



State Legislative Update: Health Departments and Third Party Billing for Clinical Services

| STATE | BILL | TITLE | SUMMARY | STATUS |
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| AZ | HB 2430 (2013) | Technical Corrections; Immunizations; Reimbursement | <p>Section 1. Section 36-673, Arizona Revised Statutes, is amended to read:</p> <p>36-673. Duties of local health departments; immunization; reimbursement; training; informed consent</p> <p>A. A local health department in cooperation with each school within the county shall provide for the required immunization of pupils attending school.</p> <p>B. A local health department shall provide immunizations required for school attendance at no cost to the pupil or pupil's parent, guardian or person in loco parentis. In order to receive reimbursement for the cost of the immunization from the pupil's or parent's private health insurance coverage, the local health department may enter into a contract governing the terms of reimbursement and claims, with the corresponding private health care insurer. The local health department may enter into a contract with a private health care insurer on its own, in conjunction with other local health departments or through a qualified intermediary. If the local health department chooses not to contract with a private health care insurer or does not respond to the request to contract from a private health care insurer within ninety days of the request, the insurer is not required to reimburse the local health department for the immunization. If a private health care insurer declines or does not respond to a request to contract with a local health department, with a coalition of other local health departments or through a qualified intermediary within ninety days of the request to contract, the private health care insurer must reimburse the local health department at the rate paid to an in-network provider.</p> | Approved by the Governor, 5/2/2013 |
| MD | HB 709 (2011) | Health Officers – Authority to Enter into Contracts or Agreements for Delivery of Health Care Services | <p>For the purpose of authorizing a health officer, under certain circumstances, to enter into a contract or other written agreement to assist or participate in the delivery of health care services with a certain person; and generally relating to the powers of health officers.</p> <p>Provides that subject to the consent of the governing body of the county and the written approval of the Secretary, a health officer for a county may enter into a contract or any other written agreement to assist or participate in the delivery of health care services with a person that is authorized to provide, finance, coordinate, facilitate or otherwise deliver health care services in the state.</p> | Approved by the Governor, 5/10/2011; Chapter 236 |
| OH | HB 94 (2013) | To require a health insuring corporation, public employee | <p>Sec. 1751.50. (A) As used in this section, "local board of health" means a board of health of a city or general health district or an authority having the duties of a board of health as authorized by section 3709.05 of the Revised Code.</p> <p>(B) Notwithstanding section 3901.71 of the Revised Code, if a local board of health provides a service to an individual who is a subscriber of a health insuring corporation and that health insuring corporation</p> | H Referred To Committee House Insurance - 03/12/2013 |

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| | | benefit plan, or sickness and accident insurer to reimburse a board of health for any services provided to an individual by the board that is covered by a plan issued to the individual upon request submitted by the board of health. | <p>provides coverage for the service provided, the board of health may submit a claim for the service to the individual's health insuring corporation. Upon receipt of the claim, the health insuring corporation shall reimburse the board of health for the service provided in accordance with the usual and customary rate schedule established by the health insuring corporation policy. A health insuring corporation shall treat a board of health as within the insurer's network of service providers for purposes of calculating the reimbursement.</p> <p>Sec. 3923.84. (A) As used in this section, "local board of health" means a board of health of a city or general health district or an authority having the duties of a board of health as authorized by section 3709.05 of the Revised Code.</p> <p>(B) Notwithstanding section 3901.71 of the Revised Code, if a local board of health provides a service to any individual covered by a policy of sickness and accident insurance or a public employee benefit plan that provides coverage to the individual for that service, the board of health may submit a claim for that service to the individual's sickness and accident insurer or to the public employee benefit plan. Upon receipt of the claim, the insurer or benefit plan shall reimburse the board of health for the service provided in accordance with the usual and customary rate schedule established by the sickness and accident insurance policy or the benefit plan. A sickness and accident insurer or public employee benefit plan shall treat a board of health as within the insurer's or plan's network of service providers for purposes of calculating this reimbursement.</p> | |
| OK | HB 1397 (2011) | Public health and safety; State Department of Health; repealer; effective date. | <p>A. The State Department of Health shall:</p> <ol style="list-style-type: none"> 1. Perform duties and responsibilities as directed by the State Commissioner of Health to ensure compliance with relevant provisions of this act; 2. Fix and collect fees for the certification of compliance of health maintenance organizations pursuant to the provisions of Section 6907 of Title 36 of the Oklahoma Statutes; and 3. Perform any and all health-related services, within the scope of practice, as prescribed by state law, by the State Board of Health, or by standards of care for medical services. When the Department provides a health-related service to any person covered by an applicable health insurance plan, the Department may submit a claim for said service to the appropriate insurance company, health maintenance organization or preferred provider organization. Upon receipt of the claim, said insurance company, health maintenance organization or preferred provider organization shall reimburse the Department for the service provided in accordance with the standard and customary rate schedule established by the plan. All health insurance plans doing business in Oklahoma shall recognize the public health service delivery model utilized by the Department, as an appropriate provider of services for reimbursement. <p>B. All actions of the Department shall be subject to the provisions of the Administrative Procedures Act.</p> <p>C. Fees and insurance reimbursement payments collected shall be deposited in the Public Health Special Fund in the State Treasury.</p> | Approved by the Governor, 04/25/2011 |

