

1 **TRUTH IN HEALTH CARE COSTS**

2 2019 GENERAL SESSION

3 STATE OF UTAH

4 **Chief Sponsor: Jacob L. Anderegg**

5 House Sponsor: _____

7 **LONG TITLE**

8 **General Description:**

9 This bill enacts provisions relating to health care costs.

10 **Highlighted Provisions:**

11 This bill:

- 12 ▶ defines terms;
- 13 ▶ requires certain health care providers to provide a patient with an itemized estimate
- 14 of the cost of providing health care services before the patient receives the health
- 15 care services; and
- 16 ▶ prohibits a health care provider from billing a patient in certain circumstances.

17 **Money Appropriated in this Bill:**

18 None

19 **Other Special Clauses:**

20 None

21 **Utah Code Sections Affected:**

22 ENACTS:

23 **58-1-509**, Utah Code Annotated 1953

25 *Be it enacted by the Legislature of the state of Utah:*

26 Section 1. Section **58-1-509** is enacted to read:

27 **58-1-509. Health care cost estimates -- Requirements -- Exceptions.**



28 (1) As used in this section:

29 (a) "Enrollee" means the same as that term is defined in Section 31A-1-301.

30 (b) "Health benefit plan" means the same as that term is defined in Section 31A-1-301.

31 (c) "Health care" means:

32 (i) health care as defined in Section 78B-3-403; and

33 (ii) all procedures, supplies, use of health care facilities, and other health care
34 associated with the diagnosis or treatment of a condition for a typical patient, from the time
35 treatment commences until the time treatment ends, including procedures, supplies, and other
36 health care provided by other practitioners.

37 (d) "Health care facility" means the same at that term is defined in Section 26-21-2.

38 (e) "Health care provider" means the same as that term is defined in Section
39 78B-3-403.

40 (2) (a) Except as provided in Subsection (6), a health care provider shall, at a patient's
41 request, provide the patient with an itemized estimate of the patient's cost for the health care.

42 (b) The itemized estimate in Subsection (2)(a) shall:

43 (i) be broken down by procedure or groups of procedures;

44 (ii) show the estimated cost for each procedure or group of procedures for which the
45 patient may be billed; and

46 (iii) (A) for a patient whose health care is not covered by a health benefit plan, include
47 the full price that the patient is required to pay for the health care adjusted for discounts,
48 write-offs, or other billing adjustments provided to uninsured patients with a similar condition;
49 or

50 (B) for a patient whose health care is covered by a health benefit plan, include the full
51 out-of-pocket amount that the patient will be required to pay for the health care, including any
52 copayment, deductible, coinsurance, or any amount that is not covered by the patient's health
53 benefit plan.

54 (3) If a patient requests an itemized estimate under Subsection (2)(a), the health care
55 provider:

56 (a) shall provide the itemized estimate before any health care is performed on the
57 patient;

58 (b) may not delay or deny health care because a patient makes a request under

59 Subsection (2)(a); and

60 (c) may not bill a patient or a patient's health benefit plan more for a procedure or a
61 group of procedures than the amount in the itemized estimate.

62 (4) After a health care provider begins providing health care that is described the
63 itemized estimate under Subsection (2)(a), if a patient needs health care that was not included
64 in the itemized estimate, the health care provider may not bill a patient or a patient's health
65 benefit plan for the health care unless:

66 (a) the health care is provided more than 29 days after the day on which the itemized
67 estimate is provided to the patient; or

68 (b) the health care provider provides the patient with an itemized estimate for the
69 health care before the health care is provided to the patient.

70 (5) A health care provider who provides an itemized estimate to an individual does not
71 create a provider-patient relationship with the individual solely by providing an itemized
72 estimate under this section.

73 (6) A health care provider is not required to provide an itemized estimate under this
74 section for health care to stabilize as defined in 42 U.S.C. Sec. 1395dd a patient with an
75 emergency medical condition as defined in 42 U.S.C. Sec. 1395dd.