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HOUSE BILL NO. 188

Offered January 8, 2020

Prefiled December 26, 2019

A *BILL to amend and reenact § 32.1-137.05 of the Code of Virginia and to amend the Code of Virginia by adding in Article 6 of Chapter 29 of Title 54.1 a section numbered 54.1-2973.2, relating to advance disclosure of charge for nonemergency procedure, test, or service.*

Patrons—Levine, Kory and Lopez

Referred to Committee on Health, Welfare and Institutions

Be it enacted by the General Assembly of Virginia:

1. That § 32.1-137.05 of the Code of Virginia is amended and reenacted and that the Code of Virginia is amended by adding in Article 6 of Chapter 29 of Title 54.1 a section numbered 54.1-2973.2 as follows:

§ 32.1-137.05. Advance estimate of patient payment amount for elective charge for nonemergency procedure, test, or service.

Every hospital shall, ~~upon request of~~ *provide to* a patient scheduled to receive an elective a nonemergency procedure, test, or service to be performed by the hospital, or ~~upon request of~~ *to* such patient's legally authorized representative, ~~made no less than three days in advance of the date on which such elective procedure, test, or service is scheduled to be performed,~~ furnish the patient with an estimate of the payment amount for which the ~~participant~~ *patient* will be responsible for such elective nonemergency procedure, test, or service, *no later than one week after the scheduling of such nonemergency procedure, test, or service.*

Every hospital shall provide written information about ~~the~~ a patient's ability to request an estimate of the payment amount pursuant to this section. Such written information shall be posted conspicuously in public areas of the hospital, including admissions or registration areas, and included on any website maintained by the hospital.

§ 54.1-2973.2. Advance estimate of charge for nonemergency procedure, test, or service.

Every practitioner licensed pursuant to this chapter shall provide to a patient scheduled to receive a nonemergency procedure, test, or service to be performed by the practitioner, or to such patient's legally authorized representative, an estimate of the payment amount for which the patient will be responsible, no later than one week after the scheduling of such nonemergency procedure, test, or service.

INTRODUCED

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