

131st MAINE LEGISLATURE

SECOND REGULAR SESSION-2024

Legislative Document

No. 2271

S.P. 987

In Senate, March 14, 2024

An Act to Implement the Recommendations of the Task Force to Evaluate the Impact of Facility Fees on Patients to Improve Facility Fee Transparency and Notification and to Prohibit Facility Fees for Certain Services

Reported by [introducer] from the Joint Standing Committee on Health Coverage, Insurance and Financial Services pursuant to Public Law 2023, chapter 410, section 2. Reference to the Committee on Health Coverage, Insurance and Financial Services suggested and ordered printed pursuant to Joint Rule 218.

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DAREK M. GRANT Secretary of the Senate

1	Be it enacted by the People of the State of Maine as follows:
2	Sec. 1. 22 MRSA §1718-B, sub-§1, ¶A-1 is enacted to read:
3 4	A-1. "Facility fee" means a fee charged or billed by a health care entity for outpatient services provided in a hospital-based facility that is:
5 6	(1) Intended to compensate the hospital or health system for the operational expenses of the hospital or health system; and
7	(2) Separate and distinct from a professional fee.
8	Sec. 2. 22 MRSA §1718-B, sub-§1, ¶C is enacted to read:
9 10 11	C. "Hospital-based facility" means a facility that is owned or operated, in whole or in part, by a hospital or health system where hospital services or professional medical services are provided.
12	Sec. 3. 22 MRSA §1718-B, sub-§1, ¶D is enacted to read:
13 14	D. "Professional fee" means a fee charged or billed by a health care entity for professional medical services provided in a hospital-based facility.
15	Sec. 4. 22 MRSA §1718-B, sub-§2, ¶E is enacted to read:
16 17 18	E. A health care entity shall prominently display in a location that is readily accessible to a patient, including a patient waiting area, and on the health care entity's publicly accessible website the following information:
19 20 21	(1) Whether the health care entity is a hospital-based facility and, if so, the name of the hospital or health system and whether the health care entity charges a facility fee;
22 23 24	(2) If a facility fee is charged, that the patient may incur a financial liability greater than the patient would incur if the services were provided in a facility that was not a hospital-based facility; and
25 26 27 28	(3) How to access the publicly accessible website of the Maine Health Data Organization established pursuant to chapter 1683 for educational materials about facility fees and whether and under what circumstances depending on payor and type of service a facility fee may be charged.
29	Sec. 5. 22 MRSA §1718-I is enacted to read:
30	<u>§1718-I. Prohibition on facility fees for certain telehealth services</u>
31 32	1. Definitions. As used in this section, unless the context otherwise indicates, the following terms have the following meanings.
33 34	A. "Facility fee" has the same meaning as in section 1718-B, subsection 1, paragraph <u>A-1.</u>
35 36	B. "Health care entity" has the same meaning as in section 1718-B, subsection 1, paragraph B.
37 38	C. "Hospital-based facility" has the same meaning as in section 1718-B, subsection 1, paragraph C.

2. Facility fee prohibited; exception. A health care entity may not impose a facility
 fee on a patient for telehealth services received by that patient unless the patient is
 physically present in a hospital-based facility when the telehealth services are delivered to
 the patient.

5 Sec. 6. 22 MRSA §8712, sub-§2-A, as enacted by PL 2023, c. 410, §1, is amended 6 to read:

7 2-A. Facility fees charged by health care providers. By January 1, 2024, and annually thereafter, the organization shall produce and post on its publicly accessible 8 9 website a report on the payments for facility fees made by payors to the extent that payment 10 information is already reported to the organization. The organization shall submit the report 11 required by this subsection to the Office of Affordable Health Care established in Title 5, 12 section 3122 and the joint standing committee of the Legislature having jurisdiction over health data reporting and health insurance matters. The joint standing committee may 13 14 report out legislation based on the report to a first regular or second regular session of the Legislature, depending on the year in which the report is submitted. The organization shall 15 produce and post on its publicly accessible website information designed to educate the 16 public about facility fees and whether and under what circumstances depending on payor 17 and type of service a facility fee may be charged. 18

For the purposes of this subsection, unless the context otherwise indicates, the followingterms have the following meanings.

A. "Facility fee" means any fee charged or billed by a health care provider for outpatient services provided in a hospital-based facility or freestanding emergency facility that is intended to compensate the health care provider for the operational expenses of the health care provider, separate and distinct from a professional fee, and charged or billed regardless of how a health care service is provided.

B. "Health care provider" means a person, whether for profit or nonprofit, that
furnishes bills or is paid for health care service delivery in the normal course of
business. "Health care provider" includes, but is not limited to, a health system,
hospital, hospital-based facility, freestanding emergency facility or urgent care clinic.

30 Sec. 7. 24-A MRSA §4316, sub-§3, ¶H is enacted to read:

H. The carrier may not reimburse for a facility fee except with respect to a physically
 present patient as provided in Title 22, section 1718-I, subsection 2.

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SUMMARY

This bill is reported out by the Joint Standing Committee on Health Coverage, Insurance and Financial Services pursuant to Public Law 2023, chapter 410. The bill implements certain recommendations of the Task Force to Evaluate the Impact of Facility Fees on Patients.

The bill prohibits the charging of a facility fee by a health care entity for telehealth services unless the patient is physically present in a hospital-based facility when receiving those telehealth services.

The bill requires a health care entity to post notice in a location readily accessible to patients, including patient waiting areas, and on the entity's publicly accessible website if

- the health care entity is a hospital-based facility that is part of a hospital or health system
 and whether a facility fee will be charged for receiving services.
- The bill also requires the Maine Health Data Organization to post information on its publicly accessible website relating to facility fees to educate the public about what facility fees are and the circumstances when facility fees may or may not be charged in association with the delivery of health care services.