

1 S.160

2 Introduced by Senators Cummings and Lyons

3 Referred to Committee on

4 Date:

5 Subject: Health; health insurance; hospitals; COVID-19 testing

6 Statement of purpose of bill as introduced: This bill proposes to limit the  
7 amount a health care provider may charge for a diagnostic test for the  
8 coronavirus to twice the Medicare rate. It would prohibit a hospital from  
9 imposing a lien on a patient injured in an accident without first billing and  
10 accepting payment from the patient's health insurance and would prohibit the  
11 hospital from balance billing the patient or from filing a lien for sums charged  
12 in excess of the insurance reimbursement amounts. The bill would require all  
13 Vermont hospitals to report wait times for their services to the Department of  
14 Financial Regulation annually and would prohibit a hospital from placing any  
15 limitations on its providers' discretion to refer a patient to another provider.  
16 The bill would also require health care providers to submit their claims for  
17 payment to an insurer or other payer within 60 days following the date of  
18 service and would require a custodian of medical records to send a patient's  
19 medical records to the patient or another provider within 10 days following the  
20 patient's request.

1 An act relating to patient access to and payment for health care services

2 It is hereby enacted by the General Assembly of the State of Vermont:

3 Sec. 1. 18 V.S.A. § 1140 is amended to read:

4 § 1140. DEFINITIONS

5 As used in this subchapter:

6 \* \* \*

7 (11) “Health insurer” has the same meaning as in section 9402 of this  
8 title.

9 Sec. 2. 18 V.S.A. § 1142 is added to read:

10 § 1142. CORONAVIRUS TESTING

11 A health care provider shall not charge a patient or the patient’s health  
12 insurer more than two times the Medicare reimbursement rate for a diagnostic  
13 test for coronavirus.

14 Sec. 3. 18 V.S.A. § 2251 is amended to read:

15 § 2251. LIEN ESTABLISHED

16 (a) A hospital in Vermont, as defined in section 1801 of this title,  
17 furnishing medical or other service, including charges of private duty nurses, to  
18 a patient injured by reason of an accident not covered by ~~the Workers’~~  
19 ~~Compensation Act, 21 V.S.A. § 601 et seq.,~~ workers’ compensation or by the  
20 patient’s health insurance, Medicare, or Medicaid shall have a lien upon any  
21 recovery for damages to be received by the patient, or by ~~his or her~~ the

1 patient's heirs or personal representatives in the case of ~~his or her~~ the patient's  
2 death, whether by judgment or by settlement or compromise after the date of  
3 the services. This lien shall not attach to one-third of the recovery or \$500.00,  
4 whichever shall be the lesser, and in addition the lien shall be subordinate to an  
5 attorney's lien.

6 (b) A hospital shall bill and accept payment through a patient's health  
7 insurance, Medicaid, or Medicare coverage prior to seeking payment through a  
8 lien. A hospital shall not seek payments directly from the patient or through a  
9 lien for amounts in excess of the reimbursement rates set by the patient's  
10 health insurance coverage, Medicaid, or Medicare.

11 (c) As used in this section, "health insurance" means a health insurance  
12 policy or other health benefit plan offered by a health insurer, as that term is  
13 defined in section 9402 of this title.

14 Sec. 4. 18 V.S.A. § 9406 is added to read:

15 § 9406. ACCESS TO HOSPITAL SERVICES

16 (a) On or before February 1 annually, each hospital shall report to the  
17 Department of Financial Regulation the average wait time for an appointment  
18 with a provider in each of the 50 most frequently used specialties offered by  
19 the hospital during the previous year, with wait times calculated and reported  
20 separately for the periods from January through June and from July through  
21 December.



1 Social Security Act or for any other federal or State needs-based benefit or  
2 program.

3 ~~(b)~~(c) A custodian may charge an individual a fee, reasonably related to the  
4 associated costs, for providing copies of X-rays, films, models, disks, tapes, or  
5 other health care record information maintained in other formats.

6 ~~(e)~~(d) As used in this section:

7 (1) "Custodian" means any person who maintains health care  
8 information for any lawful purpose, including a health care provider, a health  
9 care facility, or a health insurer.

10 (2) "Health care record" means all written and recorded health care  
11 information about an individual maintained by a custodian.

12 (3) "Individual" means a natural person, alive or dead, who is the  
13 subject of health care information and includes, when appropriate, the  
14 individual's attorney-in-fact; legal guardian; health care agent, as defined in  
15 chapter 231 of this title; executor; or administrator.

16 Sec. 7. EFFECTIVE DATE

17 This act shall take effect on July 1, 2022.