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STATE OF MARYLAND
OFFICE OF THE ATTORNEY GENERAL
CONSUMER PROTECTION DIVISION

March 10, 2022

To: The Honorable Shane E. Pendergrass
Chair, Health and Government Operations Committee

From: The Office of the Attorney General's Health Education and Advocacy Unit

Re: House Bill 1084 (COVID-19 Response Act of 2022): Support with Amendment

The Office of the Attorney General's Health Education and Advocacy Unit (HEAU) supports the COVID-19 Response Act of 2022 as amended and reprinted on 3/9/22 at 2:26 p.m. with an additional proposed amendment regarding the Act's provisions about urgent care centers. We wish to thank the sponsor for her amendments to date.

The Act would add a new section about urgent care centers to the Health Care Facility Rate Setting section of the Health General Article that provides at amended page 10, lines 26-31 and page 11, lines 1-7:

19-211.1.

(A) IN THIS SECTION, "HOSPITAL-ADJACENT URGENT CARE CENTER" MEANS A NONHOSPITAL ENTITY THAT:

- (1) OPERATES FOR THE PURPOSE OF PROVIDING URGENT CARE AND OTHER BASIC HEALTH CARE SERVICES, INCLUDING DIAGNOSTIC, TREATMENT, CONSULTATIVE, REFERRAL, AND PREVENTIVE SERVICES;
- (2) IS LOCATED ADJACENT TO A FACILITY THAT PROVIDES HOSPITAL SERVICES SUBJECT TO THE RATE-SETTING JURISDICTION OF THE COMMISSION;
- (3) IS DEDICATED TO THE DELIVERY OF WALK-IN CARE OUTSIDE OF A HOSPITAL EMERGENCY DEPARTMENT, A FREESTANDING CLINIC, OR A PHYSICIAN'S OFFICE; AND
- (4) IS CLEARLY IDENTIFIED AS AN UNREGULATED URGENT CARE CENTER,

SEPARATE FROM THE REGULATED HOSPITAL FACILITY.

(B) A HOSPITAL-ADJACENT URGENT CARE CENTER:

(1) IS NOT SUBJECT TO THE RATE-SETTING JURISDICTION OF THE COMMISSION; AND

(2) MAY SET RATES AND RECEIVE REIMBURSEMENT FOR HEALTH CARE SERVICES PROVIDED AT THE CENTER ON AN UNREGULATED BASIS.

There is currently no statutory definition of “urgent care center” or licensing and regulatory scheme that provides clear oversight for the services that are provided at facilities that hold themselves out as urgent care centers. The amendments add the phrase “a nonhospital entity” to the definition of “hospital-adjacent urgent care center” but it is unclear what that phrase means. It could be interpreted to mean that hospital-owned urgent care centers can charge regulated facility fees to consumers, a fee the HEAU opposes. “Adjacent” and “the delivery of walk-in care outside of a hospital emergency department” are not defined but suggest proximity to Emergency Departments at hospitals where EMTALA applies and requires screening of patients who require stabilization – often unbeknownst to them—before being transferred or referred elsewhere. Consumers who present to hospital campuses with urgent or emergent needs often don’t understand the unintended consequences of entering one facility over the other. They can’t know if the urgent care facility is required to assess the patient, whether they will face facility fees or out-of-network surprise bills, or if they might be eligible for free or reduced cost care at one facility over another.

Our office recently received a complaint from a hospital system employee who presented to a hospital system-named Urgent Care Center knowing that the hospital system was in-network with his plan. He was shocked when he received a balance bill from the out-of-network Urgent Care Center provider and concerned that the bill also suggested he might receive a separate facility fee bill. (See redacted complaint and response.) We also received a complaint from an unemployed consumer who presented to a hospital system-named Urgent Care Center for a post-exposure COVID test and later received a bill for the COVID test. That bill also indicated that she could expect a separate facility fee bill. (See redacted complaint and response).

These are just two examples of hospital system-named urgent care facilities billing consumers in unexpected ways.

Without the fundamentals being defined and brought within a regulatory scheme that would fully protect the physical and financial interests of consumers, we respectfully suggest the bill’s provisions risk harmful unintended consequences.

