Second Regular Session Seventy-third General Assembly STATE OF COLORADO

PREAMENDED

This Unofficial Version Includes Committee Amendments Not Yet Adopted on Second Reading

LLS NO. 22-0589.01 Brita Darling x2241

HOUSE BILL 22-1285

HOUSE SPONSORSHIP

Neville and Esgar, Daugherty

SENATE SPONSORSHIP

Moreno and Cooke,

House Committees

Health & Insurance

Senate Committees

	A BILL FOR AN ACT
101	CONCERNING A PROHIBITION AGAINST A HOSPITAL TAKING CERTAIN
102	DEBT COLLECTION ACTIONS AGAINST A PATIENT IF THE
103	HOSPITAL IS NOT IN COMPLIANCE WITH HOSPITAL PRICE
104	TRANSPARENCY LAWS.

Bill Summary

(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at http://leg.colorado.gov.)

The bill prohibits a hospital or other person or entity collecting on behalf of the hospital from initiating or pursuing collection actions against a patient or patient guarantor for debt incurred by the patient on the date or dates of service when the hospital was not in compliance with federal hospital price transparency laws.

Nothing in the bill:

- Prohibits a hospital from billing a patient or health insurer for items or services provided to the patient; or
- Requires a hospital to refund a payment made to the hospital for items or services provided to a patient.

A hospital that initiates or pursues a prohibited collection action is subject to a penalty equal to the amount of the debt and must refund any amount paid on the debt and pay attorney fees and costs.

The bill makes attempting to collect the debt an unfair practice under the "Colorado Fair Debt Collections Act".

The bill authorizes the department of public health and environment, in considering a hospital's license renewal application, to consider whether the hospital is or has been in compliance with federal hospital price transparency laws.

1 Be it enacted by the General Assembly of the State of Colorado: 2 **SECTION 1.** In Colorado Revised Statutes, add part 8 to article 3 3 of title 25 as follows: 4 PART 8 5 CONSUMER PROTECTION RELATING TO 6 HOSPITAL PRICE TRANSPARENCY 7 **25-3-801.** Legislative declaration. (1) THE GENERAL ASSEMBLY 8 FINDS AND DECLARES THAT: 9 SECTION 1001 OF THE "PATIENT PROTECTION AND (a) Affordable Care Act of 2010", Pub.L. 111-148, as amended by 10 11 SECTION 10101 OF THE "HEALTH CARE AND EDUCATION RECONCILIATION ACT OF 2010", PUB.L. 111-152, AMENDED TITLE XXVII OF THE "PUBLIC 12 13 HEALTH SERVICE ACT", PUB.L. 78-410, IN PART, BY ADDING A NEW 14 SECTION 2718(e), REQUIRING, IN PART, THAT EACH HOSPITAL OPERATING 15 WITHIN THE UNITED STATES ESTABLISH, UPDATE, AND MAKE PUBLIC A LIST 16 OF THE HOSPITAL'S STANDARD CHARGES FOR THE ITEMS AND SERVICES

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1	THAT THE HOSPITAL PROVIDES;
2	(b) Effective January 1, 2021, the federal centers for
3	MEDICARE AND MEDICAID SERVICES PUBLISHED THE FINAL RULE TO
4	IMPLEMENT THE LAW, CODIFIED AT 45 CFR 180;
5	(c) In its summary of the final rule, CMS states that
6	INFORMATION ON HOSPITAL STANDARD CHARGES IS NECESSARY FOR THE
7	PUBLIC TO "MAKE MORE INFORMED DECISIONS ABOUT THEIR CARE" AND
8	THAT THE "IMPACT OF THESE FINAL POLICIES WILL HELP TO INCREASE
9	MARKET COMPETITION, AND ULTIMATELY DRIVE DOWN THE COST OF
10	HEALTH CARE SERVICES, MAKING THEM MORE AFFORDABLE FOR ALL
11	PATIENTS";
12	(d) On July 9, 2021, President Biden, Building upon efforts
13	OF PAST PRESIDENTS, ISSUED THE "EXECUTIVE ORDER ON PROMOTING
14	COMPETITION IN THE AMERICAN ECONOMY", DIRECTING THE SECRETARY
15	OF THE UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES
16	TO SUPPORT NEW AND EXISTING PRICE TRANSPARENCY INITIATIVES FOR
17	HOSPITALS;
18	(e) HEALTH-CARE PRICE TRANSPARENCY IS IN THE BEST INTEREST
19	OF ALL COLORADANS, INCLUDING:
20	(I) THE STATE GOVERNMENT, WHICH PURCHASES HEALTH-CARE
21	SERVICES FOR ALMOST A QUARTER OF ALL COLORADANS;
22	(II) COLORADO BUSINESSES, WHICH FUND EMPLOYEE MEDICAL
23	EXPENSES; AND
24	(III) COLORADO RESIDENTS, WHO ULTIMATELY BEAR THE BRUNT
25	OF HIGH HEALTH-CARE COSTS IN THE FORM OF HIGHER TAXES, LOWER
26	WAGES, AND RESIDENTS' OWN OUT-OF-POCKET SPENDING;
27	(f) Moreover, health-care prices in Colorado are among

