) Irrespective of the modality through which the
30	health care service was provided.

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1	"Medical service." As defined in section 2 of the act of
2	December 20, 1985 (P.L.457, No.112), known as the Medical
3	Practice Act of 1985.
4	"Off-campus health care facility." A facility that is not
5	located on the campus of a health care facility.
6	"Professional fee." Any fee charged or billed by a provider
7	for professional medical services provided in a health care
8	facility.
9	Section 802-A. Prohibited fees.
10	<u>A health care provider may not charge, bill or collect the</u>
11	following fees:
12	(1) A COVID-19 fee; or
13	(2) A facility fee for:
14	(i) services provided in an off-campus health care
15	<u>facility;</u>
16	(ii) outpatient evaluation and management services;
17	or
18	(iii) any outpatient, diagnostic or imaging service
19	identified by the department under section 804-A.
20	Section 803-A. Duties of health care provider.
21	<u>A health care provider shall provide written notice:</u>
22	(1) To a patient or the patient's authorized
23	representative under 42 CFR § 413.65(g)(7)(iii) (relating to
24	requirements for a determination that a facility or an
25	organization has provider-based status).
26	(2) To the patient at least 48 hours before the
27	performance of medical services, including diagnosis, care or
28	treatment in an off-campus health care facility. The notice
29	under this paragraph shall include:
30	(i) The dollar amount of the patient's potential

1	financial liability, if known; or
2	(ii) If the diagnosis and the extent of medical
3	services is unknown within the 48-hour period, a
4	statement advising the patient or the patient's
5	authorized representative that the patient may incur a
6	financial liability to the health care facility that the
7	patient would not incur if the patient was receiving
8	medical services and treatment on the campus of the
9	health care facility.
10	(iii) A statement advising the patient, or the
11	patient's authorized representative, that the patient's
12	actual financial liability is based on the medical
13	services rendered by the health care facility.
14	(3) In a method that the patient can understand.
15	(4) To the patient's authorized representative at least
16	48 hours prior to the delivery of medical services to the
17	patient if the patient is unconscious, under significant
18	duress or otherwise unable to read, comprehend or act on the
19	patient's own behalf.
20	(5) As soon as possible after the existence of an
21	emergency has been ruled out or the emergency condition has
22	been stabilized in situations where an off-campus health care
23	facility provides examination or treatment.
24	Section 804-A. Identification of medical services.
25	The department shall annually identify medical services
26	subject to the limitations on facility fees provided in section
27	802-A and submit the list of identified medical services to the
28	Legislative Reference Bureau for publication in the Pennsylvania
29	<u>Bulletin.</u>
30	Section 805-A. Reporting requirements.
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1 (a) Submissions.--Each health care provider shall submit the following reports to the council: 2 (1) A report enumerating the COVID-19 fees associated 3 with care and treatment of COVID-19 charged and billed by the 4 5 health care provider prior to the effective date of this section. The report under this paragraph may be included in 6 the report required under paragraph (2). 7 8 (2) An annual report concerning facility fees billed 9 during the preceding calendar year. The report under this paragraph shall be in the format specified by the council. 10 The council shall submit the report to the Legislative 11 12 Reference Bureau for publication in the Pennsylvania 13 Bulletin. 14 (b) Report content.--The reports under subsection (a) shall 15 include: (1) The name and full address of each health care 16 17 facility owned or operated by the health care provider that 18 provides medical services for which a COVID-19 fee or 19 facility fee is charged or billed. 20 (2) The number of patient visits at each health care 21 facility for which a facility fee was charged or billed. 22 (3) The number, total amount and types of allowable 23 facility fees paid at each health care facility by Medicare, 24 Medicaid and private insurance. 25 (4) For each health care facility and the health care 26 provider, the total amount billed and the total revenue 27 received from COVID-19 fees and facility fees. (5) The 10 most frequent procedures or services, 28 29 identified by current procedural terminology category I 30 codes, provided by the health care provider that generated

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1	the largest amount of facility fee gross revenue, including:
2	(i) The volume of each procedure or service under
3	this paragraph.
4	(ii) The gross and net revenue totals for each
5	procedure or service under this paragraph.
6	(iii) The total net amount of revenue received by
7	the health care provider derived from facility fees for
8	each procedure or service under this paragraph.
9	(6) The 10 most frequent procedures or services,
10	identified by current procedural terminology category I
11	codes, based on patient volume, provided by the health care
12	provider for which facility fees are billed or charged based
13	on patient volume, including the gross and net revenue totals
14	received for each such procedure or service.
15	(7) Any other information related to COVID-19 fees and
16	facility fees the council may require.
17	Section 806-A. Regulatory authorization.
18	The council may promulgate regulations necessary to implement
19	this section, specify the format and content of reports and
20	impose penalties for noncompliance consistent with the council's
21	authority under 35 Pa.C.S. Ch. 33 (relating to health care cost
22	<u>containment).</u>
23	Section 807-A. Enforcement.
24	(a) General ruleExcept as provided in subsection (b), the
25	department shall enforce the provisions of this chapter and
26	shall adopt and promulgate regulations to carry out the
27	provisions of this chapter.
28	(b) PenaltyA health care provider or health care facility
29	that fails to provide notice under section 803-A and supply the
30	data under section 805-A may be subject to the penalty under

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1	section 35 Pa.C.S. § 3310(b) (relating to enforcement and
2	penalty).
3	(c) AuditThe department or a designee may audit any
4	health care provider for compliance with the requirements of
5	this chapter. Each health care provider shall make available,
6	upon written request of the department or a designee, a copy of
7	any books, documents, records or data necessary for the audit
8	under this subsection for a period of four years after the
9	furnishing of any services for which a COVID-19 fee or facility
10	fee was charged, billed or collected.

11 Section 2. This act shall take effect in 60 days.