We propose striking the current provisions and substituting this language:

The Department of Health will study the need for a licensing and regulatory scheme applicable to facilities holding themselves out as urgent care centers, including those on hospital campuses, and will convene a stakeholder workgroup that will report the conclusions and recommendations of the workgroup on or before December 31, 2023.

With this additional amendment, we believe the Act will strengthen protections against foreseeable COVID-19 surges in nursing homes, assisted living programs, higher education residential facilities and among the public generally through updates to the testing, contact tracing and vaccination plans effectuated by Chapters 29 and 31 of the 2021 special session, which are extended through December 31, 2023.

We urge a favorable report, with the proposed amendment.

cc: Delegate Pena-Melnyk, Sponsor

How has the business responded to you? With whom did you speak?

I spoke to the receptionist who stated to contact my insurance. I spoke with United Healthcare with Gary who said that they will not pay for this or let me appeal Reference number D-4072.

What would you like the insurance carrier, provider or business to do to resolve your complaint?

To cover my visit to the urgent care of my employer. Does not make sense that they are out of network.

Is there any additional information you would like to add?



Christy Monroe
Reimbursement Patient Accounts Manger
Patient Services Billing Department
University of Maryland Faculty Physicians, Inc.
University of Maryland Urgent Care.
250 West Pratt Street, Suite 500
Baltimore, MD 21201
Customer Service Billing Phone (410) 528-5711
Phone (667) 214-1337
Fax (410)328-8224

March 19, 2021

Via fax and mail

Frank Erardi
State of Maryland Office of the Attorney General
Consumer Protection Division
200 Saint Paul Place 16th Floor
Baltimore, Maryland 21202

Fax: 410-576-6571

RE: HAU 323470

Dear Mr. Erardi,

I am writing to you on behalf of the University of Maryland Urgent Care, University of Maryland Faculty Physicians, Inc. and its affiliated practice groups, in regards to case # 323470 that was forwarded by your office.

We at the University of Maryland Urgent Care, University of Maryland Faculty Physicians, and all of our affiliated practice groups, have made a commitment to delivering care that embodies Service Excellence and Patient Satisfaction. The University of Maryland Urgent Care Department, which is separate from University of Maryland Faculty Physicians, is not in network with the patient's insurance. We have contacted management in The University of Maryland Urgent Care Department for review. The University of Maryland Urgent Care Practice Management has approved waiving the remaining balance of \$215.18. A statement has been included as a reference.

We hope that this patient accepts our sincere apologies for not meeting his expectations. If you have any further concerns or questions please feel free to contact me.

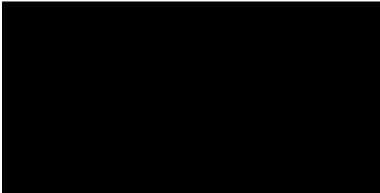
Sincerely,

Christy Monroe

Christy Monroe
Reimbursement Patient Accounts Manager
University of Maryland Faculty Physicians, Inc.
University of Maryland Urgent Care



UNIVERSITY OF MARYLAND URGENT CARE
 250 W Pratt St, Suite 600
 Baltimore, MD 21201



PATIENT NAME [REDACTED]		ACCOUNT NUMBER [REDACTED]	
STATEMENT DATE [REDACTED]	DATE DUE 04/09/2021	AMOUNT DUE \$0.00	AMOUNT PAID \$
Choose Method of Payment: (check one box)			
<input type="checkbox"/> MasterCard	<input type="checkbox"/> Visa	<input type="checkbox"/> Discover	<input type="checkbox"/> American Express
Card Holder Name		Signature	
Credit Card #		Expiration Date	

MAKE CHECKS PAYABLE AND MAIL TO:
 University of Maryland Urgent Care
 PO Box 419466
 Boston, MA 02241-9466

Please check this box if your address or insurance has changed.
 Make those changes on the reverse side.

Please detach this portion and return with your payment.

University of Maryland Urgent Care
 Statement Activity as of 03/19/2021

This statement is for services provided to you by physicians affiliated with University of Maryland Urgent Care. This statement does not reflect any services that are still pending with your insurance company. You may receive a separate bill for any hospital services.