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1	THE HIGHEST IN THE NATION;
2	(g) However, not all Colorado hospitals are in
3	COMPLIANCE WITH ALL OF THE DISCLOSURE REQUIREMENTS UNDER
4	FEDERAL LAW AND OTHER STATE LAWS GOVERNING HEALTH-CARE PRICE
5	TRANSPARENCY; AND
6	(h) THIS LACK OF COMPLIANCE WITH HEALTH-CARE PRICE
7	TRANSPARENCY LAWS BY COLORADO HOSPITALS DECREASES THE
8	LIKELIHOOD THAT COLORADO CONSUMERS WILL BE FULLY AWARE OF
9	AFFORDABLE HEALTH-CARE OPTIONS BEFORE PURCHASING ITEMS AND
10	SERVICES FROM HOSPITALS, PLACING HEALTH-CARE CONSUMERS AT
11	GREATER RISK OF COLLECTION ACTIONS AND OTHER ADVERSE ACTIONS
12	RELATING TO UNPAID MEDICAL BILLS.
13	(2) THEREFORE, THE GENERAL ASSEMBLY FINDS AND DECLARES
14	THAT IT IS IMPERATIVE TO PROTECT COLORADO HEALTH-CARE CONSUMERS
15	FROM COLLECTION ACTIONS AND OTHER ADVERSE ACTIONS TAKEN BY
16	COLORADO HOSPITALS DURING THE TIME WHEN THE HOSPITAL WAS NOT IN
17	MATERIAL COMPLIANCE WITH HOSPITAL PRICE TRANSPARENCY LAWS
18	INTENDED TO PROTECT HEALTH-CARE CONSUMERS.
19	25-3-802. Definitions. As used in this section, unless the
20	CONTEXT OTHERWISE REQUIRES:
21	(1) "COLLECTION ACTION" MEANS ANY OF THE FOLLOWING
22	ACTIONS TAKEN WITH RESPECT TO A DEBT FOR ITEMS AND SERVICES THAT
23	WERE PURCHASED FROM OR PROVIDED TO A PATIENT BY A HOSPITAL ON A
24	DATE DURING WHICH THE HOSPITAL WAS NOT IN MATERIAL COMPLIANCE
25	WITH HOSPITAL PRICE TRANSPARENCY LAWS:
26	(a) ATTEMPTING TO COLLECT A DEBT FROM A PATIENT OR PATIENT
27	GUARANTOR, WHETHER BY THE HOSPITAL, AN INDEPENDENT BILLING

