SENATE, No. 1984

STATE OF NEW JERSEY

221st LEGISLATURE

PRE-FILED FOR INTRODUCTION IN THE 2024 SESSION

Sponsored by: Senator JOSEPH F. VITALE District 19 (Middlesex)

SYNOPSIS

Requires hospitals to publish list of standard charges for certain items and services.

CURRENT VERSION OF TEXT

Introduced Pending Technical Review by Legislative Counsel.



1 AN ACT concerning hospital pricing and supplementing Title 26 of the Revised Statutes.

BE IT ENACTED by the Senate and General Assembly of the State of New Jersey:

1. As used in this act:

"Ancillary service" means an item or service a hospital customarily provides as part of or in conjunction with a shoppable primary service.

"Chargemaster" means the list of all individual items and services maintained by a hospital for which the hospital has established a charge.

"CMS" means the federal Centers for Medicare & Medicaid Services.

"De-identified maximum negotiated charge" means the highest charge that a hospital has negotiated with all third party payers for an item or service.

"De-identified minimum negotiated charge" means the lowest charge that a hospital has negotiated with all third party payers for an item or service.

"Department" means the New Jersey Department of Health

"Discounted cash price" means the charge that applies to an individual who pays cash, or cash equivalent, for a hospital item or service.

"Gross charge" means the charge for an individual item or service that is reflected on a hospital's chargemaster, absent any discounts.

"Hospital" means an acute care general hospital licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.).

"Items and services" means all items and services, including individual items and services and service packages that could be provided by a hospital to a patient in connection with an inpatient admission or an outpatient department visit for which the hospital has established a standard charge, which shall include, but shall not be limited to: supplies and procedures; room and board; use of the facility and other items, generally described as facility fees; services of employed physicians and non-physician practitioners, generally reflected as professional charges; or any other items or services for which a hospital has established a standard charge.

"Machine-readable format" means a digital representation of data or information in a file that can be imported or read into a computer system for further processing, which shall include, but shall not be limited to: .XML, .JSON, and .CSV formats.

"Payer-specific negotiated charge" means the charge that a hospital has negotiated with a third party payer for an item or service. 1 "Service package" means an aggregation of individual items and 2 services into a single service with a single charge.

"Shoppable service" means a service that can be scheduled by a healthcare consumer in advance.

"Standard charge" means the regular rate established by the hospital for an item or service provided to a specific group of paying patients, which shall include: gross charge, payer-specific negotiated charge, de-identified minimum negotiated charge, de-identified maximum negotiated charge, and discounted cash price.

"State forensic hospital" means a public psychiatric hospital that provides treatment exclusively for individuals who are in the custody of penal authorities.

"Third party payer" means an entity that is, by statute, contract, or agreement, legally responsible for payment of a claim for a healthcare item or service.

2. Federal and State hospitals shall be deemed by the department to be in compliance with the requirements of this section including but not limited to: federally owned hospital facilities, including facilities operated by the U.S. Department of Veterans Affairs and Military Treatment Facilities operated by the U.S. Department of Defense; hospitals operated by an Indian Health Program as defined in section 4(12) of the federal Indian Health Care Improvement Act; and State forensic hospitals.

3. A hospital shall publish the following: a machine-readable file containing a list of all standard charges for all items and services as provided in section 4 of this act, and a consumer-friendly list of standard charges for a limited set of shoppable services as provided in section 5 of this act.

- 4. a. (1) A hospital shall establish, update, and publish a list of all standard charges for all items and services online in the form and manner specified in this section.
- (2) Each hospital location operating under a single hospital license that has a different set of standard charges than the other location operating under the same hospital license shall separately publish the standard charges applicable to that location.
- b. A hospital shall include all of the following corresponding data elements in its list of standard charges, as applicable:
 - (1) description of each item or service provided by the hospital;
- (2) gross charge that applies to each individual item or service when provided in, as applicable, the hospital inpatient setting and outpatient hospital department setting;
- (3) payer-specific negotiated charge that applies to each item or service when provided in, as applicable, the hospital inpatient setting and outpatient hospital department setting. Each payer-

