

# **Facility Fees**

ISSUE BRIEF | House Bill 23-1215

#### Background

This session saw a major focus on health care affordability and consumer protections related to health care billing, such as facility fees. As a high priority issue for the Association, CHA worked with the bill sponsors to advocate for policies that make health care more affordable for patients without jeopardizing access to care. While the initial bill draft for House Bill (HB) 23-1215 included a prohibition on facility fees for all outpatient care, CHA worked with the bill sponsors to dramatically scale the bill back to advance facility fee transparency and an in-depth study of the issue.

### HB 23-1215: Prohibitions on Hospital Facility Fees

<u>HB 23-1215</u> has direct impacts to some Colorado hospitals **starting July 1, 2024**, related to facility fees for preventive services, billing disclosures, and change of ownership.

- **Preventive Services**: A provider or health system cannot charge, bill, or collect a facility fee directly from a patient that is not covered by a patient's insurance for preventive health care services in accordance with state and federal law. This section does not apply to critical access hospitals, sole community hospitals (or affiliated clinics) in rural or frontier areas, or Denver Health.
- **Billing Disclosures**: Providers affiliated with or owned by a hospital or health system must provide a notice to patients that a facility fee may be charged as well as the amount of the facility fee at the time an appointment is scheduled as well as when the service is provided.
- **Change of Ownership**: A health facility newly affiliated with or owned by a hospital or health system must provide written notice to each patient seen within the previous year noting the change of ownership and that the patient may be billed for a facility fee. Facility fees cannot be collected until at least 30 days after the notice is mailed.

The bill also requires a report on the impact of hospital facility fees in Colorado to be delivered to the General Assembly by Oct. 1, 2024. The report will be overseen by a steering committee that must include two hospital representatives – an individual designated by CHA and an individual representing a rural, critical access or independent hospital. The report will include an analysis of data from hospitals and health systems.

#### Timeline

- July 1, 2024: Hospitals must comply with billing disclosure and change of ownership transparency requirements
- Oct. 1, 2024: Report on facility fees due to General Assembly

## Additional Resources

Final bill text

Fiscal note

<u>CDC Preventive Services Coverage</u>

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