

2024 -- H 7702

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LC005103
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STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2024

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A N A C T

RELATING TO HEALTH AND SAFETY -- LICENSING OF HEALTHCARE FACILITIES

Introduced By: Representatives Speakman, Donovan, McGaw, Henries, Fogarty, Handy,
Shallcross Smith, Bennett, Stewart, and Giraldo

Date Introduced: February 23, 2024

Referred To: House Finance

It is enacted by the General Assembly as follows:

1 SECTION 1. Chapter 23-17 of the General Laws entitled "Licensing of Healthcare
2 Facilities" is hereby amended by adding thereto the following section:

3 **23-17-67. Hospital determinations for Medicare and Medicaid for uninsured patients.**

4 (a) All hospitals shall screen each uninsured patient, upon the uninsured patient's
5 agreement, at the earliest reasonable moment for potential eligibility for both:

6 (1) Public health insurance programs; and

7 (2) Any financial assistance offered by the hospital.

8 (b) All screening activities, including initial screenings and all follow-up assistance, shall
9 be provided in compliance with § 23-17-54.

10 (c) If a patient declines or fails to respond to the screening described in subsection (a) of
11 this section, the hospital shall document in the patient's record the patient's decision to decline or
12 failure to respond to the screening, confirming the date and method by which the patient declined
13 or failed to respond.

14 (d) If a patient does not decline the screening described in subsection (a) of this section, a
15 hospital should screen an uninsured patient during registration unless it would cause a delay of care
16 to the patient; otherwise, a hospital shall screen an uninsured patient at the earliest reasonable
17 moment.

18 (e) If a patient does not submit to screening, financial assistance application, or reasonable
19 payment plan documentation within thirty (30) days after a request, the hospital shall document the

1 lack of received documentation, confirming the date that the screening took place and that the thirty
2 (30) day timeline for responding to the hospital's request has lapsed; provided, however, that it may
3 be reopened within ninety (90) days after the date of discharge, date of service, or completion of
4 the screening.

5 (f) If the screening indicates that the patient may be eligible for a public health insurance
6 program, the hospital shall provide information to the patient about how the patient can apply for
7 the public health insurance program, including, but not limited to, referral to healthcare navigators
8 who provide free and unbiased eligibility and enrollment assistance, including healthcare
9 navigators at federally qualified health centers; local, state, or federal government agencies; or any
10 other resources that the state recognizes as designed to assist uninsured individuals in obtaining
11 health coverage.

12 (g) If the uninsured patient's application for a public health insurance program is approved,
13 the hospital shall bill the insuring entity and shall not pursue the patient for any aspect of the bill,
14 except for any required copayment, coinsurance, or other similar payment for which the patient is
15 responsible under the insurance. If the uninsured patient's application for public health insurance is
16 denied, the hospital shall again offer to screen the uninsured patient for hospital financial assistance,
17 and the timeline for applying for financial assistance under the this section shall begin again.

18 (h) A hospital shall offer to screen an insured patient for hospital financial assistance under
19 this section if the patient requests financial assistance screening, if the hospital is contacted in
20 response to a bill, if the hospital learns information that suggests an inability to pay, or if the
21 circumstances otherwise suggest the patient's inability to pay.

22 (i)(1) Each hospital shall post a sign with the following notice: "You may be eligible for
23 financial assistance under the terms and conditions the hospital offers to qualified patients. For
24 more information contact [hospital financial assistance representative]".

25 (2) The sign under subsection (i)(1) of this subsection shall be posted, either by physical
26 or electronic means, conspicuously in the admission and registration areas of the hospital.

27 (3) The sign shall be in English, and in any other language that is the primary language of
28 at least five percent (5%) of the patients served by the hospital annually.

29 (4) Each hospital that has a website shall post a notice in a prominent place on its website
30 that financial assistance is available at the hospital, a description of the financial assistance
31 application process, and a copy of the financial assistance application.

32 (5) Within one hundred eighty (180) days after the effective date of this section, each
33 hospital shall make available information regarding financial assistance from the hospital in the
34 form of either a brochure, an application for financial assistance, or other written or electronic

1 material in the emergency room, hospital admission, and registration area.

2 (j)(1) The executive office of health and human services is responsible for administering
3 and ensuring compliance with this section, including the development of any rules and regulations
4 necessary for the implementation and enforcement of this section.

5 (2) The executive office of health and human services shall develop and implement a
6 process for receiving and handling complaints from individuals or hospitals regarding possible
7 violations of this section.

8 (3) The attorney general may conduct any investigation deemed necessary regarding
9 possible violations of this section by any hospital including, without limitation, the issuance of
10 subpoenas to:

11 (i) Require the hospital to file a statement or report or answer interrogatories in writing as
12 to all information relevant to the alleged violations;

13 (ii) Examine under oath any person who possesses knowledge or information directly
14 related to the alleged violations; and

15 (iii) Examine any record, book, document, account, or paper necessary to investigate the
16 alleged violation.

17 (4) If the attorney general determines that there is a reason to believe that any hospital has
18 violated this section, the attorney general may bring an action against the hospital to obtain
19 temporary, preliminary, or permanent injunctive relief for any act, policy, or practice by the hospital
20 that violates this section. Before bringing such an action, the attorney general may permit the
21 hospital to submit a correction plan for the attorney general's approval.

22 SECTION 2. This act shall take effect on January 1, 2025.

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EXPLANATION
BY THE LEGISLATIVE COUNCIL
OF
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RELATING TO HEALTH AND SAFETY -- LICENSING OF HEALTHCARE FACILITIES

- 1 This act would require all hospitals to screen uninsured patients for eligibility for public
- 2 health programs and financial assistance under Medicare and Medicaid.
- 3 This act would take effect on January 1, 2025.

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