



<b>WHA Calendar</b>	
Wyoming Budget Session	2/10

## House and Senate Leaders Announce Bicameral 'Surprise Billing' Legislation

Senate Health, Education, Labor and Pensions (HELP) Committee Chairman Lamar Alexander (R-Tenn.) and House Energy and Commerce Committee Chairman Frank Pallone Jr. (D-N.J.) along with Energy and Commerce Republican Leader Greg Walden (R-Ore.) Dec. 8 announced they have reached an agreement on legislation to address surprise medical billing.

Based on our initial review of a section-by-section summary of the bill, the AHA has outlined the most critical provisions below. AHA will provide additional information once the bill text is available.

**Prohibit Balance Billing:** Providers could not balance bill patients in certain scenarios. Specifically, patients would be required to pay only the in-network cost-sharing amount for out-of-network emergency care (including air ambulance services), for certain ancillary services provided by out-of-network providers at in-network facilities, and for out-of-network care provided at in-network facilities without the patient's informed consent. The amount the patients pay in cost-sharing for the out-of-network services subject to the balance billing protections would count towards their in-network deductible.

**Rate Setting:** Insurers would be required to, at a minimum, reimburse providers for all claims subject to the balance billing prohibition at the median in-network negotiated rate for the service in that geographic area where the service was delivered.

**Independent Dispute Resolution (Arbitration):** Both providers and insurers would have the right to contest claims paid at or above \$750 (\$25,000 for air ambulance services) using baseball-style, binding arbitration. The arbitrators would be directed to consider information brought by the parties related to the training, education and experience of the provider, the market share of the parties, and other factors such as patient acuity and the complexity of furnishing the item or service.

**Notice/Disclosure:** Providers may not balance bill patients unless they have given the patients notice of their network status and an estimate of charges 72 hours prior to receiving out-of-network services and the patient provides consent to receive out-of-network care.

**Contract Provisions:** These provisions would restrict certain contracting terms between providers and health plans.

Specifically, they would enable health plans to unfairly tier providers, steer patients to particular providers, and contract with only certain providers or "cherry-pick" within a hospital system.

**"Good Faith" Cost Estimates:** The bill would require providers and health plans to give patients good faith estimates of their expected out-of-pocket costs within two days of a request.

**Timely Bills:** The bill would require providers to give patients an itemized list of services received not later than 15 calendar days after discharge. In addition, the bill would bring billing for most services within a 60-day time period: providers would have 20 calendar days after discharge to bill the health plan; health plans would have 20 calendar days to adjudicate the bill; and providers would have no more than 20 days to send the adjudicated bill to the patient. Patients would have no obligation to pay any bills received more than 60 calendar days after receiving care, subject to some extenuating circumstances identified by the Secretary of the Department of Health and Human Services. Patients would have at least 35 days after the postmark date to pay bills.

- 2019 PAC Contributions**
- Barry Burkart
  - Bren Lowe
  - Margie Molitor
  - Doug Faus
  - Andy Fitzgerald
  - Maureen Cadwell
  - Dr. Carol Solie
  - Tim Thornell
  - Eric Boley
  - LifePoint
  - Robin Roling
  - Irene Richardson
  - Michele Chulick

## Powell Hospital Offers Free Program to Become More Healthy

Powell Valley Healthcare (PVHC) is launching a free group healthcare program for people with chronic health conditions or anyone wishing to improve their health. It's called Healthy U.

"It's to empower people to manage their symptoms in addition to the care they're receiving," said Healthy U facilitator Loretta Burris.

The workshops are available to anyone with conditions such as diabetes, arthritis, high blood pressure, heart disease, pain,

anxiety or depression. There are six workshops over six weeks, each lasting two hours long.

Participants will get support from other people with chronic health conditions, learn about healthy eating, create an exercise program, understand options for new treatments, learn how to communicate with pro-

viders and loved ones, and develop different strategies to deal with pain, fatigue, depression, anxiety and frustration.

Wyoming implemented the program in 2015. It's offered by the Wyoming Center on Aging in partnership with the Wyoming Department of Health.



## Specialized Support Offered to Help Teens Quit Vaping

Wyoming teens who want to stop using tobacco products, including electronic cigarettes and other vaping devices, are encouraged to enroll in a free program designed just for them and recently made available through the Wyoming Department of Health (WDH).

The program is offered by WDH partner National Jewish Health, the nation's largest non-profit tobacco quitline provider. My Life, My Quit is a resource that can help teens quit vaping or using other tobacco products.

According to the 2018 Prevention Needs Assessment, 36 percent of Wyoming high school students and 11 percent of Wyoming middle school students reported they currently vape.

The My Life, My Quit program includes educational materials designed for teens and created with input from teens, subject matter experts and community stakeholders. Teens can text or call a dedicated toll-free number (1-855-891-9989) or can visit [mylifemyquit.com](http://mylifemyquit.com) for real-time coaching. Through the program, teens work with a coach who listens and understands their unique needs, provides personalized support and helps them build a quit plan.

For adults who want to quit using tobacco, WDH continues to offer help through the Wyoming Quit Tobacco Program (WQTP).

Interested residents may call 1-800-QUIT NOW or visit [www.quitwyo.org](http://www.quitwyo.org) online. In addition to free nicotine replacement therapy and Chantix, free phone or online support is available.



## Legislative Session Nurse of the Day

The 2020 Wyoming Legislative Budget Session is scheduled to begin on February 10th.

The WHA Nurse of the Day program provides basic volunteer medical services, consultations and referrals on a limited, as-needed basis for legislators, staff and lobbyists, and occasionally visitors during the legislative session.

Services at Medical Aid Station are provided as a courtesy by the Wyoming Hospital Association and the Wyoming Medical Society, and operate on a totally volunteer basis. WHA & WMS administer the program and coordinate the placement of volunteer doctors and nurses.

Health care services in the Medical Aid Station are provided primarily as a convenience for people who experience non-emergency health care concerns during the Legislature, especially people who are away from home.

If you would like to volunteer, please contact the Association at 307-632-9344.