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| WV | HB 2479 (2013) | Removing the limitations on billing patients for HIV and sexually transmitted disease testing | <p>The purpose of this bill is to remove the prohibition on billing persons for HIV testing or testing for sexually transmitted diseases conducted by the State Bureau for Public Health or county or local health departments. The bill allows public health agencies to charge patients or their medical insurance providers for the reasonable costs for testing. It also clarifies the procedures for testing persons accused of a sexual offense for HIV or STDs.</p> <p>ARTICLE 3C. AIDS-RELATED MEDICAL TESTING AND RECORDS CONFIDENTIALITY ACT. §16-3C-2. Testing. (Amendments = Underlined; Deletions = Strikethrough) <u>(b) All patients who seek an HIV test shall be responsible for paying the costs of the testing, whether they are tested by a private healthcare provider, the bureau or at a local health department. Local health departments may charge in accordance with their existing fee schedules and may charge patients on a sliding fee scale.</u></p> <p>(e) Any person seeking an HIV-related test in a local or county health department or other HIV test setting provided by the commissioner who wishes to remain anonymous has the right to do so, and to be provided written informed consent through use of a coded system with no linking of individual identity to the test request or results. <u>Such persons may arrange to pay the costs of the HIV- related testing.</u></p> <p>(4) When the Commissioner of the Bureau of Public Health knows or has reason to believe, because of medical or epidemiological information, that a person, including, but not limited to, a person such as an IV drug abuser, or a person who may have a sexually transmitted disease, or a person who has sexually molested, abused or assaulted another, has HIV infection and is or may be a danger to the public health, he or she may issue an order to: (i) Require a person to be examined and tested to determine whether the person has HIV infection; (ii) Require a person with HIV infection to report to a qualified physician or health worker for counseling; and (iii) Direct a person with HIV infection to cease and desist from specified conduct which endangers the health of others; <u>and</u> <u>(iv) Bill that person for the necessary laboratory and associated costs for testing either directly or by billing the person's medical insurance provider.</u></p> <p>(11) The costs of mandated testing and counseling provided under this subsection and pre and post-conviction HIV-related testing and counseling provided the victim under the direction of the bureau pursuant to this subsection shall be paid by the bureau <u>the individual to be tested or his or her medical insurance provider, if possible.</u></p> | Died in Committee |

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| | | | <p>(g) Nothing in this section is applicable to any insurer regulated under chapter thirty three of this code: <i>Provided</i>, That the commissioner of insurance shall develop standards regarding consent for use by insurers which test for the presence of the HIV antibody.</p> <p>ARTICLE 4. SEXUALLY TRANSMITTED DISEASES. §16-4-19. Voluntary submission to examination and treatment; charges; disposition of money collected.</p> <p>(b) If such tests and examinations show <u>said party so applying to be so infected</u> <u>the person to have a sexually transmitted disease</u>, then <u>said party the person</u> shall elect whether he <u>or she</u> will take treatment of from <u>from</u> a private physician, or whether he <u>or she</u> will take treatment to be provided by from <u>from</u> the <u>local</u> health officer through a clinic or otherwise <u>department</u>, and if he <u>or she</u> elects to take treatment through the local health officer's arrangement <u>department</u>, he <u>or she</u> may be required to pay for such treatment at a charge which shall in no case exceed the sum of five dollars for each dose of "neo" or arsphenamine administered for syphilis, and at a nominal cost for other medicines used; but if the patient is unable to pay anything, he shall be treated free of charge under the direction of the local health officer, at a clinic or otherwise either directly or by the local health department billing the person's health insurance provider.</p> <p>(c) All proper charges for such examination and treatment as that may be necessary hereunder shall be a proper charge against the municipality or county paid by the individual or by that persons health insurance provider. as the case may be, whether said party so taking treatment lived in or out of a municipal corporation. And whether said person proposing to take treatment as provided hereunder elect to take from a private physician or elect to take treatment under the direction of the local health officer, he shall first sign the agreement required to be signed by persons about to be released from detention or quarantine, and shall observe all its provisions, and so long as such person so signing shall so observe these provisions he need not be detained or quarantined pending treatment, except that no person who is known as a prostitute, or as a person associating with such, or as a person who resides in any house having the reputation of being a house of prostitution, or who frequents the same, shall be allowed at liberty if infected with a venereal disease in an infectious stage, even though he does voluntarily submit for examination and treatment and does take treatment under the provisions of this section.</p> <p>(d) All money collected under this section shall be paid into a clinic fund, if one is provided, and if not then into the county or city treasury, as the case may be; to the local health department doing the testing and the local health officer having jurisdiction shall collect and account for such funds collected hereunder.</p> | |

