

1 **H. B. 2374**

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3 (By Delegates Manchin, Longstreth and Caputo)
4 [Introduced January 12, 2011; referred to the
5 Committee on Health and Human Resources then Finance.]
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10 A BILL to amend and reenact §16-29B-17 of the Code of West
11 Virginia, 1931, as amended, relating to common standards for
12 hospitals' charity care programs; bad debt collection
13 programs; and requiring hospitals to provide free charity care
14 to uninsured citizens below one hundred percent of the poverty
15 level and lowered rates to those citizens between one hundred
16 and three hundred percent above poverty level.

17 *Be it enacted by the Legislature of West Virginia:*

18 That §16-29B-17 of the Code of West Virginia, 1931, as
19 amended, be amended and reenacted to read as follows:

20 **ARTICLE 29B. HEALTH CARE AUTHORITY.**

21 **§16-29B-17. Uniform system of financial reporting.**

22 (a) The board shall develop and specify a uniform system of
23 reporting utilization, accounting and financial reporting,

1 including cost allocation methods by which hospitals shall record
2 their revenues, income, expenses, capital outlays, assets,
3 liabilities and units of service. The development and
4 specification process aforementioned shall be conducted in a manner
5 determined by the board to be most efficient for that purpose
6 notwithstanding the provisions of chapter twenty-nine-a of this
7 code. Each hospital shall adopt this uniform system for the
8 purpose of reporting utilization, costs and revenues to the board
9 effective for the fiscal year beginning on or after twelve months
10 from the effective date of this article.

11 (b) The board may provide for modification in the accounting
12 and reporting system in order to correctly reflect differences in
13 the scope or type of services and financial structures of the
14 various categories, sizes and types of hospitals and in a manner
15 consistent with the purposes of this article.

16 (c) The board may provide technical assistance to those
17 hospitals which request it and which evidence sufficient need for
18 assistance in the establishment of a data collection system to the
19 extent that funds are available to the board for this purpose.

20 (d) The board shall, after consultation with health care
21 providers, purchasers, classes of purchasers and third-party
22 payors, adopt a mandatory form for reporting to the board, at its
23 request, medical diagnosis, treatment and other services rendered
24 to each purchaser by health care providers subject to the

1 provisions of this article.

2 (e) Following a public hearing, the board shall establish a
3 program to minimize the administrative burden on hospitals by
4 eliminating unnecessary duplication of financial and operational
5 reports; and to the extent possible, notwithstanding any other law,
6 coordinate reviews, reports and inspections performed by federal,
7 state, local and private agencies.

8 (f) Starting July 1, 2011, and every July 1 thereafter,
9 hospitals shall report to the board their charity care policies,
10 how the hospital publicizes its charity care policy and its
11 collection policies for bad debt. After reviewing the charity care
12 and collection policies, the board shall convene a public hearing
13 to determine whether the board should adopt minimum standards for
14 hospital charity care policies, minimum standards for publication
15 and dissemination of these policies and minimum standards for bad
16 debt collection policies. The board may update these standards
17 from time to time. After January 1, 2012, hospitals shall adopt a
18 charity care policy that, at a minimum, provides free charity care
19 to uninsured citizens whose family income is below one hundred
20 percent of the federal poverty level and charges citizens with
21 family incomes one hundred to three hundred percent above federal
22 poverty level a rate not to exceed the allowable rate for Medicare
23 patients for the same service.

NOTE: The purpose of this bill is to provide standards for hospitals' charity care programs and bad debt collection programs and require hospitals to provide free charity care to uninsured citizens below poverty level and lowered rates to those citizens between one hundred and three hundred percent above poverty level.

Strike-throughs indicate language that would be stricken from the present law, and underscoring indicates new language that would be added.