

SB0981/573125/1

BY: Finance Committee

AMENDMENTS TO SENATE BILL 981
(First Reading File Bill)

AMENDMENT NO. 1

On page 1, in the sponsor line, strike “**Senator Hershey**” and substitute “**Senators Hershey, Beidle, Gile, Hayes, C. Jackson, Kramer, Lam, Mautz, Ready, and A. Washington**”; in line 3, after the first “of” insert “excluding a civil action on a certain contract between a hospital and a consumer from a certain provision of law establishing the statute of limitations on civil actions on certain specialties;”; and after line 13, insert:

“BY repealing and reenacting, without amendments,
Article – Courts and Judicial Proceedings
Section 5–101 and 5–1201(a) and (e)
Annotated Code of Maryland
(2020 Replacement Volume and 2024 Supplement)

BY repealing and reenacting, with amendments,
Article – Courts and Judicial Proceedings
Section 5–102
Annotated Code of Maryland
(2020 Replacement Volume and 2024 Supplement)

BY repealing and reenacting, without amendments,
Article - Health – General
Section 19–201(a) and (e) and 19–301(a) and (f)
Annotated Code of Maryland
(2023 Replacement Volume and 2024 Supplement)”.

AMENDMENT NO. 2

On page 1, after line 20, insert:

“Article – Courts and Judicial Proceedings

5–101.

A civil action at law shall be filed within three years from the date it accrues unless another provision of the Code provides a different period of time within which an action shall be commenced.

5–102.

(a) An action on one of the following specialties shall be filed within 12 years after the cause of action accrues, or within 12 years from the date of the death of the last to die of the principal debtor or creditor, whichever is sooner:

- (1) Promissory note or other instrument under seal;
- (2) Bond except a public officer’s bond;
- (3) Judgment;
- (4) Recognizance;
- (5) Contract under seal; or
- (6) Any other specialty.

(b) A payment of principal or interest on a specialty suspends the operation of this section as to the specialty for three years after the date of payment.

(c) This section does not apply to:

(1) A specialty taken for the use of the State; [or]

(2) A deed of trust, mortgage, or promissory note that has been signed under seal and secures or is secured by owner-occupied residential property, as defined in § 7-105.1 of the Real Property Article; OR

(3) A CONTRACT, INCLUDING A CONTRACT UNDER SEAL, OR A PROMISSORY NOTE OR OTHER INSTRUMENT UNDER SEAL THAT IS:

(I) RELATED TO AN OBLIGATION OF A CONSUMER TO PAY CONSUMER DEBT, AS DEFINED IN § 5-1201 OF THIS TITLE, THAT ARISES FROM HOSPITAL SERVICES, AS DEFINED IN § 19-201 OF THE HEALTH – GENERAL ARTICLE; AND

(II) BETWEEN A CONSUMER AND A HOSPITAL, AS DEFINED IN § 19-301 OF THE HEALTH – GENERAL ARTICLE.

5-1201.

(a) In this subtitle the following words have the meanings indicated.

(e) “Consumer debt” means a secured or an unsecured debt that:

(1) Is for money owed or alleged to be owed; and

(2) Arises from a consumer transaction.”;

and after line 21, insert:

“19-201.

(Over)

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(a) In this subtitle the following words have the meanings indicated.

(e) (1) “Hospital services” means:

 (i) Inpatient hospital services as enumerated in Medicare Regulation 42 C.F.R. § 409.10, as amended;

 (ii) Emergency services, including services provided at a freestanding medical facility licensed under Subtitle 3A of this title;

 (iii) Outpatient services provided at a hospital;

 (iv) Outpatient services, as specified by the Commission in regulation, provided at a freestanding medical facility licensed under Subtitle 3A of this title that has received:

 1. A certificate of need under § 19–120(o)(1) of this title;

or

 2. An exemption from obtaining a certificate of need under § 19–120(o)(3) of this title; and

 (v) Identified physician services for which a facility has Commission–approved rates on June 30, 1985.

(2) “Hospital services” includes a hospital outpatient service:

 (i) Of a hospital that, on or before June 1, 2015, is under a merged asset hospital system;

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(ii) That is designated as a part of another hospital under the same merged asset hospital system to make it possible for the hospital outpatient service to participate in the 340B Program under the federal Public Health Service Act; and

(iii) That complies with all federal requirements for the 340B Program and applicable provisions of 42 C.F.R. § 413.65.

(3) “Hospital services” does not include:

(i) Outpatient renal dialysis services; or

(ii) Outpatient services provided at a limited service hospital as defined in § 19–301 of this title, except for emergency services.”.

On page 20, after line 8, insert:

“19–301.

(a) In this subtitle the following words have the meanings indicated.

(f) “Hospital” means an institution that:

(1) Has a group of at least 5 physicians who are organized as a medical staff for the institution;

(2) Maintains facilities to provide, under the supervision of the medical staff, diagnostic and treatment services for 2 or more unrelated individuals; and

(3) Admits or retains the individuals for overnight care.”.

(Over)

On page 6, strike beginning with “**THE**” in line 14 down through “**BILL**” in line 22 and substitute “**THE HOSPITAL SHALL OBTAIN DOCUMENTATION ENSURING THAT THE PATIENT OR THE PATIENT’S AUTHORIZED REPRESENTATIVE ACKNOWLEDGES THE PATIENT’S RECEIPT OF THE NOTICE BEFORE DISCHARGING THE PATIENT.**”

2. IF A PATIENT CHOOSES NOT TO APPLY FOR FINANCIAL ASSISTANCE, THE PATIENT’S DOCUMENTED ACKNOWLEDGMENT SHALL INDICATE THAT THE PATIENT IS NOT APPLYING ON THE DAY OF THE ACKNOWLEDGMENT BUT MAY APPLY WITHIN 240 DAYS IMMEDIATELY FOLLOWING THE PATIENT’S RECEIPT OF THE INITIAL HOSPITAL BILL”.

On page 12, in line 25, strike “**OR A PROFESSIONAL FEE**”.