ACCOUNT NUMBER: [REDACTED]
 PATIENT: [REDACTED]
 GUARANTOR: [REDACTED]

Patient Email: UMMSBILLING@FPI.UMARYLAND.EDU
 Attorney Email: attorneyinquiries@fpi.umaryland.edu
 Please call: 410-528-5711
 between the hours of 9AM to 4PM Monday
 through Friday to speak to a customer service representative

Important Message(s) Regarding Your Account

Summary of Services Included on this Statement

INVOICE #:	SERVICE DATE:	PROVIDER:	CHARGE AMOUNT:	AMOUNT DUE:
[REDACTED]	01/23/2020	Thomas A Windsor MD	\$345.00	\$0.00
Total Amount Due				\$0.00

Detail of Services Included on this Statement

INVOICE NUMBER:	Provider:	Service Description	Charge	Date	Payment Activity	Amount Due
[REDACTED]	Thomas A Windsor MD - Urgent Care	01/23/2020 99214 Office Visit (level 4)	\$345.00	03/06/2020	United Payment	\$0.00
				06/23/2020	Payment-Thank You	\$129.82
				03/19/2021	Adjustment	\$215.18
Total Charge			\$345.00			\$0.00

COMPLAINT INFORMATION

Please include a copy of the signed Authorization for the Release of Medical Information and copies of all bills, receipts, explanation of insurance benefits (EOBs), insurance card(s) and any other papers related to your complaint. Having copies of the relevant documents will allow us to assist you more quickly.

Have you received the service, care or product? Yes

If so, when was the service, care or product received? 5/21/20

What type of product or service is involved in the dispute?

COVID-19 Test

Please tell us about your problem.

I needed to get a COVID-19 test due to possible exposure. The only place that was available to go to was the University of Maryland Urgent Care. I was charged \$348.00 for the service. I cannot pay that, as I have been laid off because of the pandemic, and now the bill has been sent to a collections agency. Please help if possible!

How has the business responded to you? With whom did you speak?

N/A

What would you like the insurance carrier, provider or business to do to resolve your complaint?

Cover the COVID-19 test.

Is there any additional information you would like to add?



ABOUT YOUR PHYSICIAN ACCOUNT

Please call us if you have any questions or concerns about your account. To maintain a current status, we must receive payment in full.

ACCOUNT SUMMARY

Account Number [REDACTED]
 Patient Name [REDACTED]
 Financially Responsible [REDACTED]
 Statement Date 9/1/2020
 Total Charges \$ 348.00
 Payments/Adjustments Received \$ 0.00

**MINIMUM
DUE NOW**

\$ 348.00

**DATE DUE:
9/22/2020**



QUESTIONS?

Call **410-528-5711**

between the hours of 9AM to 4PM Monday through Friday to speak to a customer service representative
 Please refer to your Account Number on all correspondence.

SERVICE DATE	INVOICE	PROVIDER	PROCEDURE/DESCRIPTION OF SERVICES	CHARGES	PAYMENTS/ADJUSTMENTS	AMOUNT DUE
05/21/2020	[REDACTED]	Thomas L Hines CRNP Urgent Care	99203 New Patient Visit (level 3) INVOICE BALANCE	348.00		348.00
					TOTAL CHARGES	\$ 348.00
					PAYMENTS / ADJUSTMENTS	\$ 0.00
					PLEASE PAY THIS AMOUNT	\$ 348.00

**THIS STATEMENT IS FOR SERVICES PROVIDED TO YOU BY PHYSICIANS AFFILIATED WITH THE UNIVERSITY OF MARYLAND URGENT CARE.
 YOU MAY RECEIVE ANOTHER BILL FOR HOSPITAL SERVICES.
 THIS STATEMENT DOES NOT REFLECT ANY SERVICES THAT ARE STILL PENDING WITH YOUR INSURANCE COMPANY.**

TEAR HERE AND RETURN BOTTOM STUB WITH YOUR PAYMENT. KEEP TOP PORTION.

