

SENATE NO. 690

AN ACT REQUIRING NOTIFICATION OF PATIENT FINANCIAL RESPONSIBILITY

*Be it enacted by the Senate and House of Representatives in General Court assembled,
And by the authority of the same, as follows:*

- 1 SECTION 1. Section 24B of chapter 175 of the general laws, as appearing in the 2004 official
2 edition, is hereby amended by inserting after the first paragraph the following paragraph:
3 The commissioner shall also require health care insurers, including any self-insured sickness,
4 health, or welfare plan under this section, to recover all payments due from patients for covered
5 services when the total payments due is greater than two thousand dollars. For purposes of this
6 section, payments due from patients for covered services include co-payments, deductibles and co-
7 insurance. Said health care insurers shall include payments due from patients for covered health
8 care services in their payments to providers. Nothing in this section shall prohibit providers and
9 insurers from mutually agreeing to alternative billing and payment processes when it has been
10 determined that the patient has or can obtain secondary insurance coverage for the services
11 provided.
- 12 SECTION 2: Section 6 of Chapter 176O of the General Laws, as so appearing, is hereby amended
13 by striking out subsection (a)(3) and inserting in its place thereof the following subsection:

14 (a)(3) limitations on the scope of coverage for health care services and any other benefits to be
15 provided, all restrictions related to preexisting conditions of exclusions, and clear and
16 understandable information regarding the insured's financial obligations under the health benefit
17 plan, including specific examples of: each co-payment amount that the insured may be subject to
18 under the health benefit plan; applicable deductibles; and coinsurance amounts and a clear
19 explanation of the consequences that will result from the insured's failure to pay the proscribed
20 financial obligations;

21 SECTION 3: Section 6 of Chapter 176O of the General Laws, as so appearing, is hereby amended
22 by inserting at the end of subsection (a)(4) the following words:

23 “, including, if so requested, disclosure of the insured's financial obligation at that location prior
24 to the time non-emergency health care services are delivered;”

25 SECTION 4: The Commissioner of Insurance shall promulgate regulations to enforce the
26 provisions of this Act no later than 120 days after the effective date of the Act. Such regulations
27 shall be effective for provider contracts and an enrollees' policies which are entered into, renewed,
28 or amended on or after the regulations effective date.