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1	OFFICE, A DEBT COLLECTOR AS DEFINED IN SECTION 3-10-103 (9), A
2	COLLECTION AGENCY AS DEFINED IN SECTION 5-16-103 (3), OR OTHER
3	THIRD PARTY RETAINED BY OR ON BEHALF OF THE HOSPITAL;
4	(b) SUING THE PATIENT OR PATIENT GUARANTOR, OR ENFORCING
5	AN ARBITRATION OR MEDIATION CLAUSE IN ANY HOSPITAL DOCUMENTS
6	INCLUDING CONTRACTS, AGREEMENTS, STATEMENTS, OR BILLS; OR
7	(c) DIRECTLY OR INDIRECTLY CAUSING A REPORT TO BE MADE TO
8	A CONSUMER REPORTING AGENCY, AS DEFINED IN SECTION 5-16-103 (6).
9	(2) "Debt" has the same meaning as set forth in section
10	5-16-103.
11	(3) "FEDERAL CENTERS FOR MEDICARE AND MEDICAID SERVICES"
12	OR "CMS" MEANS THE CENTER FOR MEDICARE AND MEDICAID SERVICES
13	IN THE UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES.
14	(4) "Hospital" means, consistent with 45 CFR 180.20, a
15	HOSPITAL:
16	(a) LICENSED OR CERTIFIED BY THE DEPARTMENT PURSUANT TO
17	SECTION 25-1.5-103 (1)(a); OR
18	(b) APPROVED BY THE DEPARTMENT AS MEETING THE STANDARDS
19	ESTABLISHED FOR LICENSING A HOSPITAL.
20	(4) "HOSPITAL PRICE TRANSPARENCY LAWS" MEANS SECTION
21	2718(e) OF THE "PUBLIC HEALTH SERVICE (PHS) ACT", PUB.L. 78-410, AS
22	AMENDED, AND RULES ADOPTED BY THE UNITED STATES DEPARTMENT OF
23	HEALTH AND HUMAN SERVICES IMPLEMENTING SECTION 2718 (e).
24	(5) "ITEMS AND SERVICES" OR "ITEMS OR SERVICES" MEANS "ITEMS
25	AND SERVICES" AS DEFINED IN 45 CFR 180.20.
26	25-3-803. Failure to comply with hospital price transparency
2.7	laws - prohibiting collection of debt - penalty. (1) ON AND AFTER THE

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2	COMPLIANCE WITH HOSPITAL PRICE TRANSPARENCY LAWS ON THE DATE
3	THAT ITEMS OR SERVICES ARE PURCHASED FROM OR PROVIDED TO A
4	PATIENT BY THE HOSPITAL SHALL NOT INITIATE OR PURSUE A COLLECTION
5	ACTION AGAINST THE PATIENT OR PATIENT GUARANTOR FOR A DEBT OWED
6	FOR THE ITEMS OR SERVICES.
7	(2) A HOSPITAL THAT INITIATES OR PURSUES A COLLECTION
8	ACTION FOR A DEBT AGAINST A PATIENT OR PATIENT GUARANTOR IN
9	VIOLATION OF THIS SECTION:
10	(a) SHALL REFUND THE PAYER ANY AMOUNT OF THE DEBT THE
11	PAYER HAS PAID AND SHALL PAY A PENALTY TO THE PATIENT OR PATIENT
12	GUARANTOR IN AN AMOUNT EQUAL TO THE TOTAL AMOUNT OF THE DEBT;
13	(b) SHALL DISMISS OR CAUSE TO BE DISMISSED ANY COURT ACTION
14	WITH PREJUDICE AND PAY ANY ATTORNEY FEES AND COSTS INCURRED BY
15	THE PATIENT OR PATIENT GUARANTOR RELATING TO THE ACTION; AND
16	(c) REMOVE OR CAUSE TO BE REMOVED FROM THE PATIENT'S OR
17	PATIENT GUARANTOR'S CREDIT REPORT ANY REPORT MADE TO A
18	CONSUMER REPORTING AGENCY RELATING TO THE DEBT.
19	(3) NOTHING IN THIS PART 8:
20	(a) PROHIBITS A HOSPITAL FROM BILLING A PATIENT, PATIENT
21	GUARANTOR, OR THIRD-PARTY PAYER, INCLUDING HEALTH INSURER, FOR
22	ITEMS OR SERVICES PROVIDED TO THE PATIENT; OR
23	(b) REQUIRES A HOSPITAL TO REFUND ANY PAYMENT MADE TO THE
24	HOSPITAL FOR ITEMS OR SERVICES PROVIDED TO THE PATIENT, SO LONG AS
25	NO COLLECTION ACTION IS TAKEN IN VIOLATION OF THIS PART 8.
26	
27	SECTION 2. Act subject to petition - effective date. This act

EFFECTIVE DATE OF THIS SECTION, A HOSPITAL THAT IS NOT IN MATERIAL

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takes effect at 12:01 a.m. on the day following the expiration of the ninety-day period after final adjournment of the general assembly; except that, if a referendum petition is filed pursuant to section 1 (3) of article V of the state constitution against this act or an item, section, or part of this act within such period, then the act, item, section, or part will not take effect unless approved by the people at the general election to be held in November 2022 and, in such case, will take effect on the date of the

official declaration of the vote thereon by the governor.

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