SEE REVERSE FOR IMPORTANT INFORMATION



UNIVERSITY of MARYLAND
URGENT CARE
250 W Pratt St, Suite 500
Baltimore, MD 21201
For Return Mail Only

PHYSICIAN STATEMENT	STATEMENT DATE	9/1/2020	DUE DATE	9/22/2020
PATIENT NAME		ACCOUNT NUMBER		
[REDACTED]		[REDACTED]		
TOTAL ACCOUNT BALANCE	MINIMUM DUE NOW	WRITE IN AMOUNT YOU ARE PAYING		
\$ 348.00	\$ 348.00			

Check if your address or insurance information has changed. Indicate changes on the back.

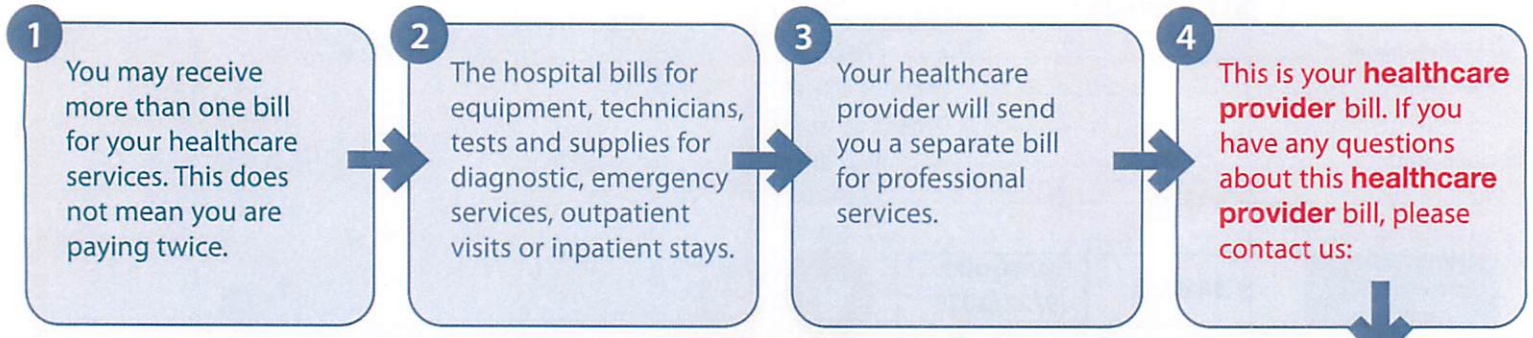


SEE BACK

Make check payable and send to:

UNIVERSITY OF MARYLAND URGENT CARE
 PO BOX 419466
 BOSTON, MA 02241-9466

Why do I get a hospital bill AND a physicians' bill?



AMOUNTS DUE AT TIME OF SERVICE

Our policy is to collect all known amounts due at the time of service. This includes insurance co-pays, charges for elective procedures and charges for services that are not covered by your insurance.

BILLING TO INSURANCE

We will bill your insurance carrier(s) for all covered services. Your invoice will be processed according to the Explanation of Benefits your insurance company sends to us. If you have any questions concerning how your insurance claim was processed, please contact your insurance company directly.

BILLING FOR PATIENT BALANCES

Our policy requires that patients pay balances by the "Date Due" at the top of the statement. If the balance is not paid on time, your account may progress in our collection process. If you are having difficulty paying your bill, we can provide you with various payment options.

Please call **410-528-5711** to discuss your financial needs.

CONTACT US



410-528-5711

between the hours of 9AM to 4PM Monday through Friday to speak to a customer service representative



UMMSBILLING@FPI.UMARYLAND.EDU



University of Maryland Urgent Care
PO Box 419466
Boston, MA 02241-9466

If you are an attorney please send all email requests to:



attorneyinquiries@fpi.umaryland.edu

The content of the bill can only be discussed with the patient and/or guarantor.

FPI STMT 28UC (10/17)

PLEASE COMPLETE THE APPROPRIATE SECTIONS AND RETURN IN THE ENCLOSED ENVELOPE AS SOON AS POSSIBLE.

