1	HOUSE BILL NO. 481
2	AMENDMENT IN THE NATURE OF A SUBSTITUTE
3	(Proposed by the House Committee on Health, Welfare and Institutions
4	on)
5	(Patron Prior to SubstituteDelegate Helmer)
6	A BILL to amend and reenact § 32.1-137.05 of the Code of Virginia, relating to hospitals; price
7	transparency.
o	Do it an acted by the Consul Assembly of Vincinia.
8	Be it enacted by the General Assembly of Virginia:
9	1. That § 32.1-137.05 of the Code of Virginia is amended and reenacted as follows:
10	§ 32.1-137.05. Information regarding standard charges; advance estimate of patient payment
11	amount for elective procedure, test, or service.
12	A. As used in this section:
13	"Items and services" means all items and services, including individual items and services and
14	service packages, that could be provided by a hospital to a patient in connection with an inpatient
15	admission or an outpatient department visit for which the hospital has established a standard charge,
16	including supplies, procedures, room and board, use of facilities and other items, and services provided
17	by physicians and other practitioners.
18	"Machine-readable" means a digital representation of data or information in a file that can be
19	imported or read into a computer system for further processing.
20	"Shoppable service" means a service that can be scheduled by a health care consumer in advance.
21	"Standard charge" means the regular rate established by the hospital for an item or service provided
22	to a specific group of paying patients, including a gross charge, payer-specific negotiated charge, de-
23	identified minimum negotiated charge, de-identified maximum negotiated charge, and discounted cash
24	price.
25	B. Every hospital shall make available to the public on its website (i) a machine-readable file
26	containing a list of all standard charges for all items and services provided by the hospital and (ii) a list of

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standard charges for the 300 most frequently provided shoppable services, which shall include as many of
the 70 shoppable services required by the Centers for Medicare and Medicaid Services to be made
available to the public as the hospital offers and which shall be made available in plain language and in a
format that is easily accessible by the public.

31 C. Every hospital shall, upon request of a patient scheduled to receive an elective procedure, test, 32 or service to be performed by the hospital, or upon request of such patient's legally authorized 33 representative, made no less than three days in advance of the date on which such elective procedure, test, 34 or service is scheduled to be performed, furnish the patient with an estimate of the payment amount for 35 which the participant will be responsible for such elective procedure, test, or service. Every hospital shall 36 provide written information about the patient's ability to request an estimate of the payment amount 37 pursuant to this section. Such written information shall be posted conspicuously in public areas of the 38 hospital, including admissions or registration areas, and included on any website maintained by the 39 hospital.

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