



Senate

General Assembly

File No. 420

February Session, 2004

Substitute Senate Bill No. 561

Senate, April 1, 2004

The Committee on Public Health reported through SEN. MURPHY of the 16th Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

AN ACT CONCERNING HOSPITAL BILLING PRACTICES.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Subsection (a) of section 3 of public act 03-266 is repealed
2 and the following is substituted in lieu thereof (*Effective July 1, 2004*):

3 (a) No hospital shall refer to a collection agent, as defined in section
4 [19-509b] 19a-509b, as amended, or initiate an action against an
5 individual patient or such patient's estate to collect fees arising from
6 care provided at a hospital on or after October 1, 2003, unless the
7 hospital has made a determination [that] whether such individual is (1)
8 an uninsured patient, as defined in section 19a-673, as amended, and
9 [is] (2) not eligible for the hospital bed fund.

This act shall take effect as follows:

Section 1	<i>July 1, 2004</i>
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PH *Joint Favorable Subst.*

The following fiscal impact statement and bill analysis are prepared for the benefit of members of the General Assembly, solely for the purpose of information, summarization, and explanation, and do not represent the intent of the General Assembly or either House thereof for any purpose:

OFA Fiscal Note

State Impact: None

Municipal Impact: None

Explanation

This bill clarifies and makes technical changes to Section 3(a) of PA 03-266 (“AAC Hospital Billing Practices”). No fiscal impact is anticipated to result from its passage.

OLR Bill Analysis

sSB 561

AN ACT CONCERNING HOSPITAL BILLING PRACTICES.**SUMMARY:**

This bill clarifies when a hospital may refer a patient debt to a collection agent or initiate an action against a patient or his estate to collect fees for care provided at the hospital on or after October 1, 2003. The hospital must determine whether the individual is uninsured and not eligible for a hospital bed fund. Current law requires the hospital to determine that the person is uninsured and not eligible for the bed fund.

EFFECTIVE DATE: July 1, 2004

BACKGROUND***Uninsured Patient***

By law, hospitals providing services to an uninsured patient are prohibited from collecting from the patient more than the cost of providing services. An "uninsured patient," under the law, is one with income at or below 250% of the federal poverty level who (1) has been denied eligibility for health care coverage under Medicaid or the General Assistance program for failure to satisfy income or other eligibility requirements and (2) was not eligible for hospital service coverage under Medicare or CHAMPUS; Medicaid; any health insurance program of another nation, state, or U.S. territory or commonwealth; or any other government or private health or accident insurance or benefit program.

Hospital Bed Funds

By law, a hospital bed fund refers to gifts of money, stock, other financial instruments, or other property made to establish a fund to provide medical care to patients at a hospital.

COMMITTEE ACTION

Public Health Committee

Joint Favorable Substitute

Yea 22 Nay 0