
OLR Bill Analysis

sSB 992 (File 539, as amended by Senate "A")*

AN ACT CONCERNING VARIOUS REVISIONS TO THE OFFICE OF HEALTH CARE ACCESS STATUTES.

SUMMARY:

This bill requires nonprofit hospitals to submit annually to the Office of Health Care Access (OHCA) (1) a complete copy of the hospital's most recent Internal Revenue Service (IRS) Form 990, including all parts and schedules and (2) data compiled to prepare the hospital's community health needs assessment (see BACKGROUND), in the form and manner OHCA prescribes. But they must not include patient-identifiable information or other individual patient information. They also must not include information that (1) the hospital does not own or control, (2) the hospital is contractually required to keep confidential or is prohibited from disclosing by a data use agreement, or (3) concerns research on human subjects as described in federal Health and Human Services (HHS) regulations (see BACKGROUND).

The bill requires nonprofit hospitals to submit the Form 990 and community health needs assessment data along with information they must already report concerning uncompensated care and related matters. By law, anyone who wilfully fails to file required information with OHCA within the time periods required by law is subject to a civil penalty of up to \$1,000 for each day the information is missing, incomplete, or inaccurate.

The bill also allows the Department of Public Health (DPH) to impose a \$1,000 daily penalty on health care providers or facilities that wilfully fail to complete the questionnaire required as part of OHCA's statewide health care inventory.

By law, hospitals are subject to civil penalties and billing

adjustments if a patient's bill conflicts with the hospital's schedule of charges on file with OHCA (i.e., its pricemaster). The bill (1) specifies certain details that patient bills must contain for these purposes and (2) requires hospitals to provide detailed patient bills to DPH or patients upon request.

*Senate Amendment "A" adds (1) the restrictions on providing certain types of information with the Form 990 and community health needs data, (2) the requirement for hospitals to provide detailed patient bills to DPH or patients upon request, and (3) a definition of "pricemaster."

EFFECTIVE DATE: October 1, 2013

CIVIL PENALTIES FOR FAILURE TO COMPLETE INVENTORY QUESTIONNAIRE

By law, OHCA must conduct a statewide health care facility utilization study, and update its statewide health care facilities and services plan, every two years. As part of this process, OHCA must maintain an inventory of in-state health care facilities, services, and specified equipment. Current law requires health care facilities and providers to complete an OHCA questionnaire to develop the inventory, but exempts them from penalties for failing to complete it.

The bill instead subjects these facilities and providers to the general civil penalties that apply to persons or facilities that fail to file data or information with OHCA as required by law – up to \$1,000 per day for wilfully failing to comply.

By law, before DPH can impose such civil penalties, it must notify the party by first class mail or personal service of the violation. The person or entity has 15 business days from the mailing date to apply in writing for a (1) hearing to contest the penalty or (2) time extension to file the data. A final order assessing the civil penalty can be appealed to New Britain Superior Court.

PATIENT BILLS

By law, a hospital must file with OHCA its current pricemaster

(detailed schedule of charges). If the billing detail by line item on a patient bill does not agree with the information filed with OHCA, the hospital is subject to a civil penalty of \$500 per occurrence, subject to the procedures set forth above (e.g., the hospital has 15 business days to contest the penalty). OHCA can also order the hospital to adjust the bill to be consistent with the charges on file.

The bill specifically requires hospitals to provide detailed patient bills to either DPH or a patient upon request. It also replaces references to “patient bill” with “detailed patient bill.” It defines a detailed patient bill as a patient billing statement that includes, for each line item, (1) the hospital’s current pricemaster code, (2) a description of the charge, and (3) the billed amount.

BACKGROUND

IRS Form 990 and Community Health Needs Assessment

The IRS Form 990 is the “Return of Organization Exempt From Income Tax” form. In practice, OHCA currently collects this form from nonprofit hospitals on a voluntary basis.

The federal Patient Protection and Affordable Care Act requires nonprofit hospitals to conduct community health needs assessments at least once every three years, and make the assessments widely available to the public. It also requires such hospitals to include a description of how they are meeting the law’s community health needs assessment requirements in their IRS Form 990 filing.

Research on Human Subjects

HHS regulations set various conditions for research involving human subjects conducted or supported by federal agencies or otherwise subject to federal regulation. Certain types of research are exempt from the HHS policy (such as research involving the (1) use of educational tests in certain circumstances or (2) collection or study of existing data that is publicly available or recorded in a way that subjects cannot be identified) (45 C.F.R. § 46.101).

COMMITTEE ACTION

Public Health Committee

Joint Favorable Substitute

Yea 23 Nay 5 (04/01/2013)

Judiciary Committee

Joint Favorable

Yea 22 Nay 11 (05/01/2013)