

SENATE BILL 757

By Beavers

AN ACT to amend Tennessee Code Annotated, Title 33;  
Title 56; Title 63 and Title 68, relative to access to  
information regarding the cost of medical services.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF TENNESSEE:

SECTION 1. Tennessee Code Annotated, Title 68, Chapter 11, Part 2, is amended by adding the following language as a new section:

(a) Except as provided in subsection (b), prior to a procedure or episode of care being provided and upon request by a patient or prospective patient, a healthcare provider shall, within two (2) business days of the request, disclose to the patient or prospective patient the specific amount for the procedure or episode of care. However, if a healthcare provider is unable to quote a specific amount due to the healthcare provider's inability to predict the specific treatment or diagnostic code, the healthcare provider must disclose the most reasonable estimated amount that allows the patient or prospective patient to make an informed financial decision. A healthcare provider shall calculate all amounts pursuant to this subsection (a) notwithstanding any potential coverage, or lack thereof, provided by the patient or prospective patient's health benefit plan.

(b) A healthcare provider is not required to comply with subsection (a) if a medical emergency exists. For purposes of this subsection (b), "medical emergency" means a condition that requires the provision of medical services within forty-eight (48) hours of the patient or prospective patient making a request pursuant to subsection (a) to prevent serious injury or death to the patient or prospective patient.

(c) As used in this section:

(1) "Facility" means an institution licensed under title 33 or 68, providing healthcare services or a healthcare setting, including, but not limited to, hospitals and other licensed inpatient centers; ambulatory surgical or treatment centers; skilled nursing centers; residential treatment centers; diagnostic, laboratory, and imaging centers; and rehabilitation centers;

(2) "Health benefit plan":

(A) Means a policy, contract, certificate, or agreement offered or issued by a carrier to provide, deliver, arrange for, pay for, or reimburse any of the costs of healthcare services; and

(B) Does not include hospital indemnity, accident, dental, specified disease, disability income, long-term care, TRICARE, or Medicare supplement;

(3) "Healthcare professional" means a physician or other healthcare practitioner licensed, accredited, or certified to perform specified healthcare services pursuant to title 63; and

(4) "Healthcare provider" means a healthcare professional or facility.

SECTION 2. The Commissioner of Health is authorized to promulgate rules to effectuate the purposes of this act. All rules shall be promulgated in accordance with the Uniform Administrative Procedures Act, compiled in Tennessee Code Annotated, Title 4, Chapter 5.

SECTION 3. For purposes of promulgating rules, this act shall take effect upon becoming a law, the public welfare requiring it. For all other purposes, this act shall take effect January 1, 2018, the public welfare requiring it.