

Department of Planning and Budget 2016 Fiscal Impact Statement

1. Bill Number: HB866

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|------------------------|--|-------------------------------------|------------------------------------|
| House of Origin | <input checked="" type="checkbox"/> Introduced | <input type="checkbox"/> Substitute | <input type="checkbox"/> Engrossed |
| Second House | <input type="checkbox"/> In Committee | <input type="checkbox"/> Substitute | <input type="checkbox"/> Enrolled |

2. Patron: O'Bannon

3. Committee: Health, Welfare and Institutions

4. Title: Advance disclosure of allowed amount of charge for procedure.

5. Summary: Requires every hospital to disclose, prior to admitting a patient whose health plan includes a deductible, copayment, or coinsurance requirement for health care service of \$500 or more for an elective procedure or performing an elective procedure or test on or delivering an elective service to such patient, and upon request of such patient or his legally authorized representative, the amount of payment for the procedure for which the patient may be responsible after any reimbursement or payment made by the patient's health insurance provider.

6. Budget Amendment Necessary: No.

7. No Fiscal Impact.

8. Fiscal Implications: This bill would not have a fiscal impact on the Commonwealth. This bill directs hospitals and would not impact agency operations.

9. Specific Agency or Political Subdivisions Affected: None.

10. Technical Amendment Necessary: No.

11. Other Comments: HB905, introduced by Delegate Yancey, is similar to this bill.