

Subject Hospital screening of patients for health coverage or assistance

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Overview

This bill requires hospitals to screen patients to determine eligibility for certain health coverage or assistance and to help patients apply for programs to assist with paying for health services. It requires hospitals to certify they complied with certain elements of the Minnesota attorney general/hospital agreement before taking certain steps to collect medical debt owed by patients, and prohibits hospitals from charging patients more than the hospital would be reimbursed from its most favored insurer, if the patient has an annual household income of less than \$125,000 and the treatment or service is not covered by insurance.

Summary

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| 1 | <p>Requirements for screening for eligibility for health coverage or assistance.</p> <p>Adds § 144.587. Requires hospitals to screen patients to determine if they are eligible for certain health coverage or assistance, and to assist patients in applying for charity care, completing an insurance affordability program application, or applying for a premium tax credit. Permits patients to decline to participate in the screening process or to accept services, and requires hospitals to provide notice of the availability of charity care.</p> |
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Subd. 1. Definitions. Defines the following terms for this section and sections 144.588 and 144.589: charity care, hospital, Minnesota attorney general/hospital agreement, most favored insurer, navigator, premium tax credit, presumptive eligibility, revenue recapture, uninsured service or treatment, and unreasonable burden.

Subd. 2. Screening. Requires a hospital to screen certain patients for eligibility for charity care, eligibility for state or federal public health care programs, and eligibility for a premium tax credit. Requires the hospital to attempt to complete the screening within 30 days after the patient receives services.

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Subd. 3. Charity care. Upon completion of a screening, requires a hospital to either assist the patient in applying for charity care or determine the patient is ineligible for charity care. Allows a hospital to take one of the listed steps related to payment, collections, or declining to provide health care only after the hospital determines the patient is ineligible for charity care. Prohibits hospitals from imposing application procedures for charity care that are an unreasonable burden for individual patients. Limits the information a hospital may request to verify assets and income, and prohibits hospitals from requiring duplicate forms of asset verification.

Subd. 4. Public health care program; premium tax credit. Lists steps a hospital must take if a patient is presumptively eligible for a public health care program, and lists steps a hospital may take if a patient is eligible for a premium tax credit.

Subd. 5. Patient may decline services. Provides that a patient may decline to participate in the screening process, apply for charity care, complete an insurance affordability program application, schedule an appointment with a navigator organization, or accept information about navigator services.

Subd. 6. Notice. Requires a hospital to post notice of the availability of charity care in certain locations in the hospital, and requires a hospital to make available on the facility website, the hospital's charity care policy, a plain-language summary of the policy, and the hospital's charity care application form.

This section is effective November 1, 2023.

2 **Certification of expert review.**

Adds § 144.588. Requires a hospital to complete an affidavit of expert review, certifying that the hospital has complied with certain elements of the Minnesota attorney general/hospital agreement, before filing an action to collect medical debt or to garnish the patient's wages or bank accounts, or before referring a patient's account to a debt collection agency.

Subd. 1. Requirement; action to collect medical debt or garnish wages or bank accounts. If a hospital files an action against a patient to collect medical debt or garnish a patient's wages or bank accounts, requires the hospital to serve on the patient an affidavit of expert review completed by a designated employee of the hospital and certifying that the hospital (1) made all of the verifications required of the hospital according to the Minnesota attorney general/hospital agreement; and (2) complied with the requirements in section 144.587 to conduct a patient screening and provide other assistance, unless the patient declined to participate in the screening or pursue assistance.

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Subd. 2. Requirement; referral to third-party debt collection agency. In order for a hospital to refer a patient's debt to a third-party debt collection agency, requires the hospital to complete an affidavit of expert review completed by a designated employee of the hospital and certifying that the hospital (1) confirmed the information required of the hospital according to the Minnesota attorney general/hospital agreement; and (2) complied with the requirements in section 144.587 to conduct a patient screening and provide other assistance, unless the patient declined to participate in the screening or pursue assistance.

Subd. 3. Penalty for noncompliance. Provides that failure to comply with subdivision 1 shall result in dismissal with prejudice of the action to collect the medical debt or garnish wages or bank accounts, and that failure to comply with subdivision 2 shall result in the commissioner of health assessing a fine on the hospital.

This section is effective November 1, 2023.

3 Billing of uninsured patients.

Adds § 144.589. Prohibits a hospital from charging a patient whose annual household income is less than \$125,000 for an uninsured service or treatment in an amount that exceeds the amount the hospital would be reimbursed from its most favored insurer. (This requirement is also part of the Minnesota hospital/attorney general agreement.)

This section is effective November 1, 2023.



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