- specific negotiated charge shall be clearly associated with the name 1 2 of the third party payer and plan;
 - (4) de-identified minimum negotiated charge that applies to each item or service when provided in, as applicable, the hospital inpatient setting and outpatient hospital department setting;
 - (5) de-identified maximum negotiated charge that applies to each item or service when provided in, as applicable, the hospital inpatient setting and outpatient hospital department setting;
 - (6) discounted cash price that applies to each item or service when provided in, as applicable, the hospital inpatient setting and outpatient hospital department setting; and
 - (7) any code used by the hospital for purposes of accounting or billing for the item or service, including, but not limited to, the Current Procedural Terminology code, the Healthcare Common Procedure Coding System code, the Diagnosis Related Group, the National Drug Code, and other common payer identifier.
 - c. The information described in subsection b. of this section shall be published in a single digital file that is in a machine-readable format.
 - d. (1) A hospital shall select a publicly available website for purposes of publishing the standard charge information required under subsection b. of this section.
 - (2) The standard charge information shall be displayed in a prominent manner and clearly identified with the hospital location with which the standard charge information is associated.
 - (3) A hospital shall ensure that the standard charge information is easily accessible, without barriers, including but not limited to ensuring the information is accessible:
 - (a) free of charge;

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- (b) without having to establish a user account or password;
- (c) without having to submit personal identifying information; and
- (d) to automated searches and direct file downloads through a link posted on a publicly available website.
- (4) The digital file and standard charge information contained in that file shall be digitally searchable.
- (5) The file shall use the following naming convention specified specifically: <ein>_<hospitalname>_standardcharges.[json|xml|csv]. 39
 - e. A hospital shall update the standard charge information described in subsection b. of this section at least once annually. The hospital shall clearly indicate the date that the standard charge data was most recently updated, either within the file itself, or otherwise clearly associated with the file.
 - 5. a. (1) A hospital shall publish the standard charges identified in paragraphs (3) through (6) of subsection b. of this section, for as many of the 70 CMS-specified shoppable services that are provided

by the hospital, and as many additional hospital-selected shoppable
services as is necessary for a combined total of at least 300
shoppable services.

- (a) In selecting a shoppable service for purposes of this section, a hospital shall consider the rate at which it provides and bills for that shoppable service.
- (b) If a hospital does not provide 300 shoppable services, the hospital shall publish the information specified in subsection b. of this section for as many shoppable services as it provides.
- (2) A hospital shall be deemed by the department to meet the requirements of this section if the hospital maintains an Internet-based price estimator tool which meets the following requirements.
- (a) Provides estimates for as many of the 70 CMS-specified shoppable services that are provided by the hospital, and as many additional hospital-selected shoppable services as is necessary for a combined total of at least 300 shoppable services.
- (b) Allows healthcare consumers to, at the time consumers use the tool, obtain an estimate of the amount consumers would be obligated to pay the hospital for the shoppable service.
- (c) Is prominently displayed on the hospital's website and accessible to the public without charge and without having to register or establish a user account or password.
- b. A hospital shall include, as applicable, all of the following corresponding data elements when displaying its standard charges, identified in paragraphs (3) through (6) of this subsection, for its list of shoppable services selected under paragraph (1) of subsection a. this section:
 - (1) a plain-language description of each shoppable service;
- (2) an indicator when one or more of the CMS-specified shoppable services are not offered by the hospital;
- (3) the payer-specific negotiated charge that applies to each shoppable service, and to each ancillary service, as applicable. Each list of payer-specific negotiated charges shall be clearly associated with the name of the third party payer and plan;
- (4) the discounted cash price that applies to each shoppable service and corresponding ancillary services, as applicable. If the hospital does not offer a discounted cash price for one or more shoppable services, or corresponding ancillary services, the hospital shall list its undiscounted gross charge for the shoppable service and corresponding ancillary services, as applicable;
- (5) the de-identified minimum negotiated charge that applies to each shoppable service and to each corresponding ancillary service, as applicable;
- (6) the de-identified maximum negotiated charge that applies to each shoppable service and to each corresponding ancillary service, as applicable;
- 47 (7) the location at which the shoppable service is provided, 48 including whether the standard charges identified in paragraphs (3)

- through (6) of this subsection for the shoppable service apply at that location to the provision of that shoppable service in the inpatient setting, the outpatient hospital department setting, or both; and
 - (8) any primary code used by the hospital for purposes of accounting or billing for the shoppable service, including, as applicable, the Current Procedural Terminology code, the Healthcare Common Procedure Coding System code, the Diagnosis Related Group, or other common service billing code.
- 9 c. A hospital shall have discretion to choose a format for publishing the information described in subsection b. of this section online.
 - d. (1) A hospital shall select an appropriate publicly available internet location for purposes of publishing the information described in subsection b. of this section.
 - (2) The information shall be displayed in a prominent manner that identifies the hospital location with which the information is associated.
 - (3) The shoppable services information shall be easily accessible, without barriers, including but not limited to ensuring the information is:
 - (a) free of charge;
 - (b) accessible without having to register or establish a user account or password;
 - (b) accessible without having to submit personal identifying information; and
 - (d) searchable by service description, billing code, and payer.
 - e. A hospital shall update the standard charge information described in subsection b. of this section at least once annually. A hospital shall clearly indicate the date that the information was most recently updated.

