

118TH CONGRESS
1ST SESSION

H. R. 6855

To ensure timely bills for patients.

IN THE HOUSE OF REPRESENTATIVES

DECEMBER 19, 2023

Mr. GALLAGHER introduced the following bill; which was referred to the
Committee on Energy and Commerce

A BILL

To ensure timely bills for patients.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Timely Bills for Pa-
5 tients Act”.

6 **SEC. 2. TIMELY BILLS FOR PATIENTS.**

7 (a) IN GENERAL.—

8 (1) AMENDMENT.—Part P of title III of the
9 Public Health Service Act (42 U.S.C. 280g et seq.)
10 is amended by adding at the end the following:

11 **“SEC. 399V-7. TIMELY BILLS FOR PATIENTS.**

12 “(a) IN GENERAL.—The Secretary shall require—

1 “(1) health care facilities, or in the case of
2 practitioners providing services outside of such a fa-
3 cility, practitioners, to provide to patients a list of
4 services rendered during the visit to such facility or
5 practitioner, and, in the case of a facility, the name
6 of the provider for each such service, upon discharge
7 or by postal or electronic communication as soon as
8 practicable and not later than 5 calendar days after
9 discharge; and

10 “(2) health care facilities and practitioners to
11 send all adjudicated bills to the patient as soon as
12 practicable, but not later than 45 calendar days
13 after discharge.

14 “(b) PAYMENT AFTER BILLING.—No patient may be
15 required to pay a bill for health care services any earlier
16 than 30 calendar days after receipt of a bill for such serv-
17 ices.

18 “(c) EFFECT OF VIOLATION.—

19 “(1) NOTIFICATION AND REFUND REQUIRE-
20 MENTS.—

21 “(A) PROVIDER LISTS.—If a facility or
22 practitioner fails to provide a patient a list as
23 required under subsection (a)(1), such facility
24 or practitioner shall report such failure to the
25 Secretary.

1 “(B) BILLING.—If a facility or practitioner
2 bills a patient after the 45-calendar-day period
3 described in subsection (a)(2), such facility or
4 practitioner shall—

5 “(i) report such bill to the Secretary;
6 and

7 “(ii) refund the patient for the full
8 amount paid in response to such bill with
9 interest, at a rate determined by the Sec-
10 retary.

11 “(2) CIVIL MONETARY PENALTIES.—

12 “(A) IN GENERAL.—The Secretary may
13 impose civil monetary penalties of up to
14 \$10,000 a day on any facility or practitioner
15 that—

16 “(i) fails to provide a list required
17 under subsection (a)(1) more than 10
18 times, beginning on the date of such tenth
19 failure;

20 “(ii) submits more than 10 bills out-
21 side of the period described in subsection
22 (a)(2), beginning on the date on which
23 such facility or practitioner sends the tenth
24 such bill;

1 “(iii) fails to report to the Secretary
2 any failure to provide lists as required
3 under paragraph (1)(A), beginning on the
4 date that is 45 calendar days after dis-
5 charge; or

6 “(iv) fails to send any bill as required
7 under subsection (a)(2), beginning on the
8 date that is 45 calendar days after the
9 date of discharge or visit, as applicable.

10 “(B) PROCEDURE.—The provisions of sec-
11 tion 1128A of the Social Security Act, other
12 than subsections (a) and (b) and the first sen-
13 tence of subsection (c)(1) of such section, shall
14 apply to civil money penalties under this sub-
15 section in the same manner as such provisions
16 apply to a penalty or proceeding under section
17 1128A of the Social Security Act.

18 “(3) SAFE HARBOR.—The Secretary may ex-
19 empt a practitioner or facility from the penalties
20 under paragraph (2)(A) or extend the period of time
21 specified under subsection (a)(2) for compliance with
22 such subsection if a practitioner or facility—

23 “(A) makes a good faith attempt to send
24 a bill within 30 days but is unable to do so be-
25 cause of an incorrect address; or

1 “(B) experiences extenuating cir-
2 cumstances (as defined by the Secretary), such
3 as a hurricane or cyberattack, that may reason-
4 ably delay delivery of a timely bill.”.

5 (2) RULEMAKING.—Not later than 1 year after
6 the date of enactment of this Act, the Secretary
7 shall promulgate final regulations to define the term
8 “extenuating circumstance” for purposes of section
9 399V–7(c)(3)(B) of the Public Health Service Act,
10 as added by paragraph (1).

11 (b) GROUP HEALTH PLAN AND HEALTH INSURANCE
12 ISSUER REQUIREMENTS.—Subpart II of part A of title
13 XXVII of the Public Health Service Act (42 U.S.C.
14 300gg–11) is amended by adding to the end the following:
15 **“SEC. 2729A. TIMELY BILLS FOR PATIENTS.**

16 “(a) IN GENERAL.—A group health plan or health
17 insurance issuer offering group or individual health insur-
18 ance coverage shall have in place business practices with
19 respect to in-network facilities and practitioners to ensure
20 that claims are adjudicated in order to facilitate facility
21 and practitioner compliance with the requirements under
22 section 399V–7(a).

23 “(b) CLARIFICATION.—Nothing in subsection (a) pro-
24 hibits a provider and a group health plan or health insur-
25 ance issuer from establishing in a contract the timeline

1 for submission by either party to the other party of billing
2 information, adjudication, sending of remittance informa-
3 tion, or any other coordination required between the pro-
4 vider and the plan or issuer necessary for meeting the
5 deadline described in section 399V-7(a)(2).”.

6 (c) EFFECTIVE DATE.—The amendments made by
7 subsections (a) and (b) shall take effect 6 months after
8 the date of enactment of this Act.

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