



2023 State Action on Facility Fees

State	Bill	Status	Overview
Colorado	HB23-1215	Signed by Governor on 5/30/23	<ul style="list-style-type: none"> Prohibits providers from collecting a facility fee from a patient for preventive services. Requires providers/health systems to give patients notice at the time the appointment is made if/when they do charge facility fees and post signs in their common areas outlining that. Requires a health care provider to provide a standardized bill to patients that specifically lists any facility fee and includes contact information for filing an appeal. Creates a steering committee tasked with issuing a report on facility fees by October 2024.
Connecticut	HB 6669	Signed by Governor on 6/27/23	<ul style="list-style-type: none"> Allows a provider to only charge a facility fee for services provided on a hospital's campus, at a facility that includes a hospital emergency department, or at a freestanding emergency department. Prohibits hospitals/health systems from collecting a facility fee for services that may reliably be provided safely and effectively in a setting other than a hospital. Requires patient notification for any hospital-based service that may have a facility fee charged. Allows any provider with an insurance contract in effect on July 1, 2023, to continue to be reimbursed by an insurer until the contract expires.
Georgia	SB 20	Signed by Governor on 5/2/23	<ul style="list-style-type: none"> An insurer cannot be required to pay a facility fee to a hospital for telehealth services unless the hospital is the originating site.
Indiana	HB 1004	Signed by Governor on 5/4/23	<ul style="list-style-type: none"> Effectively bans facility fees starting Jan 1, 2025 by prohibiting an insurer, HMO, employer, or other person responsible for the payment of health services from accepting a bill that is submitted on an “institutional provider form”, which are what hospitals would use to bill for facility fees, from a non-profit health system with more than \$2 billion in patient service revenue in 2021. Requires each hospital to file an annual report to the state including

			information on facility fees collected.
Maine	LD 1795	Signed by Governor on 7/10/23	<ul style="list-style-type: none"> Authorized a task force to study the impact of facility fees on people in Maine and make recommendations for changes in laws or rules by December 6, 2023.
	LD 1191	Failed - heard and voted on in Health Coverage, Insurance and Financial Services on 5/16/23	<ul style="list-style-type: none"> A provider must provide patients an estimate of the cost of health care services and any associated facility fees ahead of an appointment.
Massachusetts	H 977	Heard in Joint Committee on Financial Services on 5/2/23	<ul style="list-style-type: none"> Prohibits a provider from charging a facility fee for services outside of those provided at a hospital's campus, a facility that includes a hospital emergency department, for emergency services provided at a satellite emergency facility, or for any service that may be provided safely and effectively outside of a hospital setting. Requires patient notification at the time of scheduling an appointment if facility fees are being charged and notification to all patients who received services at the facility in the previous calendar year if the facility is bought by a hospital or health system that patients may be charged facility fees. Allows the state to impose penalties for noncompliance. Allows the Attorney General to investigate an alleged violation and initiate a civil action against the offending party.
	S 792	Referred to Joint Committee on Health Care Financing on 2/16/23	<ul style="list-style-type: none"> Caps facility fees at \$30 per patient visit for outpatient services linked to a CPT E/M code provided at a hospital-based facility, other than a hospital emergency department, that are located off-site. Allows hospitals to continue to collect reimbursement from insurers for facility fees over \$30 until the expiration of their contract. Mandates that if the facility is in-network for a patient's insurance, the provider should notify the patient that they may be charged a facility fee. Requires a study of potential strategies to raise awareness of the difference in cost to the patient for receiving outpatient services at a hospital outpatient department versus a non-hospital setting.

	H 1187 S 771	Referred to Joint Committee on Health Care Financing on 2/16/23	<ul style="list-style-type: none"> Requires patient notification prior to the delivery of non-emergency services that the patient may be charged a facility fee and that they may not have been if they went to a non-hospital based facility.
Minnesota	SF 220	Failed - referred to Senate Health and Human Services Committee on 1/12/23	<ul style="list-style-type: none"> A provider must provide patients an estimate of the cost of health care services and any associated facility fees ahead of an appointment.
Mississippi	HB 1135	Failed - referred to House Committee on Insurance on 1/16/23	<ul style="list-style-type: none"> Prohibits providers from being reimbursed for facility fees on telehealth services, unless the provider was the originating site.
North Carolina	S 321 H 367	Passed out of Senate, referred to House Committee on Rules, Calendar and Operations on 5/3/23	<ul style="list-style-type: none"> Prohibits facility fees except for when services are provided at the hospital's main campus or at a facility that includes an emergency department Regardless of location, prohibits charging a facility fee on any outpatient E/M services, or any other service that can be provided safely and effectively in non-hospital settings. Requires hospitals/health systems to annually submit a report to the Department that is published on the Department's website outlining specific information on facility fees collected. Allows the Department to audit a provider for compliance with the facility fee requirements and imposes penalties for noncompliance
Texas	HB 1692 SB 1275	Failed - left pending after public hearings in House Committee on Health Care Reform on 4/13 and Senate Health and Human Services on 4/5.	<ul style="list-style-type: none"> Prohibits charging facility fees for any outpatient care provided outside of a freestanding emergency room or for any service that could be safely provided outside of a hospital setting. Requires providers to submit a one time report to the department detailing any facility fees charged. Allows the state to audit a provider for compliance and establishes penalties for noncompliance.
	HB 4035	Failed - referred to House Select Committee on Health Care Reform on 3/20/23	<ul style="list-style-type: none"> Ahead of providing nonemergency services, a provider must give patients an estimate of the cost of health care services and any associated facility fees and the amount the patient's insurance will reimburse the provider, if applicable.