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- 6. a. (1) The department shall evaluate whether a hospital has complied with sections 3 through 5 of this act.
- (2) The department may use methods to monitor and assess hospital compliance, which may include, but may not be limited to:
- (a) evaluation of complaints made by individuals or entities to the department;
- (b) review of individuals' or entities' analysis of noncompliance; and
- (c) audit of hospitals' websites.
- b. If the department concludes that a hospital is noncompliant with one or more of the requirements of this act, the department may take any of the following actions:
- 44 (1) provide a written warning notice to a hospital of a specific 45 violation;
- 46 (2) request a corrective action plan from the hospital if its 47 noncompliance constitutes a material violation of this act; or

- (3) impose a civil monetary penalty on the hospital and publish the penalty on the department's Internet website if the hospital fails to respond to the department's request to submit a corrective action plan or comply with the requirements of the corrective action plan.
- c. Each year, the department shall prepare and submit a report detailing hospitals' compliance with the provisions of this act, and any other relevant findings or recommendations to the Governor, and to the Legislature, pursuant to section 2 of P.L.1991, c.164 (C.52:14-19.1). The department shall publish each report on its Internet website.

- 7. a. The department shall determine if a hospital's noncompliance with the provisions of this act constitutes a material violation requiring a corrective action plan. A material violation may include, but may not be limited to, a hospital's failure to publish its standard charges in the form and manner as required pursuant to this act.
- b. The department may request that a hospital submit a corrective action plan, specified in a notice of violation issued by the department to a hospital.
- c. (1) A hospital required to submit a corrective action plan shall do so, in the form and manner, and by the deadline, specified in the notice of violation issued by department to the hospital.
- (2) A hospital's corrective action plan shall specify elements including, but not limited to:
- (a) the corrective actions or processes the hospital shall take to address the deficiency identified by the department; and
- (b) the timeframe by which the hospital shall complete the corrective action.

- 8. a. The department may impose a civil monetary penalty on a hospital that violates a provision of this act.
- b. (1) If the department imposes a penalty in accordance with this section, the department shall provide a written notice of imposition of a civil monetary penalty to the hospital via certified mail or another form of traceable carrier.
- (2) The notice to the hospital may include, but may not be limited to, the following:
- (a) The basis for the hospital's noncompliance, including, but not limited to, the following:
- (i) the department's determination as to which requirement the hospital has violated; and
- (ii) the hospital's failure to respond to the department's request to submit a corrective action plan or comply with the requirements of a corrective action plan.
- (b) The department's determination as to the effective date for the violation. This date shall be the latest date of the following:

- (i) the first day the hospital is required to meet the requirements of this section;
 - (ii) if a hospital previously met the requirements of this section but did not update the information annually as required, the date 12 months after the date of the last annual update specified in information posted by the hospital; and
 - (iii) a date determined by the department, such as one resulting from monitoring activities, or development of a corrective action plan.
 - (c) The amount of the penalty as of the date of the notice.
 - (d) A statement that a civil monetary penalty may continue to be imposed for a continuing violation.
 - (e) Payment instructions.

- (f) Intent to publish the hospital's noncompliance and the department's determination to impose a civil monetary penalty on the hospital for noncompliance by posting the notice of imposition of a civil monetary penalty on the department's Internet website.
 - (g) A statement of the hospital's right to a hearing.
- (h) A statement that the hospital's failure to request a hearing within 30 calendar days of the issuance of the notice permits the imposition of the penalty, and any subsequent penalties pursuant to continuing violations, without the right of appeal. If the civil monetary penalty is upheld, in part, by a final and binding decision, the department shall issue a modified notice of imposition of a civil monetary penalty to conform to the adjudicated finding.
- c. (1) The department shall determine the daily dollar amount for a civil monetary penalty for which a hospital may be subject as follows:
- (a) for each day a hospital is determined by the department to be out of compliance:
- (i) For a hospital with a number of beds equal to or less than 30, the maximum daily dollar civil monetary penalty amount to which it may be subject shall be \$300, even if the hospital is in violation of multiple discrete requirements of this act.
- (ii) For a hospital with at least 31 and up to and including 550 beds, the maximum daily dollar civil monetary penalty amount to which it may be subject shall be the number of beds times \$10, even if the hospital is in violation of multiple discrete requirements of this act.
- (iii) For a hospital with a number of beds greater than 550, the maximum daily dollar civil monetary penalty amount to which it may be subject shall be \$5,500, even if the hospital is in violation of multiple discrete requirements of this act.
- (iv) The department shall use the most recently available, finalized Medicare hospital cost report to determine the number of beds for a Medicare-enrolled hospital, for purposes of determining the maximum daily dollar civil monetary penalty amount under this section.