CREDIT CARD PAYMENT		INSURANCE INFORMATION		SECONDARY INSURANCE INFORMATION	
<input type="checkbox"/> MasterCard <input type="checkbox"/> VISA <input type="checkbox"/> AMERICAN EXPRESS <input type="checkbox"/> DISCOVER		Insurance Company Name and Address		Insurance Company Name and Address	
CREDIT CARD NO:		Policy / ID Number		Policy / ID Number	
EXP. DATE: MMYYYY SECURITY CODE:		Group Number		Group Number	
Print Cardholder Name		Effective Date		Effective Date	
CARDHOLDER SIGNATURE		Subscriber Name		Subscriber Name	
		Pt.'s Relationship to Subsc.		Pt.'s Relationship to Subsc.	
		Subscriber DOB		Subscriber DOB	
		Subscriber Sex		Subscriber Sex	
		Subscriber Employer		Subscriber Employer	
WORK RELATED INJURY					
		Injury Date		Case No.	
		Employer Name		Employer Phone	
		Employer Address		City State Zip Code	
		Carrier Name			
		Carrier Address		City State Zip Code	
CHANGE OF ADDRESS					
Name					
Address					
City		State		ZIP Code	
Telephone					

Y26680DC36-SEQ 1886



PO Box 30096
Alexandria VA 22310-8096
ADDRESS SERVICE REQUESTED



P.O. Box 30096 • Alexandria, VA 22310-8096
703-253-7000 Office • 888-729-2234 Toll Free
703-313-9257 Fax

November 6, 2020

Reference #: [REDACTED]
Re: University Of Maryland Urgent Care
Total: \$348.00



American Collections Enterprise, Inc.
PO Box 30096
Alexandria VA 22310-8096

*** Detach Upper Portion And Return With Payment ***

1886-QXACEI10-AAMCML0-06/06/18

November 6, 2020

Reference #: [REDACTED]
RE: University Of Maryland Urgent Care

Amount: \$348.00

Dear [REDACTED]

Please be advised that the following account has been referred to American Collections Enterprise, Inc.:

Account: [REDACTED] 05/21/20 \$348.00

To obtain additional information regarding your account or to authorize payment by chatting with our virtual agent, please enter resolvemyaccounts.com/acei in the address bar of your web browser or call 833-729-2234. Please forward any written correspondence to ACEI, PO Box 30096, Alexandria, VA 22310-8096.

We can also accept your payment by phone or the internet via check, Mastercard, or Visa. To authorize your payment via the internet, please visit our website at payacei.com. Our payment processor, LucentPay will charge a 3.5% convenience fee for all credit and debit card transactions. ACEI will add a \$35 check fee to all returned ACH and check transactions as permitted under Maryland law.

Please note that our agency is a participating member with all major credit reporting bureaus.

Sincerely,

American Collections Enterprise, Inc.
A Professional Debt Collection Agency Since 1993
703-253-7000 • 888-729-2234
(703) 253-7016 Direct In Dial

ACEI is a debt collector. This is an attempt to collect a debt. Any information obtained will be used for that purpose. Unless you notify this office within 30 days after receiving this notice that you dispute the validity of this debt or any portion thereof, this office will assume this debt is valid. If you notify this office in writing within 30 days from receiving this notice, this office will obtain verification of the debt or obtain a copy of a judgment and mail you a copy of such judgment or verification. If you request this office in writing within 30 days after receiving this notice, this office will provide you the name and address of the original creditor, if different from the current creditor.

Maryland License #1497

00010278-001886-01-1-AA



SARS COV-2 (COVID-19) QUAL, NAA - Details

Test results are released to patients through MyPortfolio automatically. In some cases, the provider may not have reviewed them yet. Please be aware that reference ranges are guidelines, and do not necessarily reflect an abnormal result for a particular patient. Please contact your provider if you have concerns.

Study Result

Narrative

Performed at: 01 - LabCorp Burlington
1447 York Court, Burlington, NC 272153361
Lab Director: Sanjai Nagendra MD, Phone: 8007624344

Component Results

Component	Your Value	Standard Range
SARS-CoV-2 (COVID-19) RNA	Your Value Not Detected	<i>Standard Range</i> <i>Not Detected</i>

This test was developed and its performance characteristics determined by LabCorp Laboratories. This test has not been FDA cleared or approved. This test has been authorized by FDA under an Emergency Use Authorization (EUA). This test is only authorized for the duration of time the declaration that circumstances exist justifying the authorization of the emergency use of in vitro diagnostic tests for detection of SARS-CoV-2 virus and/or diagnosis of COVID-19 infection under section 564(b)(1) of the Act, 21 U.S.C. 360bbb-3(b)(1), unless the authorization is terminated or revoked sooner.

