1	A bill to be entitled
2	An act relating to medical billing; creating s.
3	222.26, F.S.; providing additional personal property
4	exemptions from legal process for medical debts
5	resulting from services provided in certain licensed
6	facilities; amending s. 395.301, F.S.; requiring a
7	licensed facility to provide a cost estimate to a
8	patient within a specified timeframe after
9	recommending a specific course of treatment or set of
10	services; prohibiting a licensed facility from
11	charging a patient an amount that exceeds such cost
12	estimate by a set threshold; requiring a licensed
13	facility to provide a patient with a written
14	explanation of excess charges under certain
15	circumstances; requiring a licensed facility to
16	establish an appeal process for patients to dispute
17	charges; requiring a facility to make available
18	information necessary for initiating an appeal;
19	requiring a facility to respond to a patient appeal
20	within a specified timeframe; creating s. 395.3011,
21	F.S.; prohibiting certain collection activities by a
22	licensed facility; providing an effective date.
23	
24	Be It Enacted by the Legislature of the State of Florida:
25	
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26 Section 1. Section 222.26, Florida Statutes, is created to 27 read: 28 222.26 Additional exemptions from legal process concerning 29 medical debt.-If a debt is owed for medical services provided by 30 a facility licensed under chapter 395, the following property is exempt from attachment, garnishment, or other legal process: 31 32 (1) A debtor's interest, not to exceed \$10,000 in value, 33 in a single motor vehicle as defined in s. 320.01. 34 (2) A debtor's interest in personal property, not to 35 exceed \$10,000, if the debtor does not claim or receive the benefits of a homestead exemption under s. 4, Art. X of the 36 37 State Constitution. Section 2. Subsection (6) of section 395.301, Florida 38 39 Statutes, is renumbered as subsection (7), paragraph (b) of subsection (1) is amended, and a new subsection (6) is added to 40 41 that section, to read: 42 395.301 Price transparency; itemized patient statement or 43 bill; patient admission status notification.-44 A facility licensed under this chapter shall provide (1) 45 timely and accurate financial information and quality of service measures to patients and prospective patients of the facility, 46 or to patients' survivors or legal quardians, as appropriate. 47 Such information shall be provided in accordance with this 48 section and rules adopted by the agency pursuant to this chapter 49 50 and s. 408.05. Licensed facilities operating exclusively as Page 2 of 7

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51 state facilities are exempt from this subsection.

52 (b)1. Upon request, and Before providing any nonemergency 53 medical services, each licensed facility shall provide in 54 writing or by electronic means a good faith estimate of 55 reasonably anticipated charges by the facility for the treatment 56 of the patient's or prospective patient's specific condition. 57 The facility must provide the estimate to the patient or 58 prospective patient within 7 business days after recommending a 59 specific course of treatment or set of services the receipt of the request and is not required to adjust the estimate for any 60 potential insurance coverage. The estimate may be based on the 61 62 descriptive service bundles developed by the agency under s. 408.05(3)(c) unless the patient or prospective patient requests 63 64 a more personalized and specific estimate that accounts for the 65 specific condition and characteristics of the patient or 66 prospective patient. The facility shall inform the patient or 67 prospective patient that he or she may contact his or her health 68 insurer or health maintenance organization for additional 69 information concerning cost-sharing responsibilities. The 70 facility may not charge the patient more than 110 percent of the 71 estimate. However, if the facility determines that such charges 72 are warranted due to unforeseen circumstances or the provision of additional services, the facility must provide the patient 73 74 with a written explanation of the excess charges as part of the 75 detailed, itemized statement or bill to the patient.

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76 2. In the estimate, the facility shall provide to the 77 patient or prospective patient information on the facility's 78 financial assistance policy, including the application process, 79 payment plans, and discounts and the facility's charity care 80 policy and collection procedures.

3. The estimate shall clearly identify any facility fees and, if applicable, include a statement notifying the patient or prospective patient that a facility fee is included in the estimate, the purpose of the fee, and that the patient may pay less for the procedure or service at another facility or in another health care setting.

4. Upon request, The facility shall notify the patient or
prospective patient of any revision to the estimate.

5. In the estimate, the facility must notify the patient or prospective patient that services may be provided in the health care facility by the facility as well as by other health care providers that may separately bill the patient, if applicable.

94 6. The facility shall take action to educate the public
95 that such estimates are available upon request.

96 <u>6.7</u>. Failure to timely provide the estimate within the 97 <u>timeframe required in subparagraph 1</u>. pursuant to this paragraph 98 shall result in a daily fine of \$1,000 until the estimate is 99 provided to the patient or prospective patient. The total fine 100 may not exceed \$10,000.

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101								
102	The provision of an estimate does not preclude the actual							
103	charges from exceeding the estimate.							
104	(6) Each facility shall establish an appeal process							
105	designed to allow patients to dispute charges that appear on the							
106	patient's itemized statement or bill. The facility shall							
107	prominently post on its website and indicate in bold print on							
108	each itemized statement or bill the instructions for initiating							
109	an appeal and the direct contact information needed to initiate							
110	the appeal process. The facility must provide an initial							
111	response to a patient appeal within 7 business days after the							
112	patient formally files an appeal disputing all or a portion of							
113	an itemized statement or bill.							
114	Section 3. Section 395.3011, Florida Statutes, is created							
115	to read:							
116	395.3011 Billing and collection activities							
117	(1) As used in this section, the term "extraordinary							
118	collection action" means any of the following actions taken by a							
119	licensed facility against an individual in relation to obtaining							
120	payment of a bill for care covered under the facility's							
121	financial assistance policy:							
122	(a) Selling the individual's debt to another party.							
123	(b) Reporting adverse information about the individual to							
124	consumer credit reporting agencies or credit bureaus.							
125	(c) Deferring, denying, or requiring a payment before							
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126	providing medically necessary care because of the individual's						
127	nonpayment of one or more bills for previously provided care						
128	covered under the facility's financial assistance policy.						
129	(d) Actions that require a legal or judicial process,						
130	including, but not limited to:						
131	1. Placing a lien on the individual's property;						
132	2. Foreclosing on the individual's real property;						
133	3. Attaching or seizing the individual's bank account or						
134	any other personal property;						
135	4. Commencing a civil action against the individual;						
136	5. Causing the individual's arrest; or						
137	6. Garnishing the individual's wages.						
138	(2) A facility shall not engage in an extraordinary						
139	collection action against an individual to obtain payment for						
140	services:						
141	(a) Before the facility has made reasonable efforts to						
142	determine whether the individual is eligible for assistance						
143	under its financial assistance policy for the care;						
144	(b) Before the facility has provided the individual with a						
145	requested itemized statement or bill;						
146	(c) During an ongoing appeal process as described in s.						
147	<u>395.301(6); or</u>						
148	(d) For 30 days after notifying the patient in writing, by						
149	certified mail or other traceable delivery method, that a						
150	collection action will commence absent additional action by the						
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151	patie	ent.										
152		Section	4.	This	act	shall	take	effect	July	1,	2019.	
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