- (v) If the number of beds for the hospital cannot be determined, the department shall request that the hospital provide documentation of its number of beds, in a form and manner and by the deadline prescribed by the department in a written notice provided to the hospital. If the hospital fails to provide the department with this documentation in the prescribed form and manner, and by the specified deadline, the department shall impose on the hospital the maximum daily dollar civil monetary penalty amount permissible under this section.
 - (vi) The amount of the civil monetary penalty shall be adjusted annually using the multiplier determined by the federal government for annually adjusting civil monetary penalty amounts under federal law.
 - (2) A hospital shall pay the civil monetary penalty in full within 60 calendar days after the date of the notice of imposition of a civil monetary penalty from the department.
 - (3) If a hospital requests a hearing, the hospital shall pay the amount in full within 60 calendar days after the date of a final and binding decision to uphold, in whole or in part, the civil monetary penalty.
 - (4) If the 60th calendar day is a weekend or a federal or State holiday, then the timeframe shall be extended until the end of the next business day.
 - d. (1) The department shall post the notice of imposition of a civil monetary penalty on the department's Internet website.
 - (2) If a hospital elects to request a hearing:
 - (a) the department shall indicate in its posting that the civil monetary penalty is under review.
 - (b) If the civil monetary penalty is upheld, in whole, by a final and binding decision, the department shall maintain the posting of the notice of imposition of a civil monetary penalty on the department's Internet website.
 - (c) If the civil monetary penalty is upheld, in part, by a final and binding decision, the department shall issue a modified notice of imposition of a civil monetary penalty to conform to the adjudicated finding. The department shall publish the modified notice on the department's Internet website.
 - (d) If the civil monetary penalty is overturned in full by a final and binding decision, the department shall remove the notice of imposition of a civil monetary penalty from the department's Internet website.
 - 9. A hospital upon which the department has imposed a penalty may appeal that penalty. In determining whether the amount of a civil money penalty is reasonable, a court may consider evidence of record relating to the following: the hospital's posting of its standard charges, if available, material the hospital previously submitted to the department, including with respect to corrective

actions and corrective action plans, and material the department used to monitor and assess the hospital's compliance.

- 10. a. If a hospital does not request a hearing within 30 calendar days of the issuance of a notice of imposition of a civil monetary penalty, the department may impose the civil monetary penalty indicated in such notice and may impose additional penalties pursuant to continuing violations without the right of appeal. If the 30th calendar day is a weekend or a federal or State holiday, then the timeframe shall be extended until the end of the next business day.
- b. A hospital shall have no right to appeal a penalty with respect to which it has not requested a hearing, unless the hospital can show good cause for failing to timely exercise its right to a hearing.

11. The Commissioner of Health shall adopt rules and regulations, in accordance with the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), as are necessary to effectuate the provisions of this act.

12. This act shall take effect 180 days following enactment.

STATEMENT

This bill requires hospitals to publish a list of standard charges for certain items and services.

Under the bill, a hospital is to publish: a machine-readable file containing a list of all "standard charges" for all "items and services," and a consumer-friendly list of "standard charges" for a limited set of "shoppable services," as these terms are defined in the bill. A hospital is to include corresponding data elements in its list of standard charges, as outlined in the bill. A hospital is to publish a total of at least 300 shoppable services or for as many shoppable services as it provides.

The bill provides that the Department of Health (department) is to evaluate whether a hospital has complied with the bill's provisions. If the department concludes that a hospital is noncompliant with one or more of the bill's provisions, the department may take any of the following actions: (1) provide a written warning notice to a hospital of a specific violation; (2) request a corrective action plan from the hospital if its noncompliance constitutes a material violation; or (3) impose a civil monetary penalty on the hospital and publish the penalty on the department's Internet website if the hospital fails to respond to the department's request to submit a corrective action plan or comply with the requirements of the corrective action plan. A material violation may include a hospital's failure to publish its standard

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charges. A hospital's corrective action plan is to specify elements including: (1) the corrective actions or processes the hospital is to take to address the deficiency identified by the department; and (2) the timeframe by which the hospital is to complete the corrective action.

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The department may impose a civil monetary penalty on a hospital that violates the bill's provisions. A hospital is to pay the civil monetary penalty in full within 60 calendar days after the date of the notice of imposition of a civil monetary penalty.

A hospital upon which the department has imposed a penalty may appeal that penalty. If a hospital does not request a hearing within 30 calendar days of the issuance of a notice of imposition of a civil monetary penalty, the department may impose the civil monetary penalty indicated in such notice and may impose additional penalties pursuant to continuing violations without the right of appeal.