**An Act To Mandate That Certain Health Care Providers Disclose an Estimate of Charges at Time of Service**

**Be it enacted by the People of the State of Maine as follows:**

**Sec.** **1. 22 MRSA §1718-C,** as enacted by PL 2013, c. 560, §2, is repealed and the following enacted in its place:

**§****1718-C.** **Estimate of total price of a single medical encounter for a patient**

**1.** **Definitions.** As used in this section, unless the context indicates otherwise, the following terms have the following meanings.

A. "Health care" has the same meaning as in section 1711-C, subsection 1, paragraph C and includes, but is not limited to, professional service fees, facility fees and any other fees or costs associated with the provision of the health care or laboratory services to a patient.

B. "Health care entity" has the same meaning as in section 1718-B, subsection 1, paragraph B.

**2.** **Estimate for patient and insurer prior to care.** Prior to the provision of health care, including laboratory services, a health care entity shall provide to a patient and the patient's health insurance provider, if any, an estimate of the total price of the health care services to be rendered directly by that health care entity during a single medical encounter. If the health care entity is unable to provide an accurate estimate of the total price of a specific health care service because the amount of the health care service to be consumed during the medical encounter is unknown in advance, the health care entity shall provide a brief description of the basis for determining the total price of that particular health care service. If a single medical encounter will involve health care services to be rendered by a 3rd-party health care entity or by a 3rd-party laboratory, the health care entity shall identify each such 3rd-party health care entity or laboratory to enable the patient, or the patient's health insurance provider, if any, to obtain an estimate of the total price of health care services to be rendered directly by each health care entity or laboratory to that patient. When providing an estimate as required by this subsection, a health care entity shall also notify an uninsured patient of any charity care policy adopted by the health care entity.

**SUMMARY**

Current law requires a health care entity, upon the request of an uninsured patient, to provide an estimate of the total price of medical services to be rendered by that health care entity during a single medical encounter. This bill expands that requirement to all patients, regardless of their insured status and regardless of whether a request is made, and to those patients' health insurance providers, if any. This bill also requires a health care entity, in the event that medical or laboratory services will be provided by a 3rd party, to identify that 3rd-party health care entity or laboratory so that the patient or the patient's health insurance provider, if any, can obtain an estimate of the costs of those services.