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SENATE BILL NO. 1219

Offered January 12, 2011

Prefiled January 12, 2011

A *BILL to amend the Code of Virginia by adding sections numbered 32.1-134.5 and 54.1-2962.3, relating to the provision of medical services at hospitals by nonparticipating physicians and surgeons; disclosures; liability of enrollees for charges in excess of insurer's payment to a provider.*

Patron—Barker

Referred to Committee on Education and Health

Be it enacted by the General Assembly of Virginia:

1. That the Code of Virginia is amended by adding sections numbered 32.1-134.5 and 54.1-2962.3 as follows:

§ 32.1-134.5. *Notice regarding services provided by nonparticipating physicians and surgeons.*

A. *In this section, "carrier," "enrollee," "provider," and "provider panel" have the same meanings ascribed thereto in § 38.2-3407.10.*

B. *Each hospital that is a participating provider under a carrier's policy, contract, or plan that provides hospitalization coverage shall notify each enrollee admitted for hospitalization at the hospital in writing:*

1. *The names and specialties of any physicians or surgeons who provide medical services at the hospital in the regular course of their practice and who are not members of a provider panel under the contact, policy, or plan; and*

2. *Of the obligations of such physicians and surgeons pursuant to § 54.1-2962.3.*

C. *A hospital shall be deemed to have satisfied its obligations under subsection B with respect to enrollees who are not capable of acknowledging receipt of such written notification by posting prominent signs containing such information in public areas of the hospital, including waiting rooms and administrative areas where patients generally check in.*

D. *The failure of a hospital to comply with the requirements of this section shall not render the hospital liable to an enrollee for any charges by a physician or surgeon.*

§ 54.1-2962.3. *Disclosure of nonparticipation in provider panel; effect of failure to disclose.*

A. *In this section, "carrier," "enrollee," "provider," and "provider panel" have the same meanings ascribed thereto in § 38.2-3407.10.*

B. *A physician or surgeon who (i) in the regular course of his practice provides medical services at a hospital as defined in § 32.1-123 that is a participating provider under a carrier's policy, contract, or plan that provides hospitalization coverage and (ii) is not a member of a provider panel under the contact, policy, or plan, shall:*

1 *Inform in writing each enrollee admitted for hospitalization at the hospital for whom he intends to provide a covered medical service or procedure that (i) he does not participate in a provider panel under a carrier's policy, contract, or plan and (ii) the enrollee may be liable for the portion of his charges that exceeds the amount paid by the carrier for his services; and*

2. *Not bill the enrollee for, or otherwise hold the enrollee liable for payment of, any amount by which his charges for the covered services he provides exceed the amount paid by the carrier for his services unless the enrollee consented in writing, prior to receiving such services, to the use of his services, which written consent includes a prominent statement that by consenting to the use of the nonparticipating physician or surgeon the enrollee agrees to be liable for the charges of the nonparticipating physician or surgeon that exceed the amount paid by the carrier for the services.*

C. *If such an enrollee fails or refuses to agree to be liable for charges of the nonparticipating physician or surgeon that exceed the amount paid by the carrier for his services, then the enrollee shall not be liable to the nonparticipating physician or surgeon for such excess amount.*

INTRODUCED

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