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| | SB 428 (2013) | Relating to billing for HIV or STD testing and treatment | <p>ARTICLE 3C. AIDS-RELATED MEDICAL TESTING AND RECORDS CONFIDENTIALITY ACT.</p> <p>§16-3C-2. Testing.</p> <p><u>(b) All patients who seek an HIV test shall be responsible for paying the costs of the testing, whether they are tested by a private healthcare provider, the bureau or at a local health department. A local health department may charge in accordance with its existing fee schedules and may charge patients on a sliding fee scale.</u></p> <p><u>(e) Any person seeking an HIV-related test in at a local or county health department, or other HIV test setting provided by the commissioner, who wishes to remain anonymous has the right to do so, and to be provided written informed consent through use of a coded system with no linking of individual identity to the test request or results. Such persons may be required to pay the costs of the HIV-related testing.</u></p> <p><u>(6) When the Commissioner of the Bureau of Public Health knows or has reason to believe, because of medical or epidemiological information, that a person, including, but not limited to, a person such as an IV drug abuser, or a person who may have a sexually transmitted disease, or a person who has sexually molested, abused or assaulted another, has HIV infection and is or may be a danger to the public health, he or she may issue an order to:</u></p> <p><u>(A) Require a person to be examined and tested to determine whether the person has HIV infection;</u></p> <p><u>(B) Require a person with HIV infection to report to a qualified physician or health worker for counseling; and</u></p> <p><u>(C) Direct a person with HIV infection to cease and desist from specified conduct which endangers the health of others; and</u></p> <p><u>(D) Bill that person for the necessary laboratory and associated costs for counseling and testing either directly or by billing the person's medical insurance provider.</u></p> <p><u>(10) If a person receives counseling or is tested under this subsection and is found to be HIV infected and the person is not incarcerated, the person shall be referred by the health care provider performing the counseling or testing for appropriate medical care and support services. The local or county health departments or any other agency under this subsection may shall not be held financially responsible for medical care and support services.</u></p> <p><u>(13) The costs of mandated testing and counseling provided under this subsection and pre conviction and post-conviction HIV-related testing and counseling provided the victim under the direction of the bureau pursuant to this subsection shall be paid by the bureau the individual to be tested or his or her medical insurance provider, if possible.</u></p> | Died in Committee |

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| | | | <p>(g) Nothing in this section is applicable to any insurer regulated under chapter thirty three of this code: <i>Provided</i>, That the commissioner of insurance shall develop standards regarding consent for use by insurers which test for the presence of the HIV antibody.</p> <p>ARTICLE 4. SEXUALLY TRANSMITTED DISEASES. §16-4-19. Voluntary submission to examination and treatment; charges; disposition of money collected.</p> <p>(a) Any resident of the state person may at any time report go to any municipal or county health officer having jurisdiction of the case department and voluntarily submit himself or herself to all tests and examination as are necessary to ascertain whether in fact the person submitting himself or herself for examination is infected with a venereal sexually transmitted disease. and said The health officer to whom any party has applied as above for tests and examination department shall provide for making all such conduct and administer all necessary tests and examinations as are necessary to ascertain whether in fact said party so applying be so infected with a venereal the person has any sexual transmitted disease. Any person who is tested for sexually transmitted diseases at a local health department shall be responsible for paying the reasonable costs of testing, either directly or through billing the person's medical provider. Local health departments may charge in accordance with their existing fee schedules and may charge patients for such testing on a sliding fee scale.</p> <p>(b) If such tests and examinations show said party so applying to be so infected the person to have a sexually transmitted disease, then said party the person shall elect whether he or she will take treatment of from a private physician, or whether he or she will take treatment to be provided by from the local health officer through a clinic or otherwise department, and if he or she elects to take treatment through the local health officer's arrangement department, he or she may be required to pay for such treatment at a charge which shall in no case exceed the sum of \$5 for each dose of "neo" or arsphenamine administered for syphilis, and at a nominal cost for other medicines used; but if the patient is unable to pay anything, he or she shall be treated free of charge under the direction of the local health officer, at a clinic or otherwise either directly or by the local health department billing the person's health insurance provider. Local health departments may charge in accordance with their existing fee schedules and may charge patients for treatment on a sliding fee scale.</p> <p>(c) All proper charges for such examination and treatment as that may be necessary hereunder shall be a proper charge against the municipality or county, paid by the individual or by that person's health insurance provider. as the case may be, whether said party so taking treatment lived in or out of a municipal corporation. And whether said person proposing to take treatment as provided hereunder</p> | |

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| | | | <p>elect to take from a private physician or elect to take treatment under the direction of the local health officer, he or she shall first sign the agreement required to be signed by persons about to be released from detention or quarantine, and shall observe all its provisions, and so long as such person so signing shall so observe these provisions he or she need not be detained or quarantined pending treatment, except that no person who is known as a prostitute, or as a person associating with such, or as a person who resides in any house having the reputation of being a house of prostitution, or who frequents the same, shall be allowed at liberty if infected with a venereal disease in an infectious stage, even though he or she does voluntarily submit for examination and treatment and does take treatment under the provisions of this section.</p> <p>(d) All money collected under this section shall be paid into a clinic fund, if one is provided, and if not then into the county or city treasury, as the case may be; to the local health department doing the <u>testing</u> and the local health officer having jurisdiction <u>department</u> shall collect and account for such <u>the</u> funds collected hereunder.</p> | |