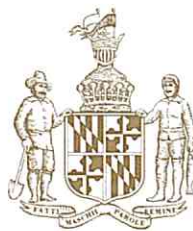


SENATOR DELORES G. KELLEY  
*Legislative District 10*  
Baltimore County

—  
*Chair*  
Finance Committee

—  
Executive Nominations Committee  
Rules Committee  
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THE SENATE OF MARYLAND  
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**TESTIMONY OF DELORES G. KELLEY**

**REGARDING SENATE BILL 632-HEALTH FACILITIES-HOSPITALS-DISCLOSURE OF  
OUTPATIENT FACILITY FEES (FACILITY FEE RIGHT-TO-KNOW ACT)**

**BEFORE SENATE FINANCE COMMITTEE**

**ON MARCH 5, 2020**

**Mr. Vice-chair and Members:**

**Senate Bill 632 is the 2020 version of Senate Bill 803 which in 2019 unanimously passed the Senate. SB 632 is a simple disclosure Bill.**

**Currently patients who visit their medical providers who have out-patient offices within hospital facilities or in offices elsewhere in community locations can be charged “hospital out-patient facility fees” which are usually added to the bills patients receive from their medical provider. Patients of these medical providers are almost never aware of the “fees” and are shocked when the bill**

**comes. Because of the surprised, excessive hospital bills on top of the doctor's bills, many of these patients have filed complaints with the Office of the Attorney General's Consumer Protection Division. According to that Division's Health Education and Advocacy Unit, example of complaints of doctor/hospital bills are \$119- doctor/\$1,456-hospital; \$425-doctor/\$1,025-hospital and \$454-doctor/\$1,746-doctor.**

**Senate Bill 632 mandates that when patients make their appointments, they receive notice of fee information and can then go elsewhere if they choose.**

**Patients will be told orally and in writing:**

- that they will get a bill from the hospital separate from the provider's bill;**
- the amount, or estimate and range of fees, based on average or typical charges for same or similar appointments, the hospital will charge an out-patient;**
- if the provider can be seen at a location without facility fees;**
- that they should contact their insurance carrier about coverage for their out-patient visits; and**
- that financial assistance is available if they are eligible.**

**Joint agency amendments (HSCRC and HEAU) align the definition of "out-patient services with the current regulatory definition. This inclusive definition would**

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**ensure that a patient receiving a hospital out-patient service that carries a facility fee will be told about the fees when making appointments. All patients deserve notice so they can choose care they can afford.**

**I urge a favorable report for SB 632 with amendments to be offered by HSCRC and HEAU. I believe that the MHA has separate amendments.**