When diagnostic testing is negative, the possibility of a false negative result should be considered in the context of a patient's recent exposures and the presence of clinical signs and symptoms consistent with COVID-19. An individual without symptoms of COVID-19 and who is not shedding SARS-CoV-2 virus would expect to have a negative (not detected) result in this assay.

General Information

Ordered by Thomas L. Hines, CRNP

Collected on 05/21/2020 12:00 AM

Resulted on 05/24/2020 1:05 AM

Result Status: Final result

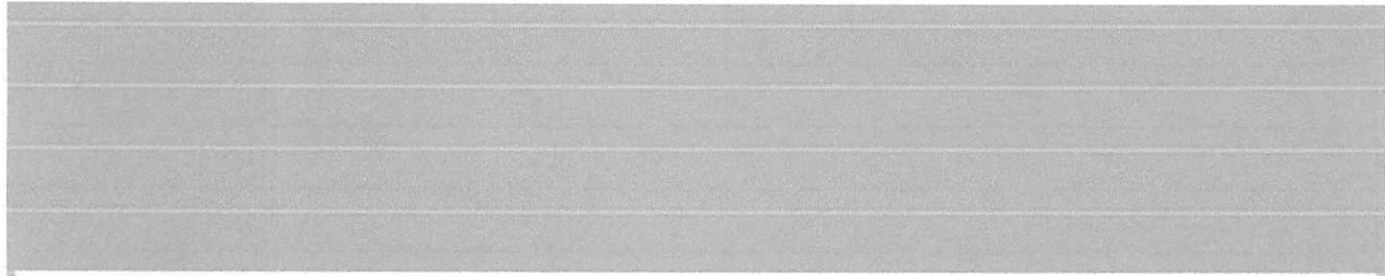
This test result has been released by an automatic process.

MyChart® licensed from Epic Systems Corporation © 1999 - 2020

Visit Details

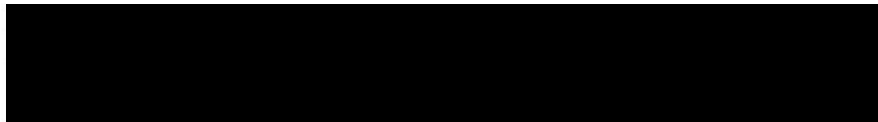
ED AVS Signature Page

Some of this information might have changed since your visit. This is what your chart included on the day of your visit.



Department of Emergency Medicine
105 PENN ST
BALTIMORE MD 21201
Phone: 410-328-1660
Fax: 410-328-1963

Acknowledgement of Discharge Instructions



You were seen for:

1. SUSPECTED COVID-19 VIRUS INFECTION (Primary Diagnosis)
2. UPPER RESPIRATORY TRACT INFECTION, UNSPECIFIED TYPE
3. SORE THROAT

Your treatment team included:

Provider	Specialty	From	To
Thomas L. Hines, CRNP	Emergency Medicine	05/21/20 0810	---

Follow up instructions: (Call to confirm and/or arrange today.)

Valerie Cothran, MD. Schedule an appointment as soon as possible for a visit in 1 week.

Specialties: Family Medicine, Orthopaedic Surgery, Sports Medicine, Fam Med, Sports Med
Why: As needed, if symptoms worsen
Contact information
29 S. Paca Street Lower Level
Baltimore MD 21201
667-214-2100

Urgent Care UMMC.

Specialty: Urgent Care
Why: As needed, if symptoms worsen
Contact information

105 Penn St
Baltimore Maryland 21201
410-328-1660

I understand all these instructions and had my questions answered.

Patient/Representative Signature

Date

Time

Instructions given by

Date

Time

This page stays with and is filed with the paper medical record.

Printed on 5/21/20 8:48 AM

Page 1