

REPORTS OF STANDING COMMITTEES

MR. SPEAKER:

The Committee on **Insurance** recommends **HB 2736** be amended on page 1, in line 9, after "all" by inserting "uninsured"; in line 10, by striking all after "not"; in line 11, by striking all before "until" and inserting ": (1) Garnish the wages of a patient; or (2) report or authorize a third-party debt collector to report medical financial information or debt to any credit bureau"; in line 17, after the period by inserting "Such screening may be conducted by a third-party vendor with demonstrated experience in conducting such medical charity care and financial eligibility screening."; in line 20, after "screening" by inserting "not later than 90 days post-discharge"; in line 29, by striking "apply for charity care" and inserting "appeal an adverse determination"; in line 30, by striking "is" and inserting "was found"; in line 35, by striking "the amount of charity care for which the patient qualified" and inserting "any amount paid by the patient that exceeds the actual amount owed";

On page 2, in line 7, after "invalid" by inserting "and take measures to ensure that the patient's credit report has been corrected within 90 calendar days"; in line 8, by striking all after "(g)"; in line 9, by striking all before the period and inserting "As used in this section, a non-disproportionate share hospital is a healthcare facility that does not meet the specific federal or state medicaid or medicare criteria for treating a high volume of low-income uninsured or medicaid-eligible patients";

On page 1, in the title, in line 2, after "screen" by inserting "uninsured"; and the bill be passed as amended.

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Chairperson