STAND. COM. REP. NO. 120 -16

Honolulu, Hawaii March 18, 2016 RE: S.B. No. 2668 S.D. 2 H.D. 1

Honorable Joseph M. Souki Speaker, House of Representatives Twenty-Eighth State Legislature Regular Session of 2016 State of Hawaii

Sir:

Your Committee on Health, to which was referred S.B. No. 2668, S.D. 2, entitled:

"A BILL FOR AN ACT RELATING TO INSURANCE,"

begs leave to report as follows:

The purpose of this measure is to limit a patient's out-ofpocket medical costs when services are not covered by the patient's health plan or are provided by a nonparticipating provider. Specifically, the measure:

- Requires providers to make certain disclosures to patients about nonemergency services that are not authorized under the patient's health care plan, prior to providing the services;
- Requires nonparticipating providers to make certain cost disclosures to patients about nonemergency services, prior to providing the services;
- (3) Places a cap on the amount that a nonparticipating provider may charge a patient for services performed without the approval of the patient's health care plan;
- (4) Protects a patient from being liable to a participating provider for any sums that the patient's insurer fails to pay; and

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(5) Limits a patient's out-of-pocket costs for emergency services that are performed by a nonparticipating provider to the out-of-pocket costs that would have been incurred if the services were performed by a participating provider.

The Healthcare Association of Hawaii, UHA Health Insurance, Hawaii Medical Association, Hawaii Emergency Physicians Associated, Hawaii American College of Emergency Physicians, The Queen's Health Systems, Hawaii Pacific Health, American Congress of Obstetricians and Gynecologists, Hawaii Section, and an individual provided testimony in opposition to the measure. The Department of Commerce and Consumer Affairs and Hawaii Medical Service Association provided comments.

Your Committee has amended this measure by:

- Deleting the cap on the amount that a nonparticipating provider may charge a patient for services performed without the approval of the patient's health care plan;
- Adding a section creating additional disclosure requirements for health insurance plans;
- (3) Creating a working group to evaluate the issue of balance billing in the State; and
- (4) Changing the effective date to July 1, 2112, to encourage further discussion.

As affirmed by the record of votes of the members of your Committee on Health that is attached to this report, your Committee is in accord with the intent and purpose of S.B. No. 2668, S.D. 2, as amended herein, and recommends that it pass Second Reading in the form attached hereto as S.B. No. 2668, S.D. 2, H.D. 1, and be referred to your Committees on Consumer Protection & Commerce and Judiciary.

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Respectfully submitted on behalf of the members of the Committee on Health,

Olla a Biliti

DELLA AU BELATTI, Chair



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## State of Hawaii House of Representatives The Twenty-eighth Legislature



## Record of Votes of the Committee on Health

Bill/Resolution No.: SB 2-468, SD2	Committee Referral: HLT, CPC/TVD, FIN		Date: 3/16/16	
□ The committee is reconsidering its previo	ous decision on the measure.			
	namended (as is) X Pa nort form bill with HD to reco	ass, with amendments ommit for future publ		
HLT Members	Ayes	Ayes (WR)	Nays	Excused
1. BELATTI, Della Au (C)			-	
2. CREAGAN, Richard P. (VC)	~			
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3. HASHEM, Mark J.				
4. JORDAN, Jo				
5. KOBAYASHI, Bertrand				
6. MORIKAWA, Dee	1			
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7. OSHIRO, Marcus R.				
		: 		
8. FUKUMOTO CHANG, Beth				
	:			
9. TUPOLA, Andria P.L.				
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TOTAL (9)	6	<u> </u>		2
The recommendation is: Ador If joint re		did not supp	ort recommendatio	on.
Vice Chair's or designee's signature:	VK h	<u>~</u>		· · · · · · · · · · · · · · · · · · ·
Distribution: Original (White) - Committee	ee Duplicate (Yellow)	- Chief Clerk's Offic	e Duplicate (	Pink) – HMSO