AN ACT to create 146.901 of the statutes; relating to: limiting emergency care hospital rates for uninsured patients.

Analysis by the Legislative Reference Bureau

This bill prohibits hospitals from charging uninsured patients whose family income is less than 200 percent of the federal poverty line a rate for emergency services that exceeds 115 percent of the allowable charges under the federal Medicare program for those services. Under the bill, an uninsured patient is defined as a hospital patient who is a resident of this state, is not covered under a policy of health insurance, and is not a beneficiary under a public or private health insurance, health benefit, or other health coverage program.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 146.901 of the statutes is created to read:

146.901 Emergency service rates for the uninsured. (1) In this section:

(a) “Emergency services” means those services required to examine, treat, and stabilize an emergency medical condition in accordance with 42 USC 1395dd.
(b) “Family income” means the sum of a family’s annual earnings and cash benefits from all sources before taxes, less payments made for child support.

(c) “Hospital” has the meaning given in s. 50.33 (2).

(d) “Medicare” has the meaning given in s. 146.903 (1) (f).

(e) “Uninsured patient” means a patient of a hospital who meets all of the following criteria:

1. Is a resident of this state.
2. Is not covered under a policy of health insurance.
3. Is not a beneficiary under a public or private health insurance, health benefit, or other health coverage program, including high deductible health insurance plans, worker’s compensation, accident liability insurance, or other 3rd party liability.

(2) A hospital may not, for emergency services, charge an uninsured patient whose family income is less than 200 percent of the federal poverty line, as defined under 42 USC 9902 (2), a rate that exceeds 115 percent of the allowable charges under the federal Medicare program for those services.

SECTION 2. Initial applicability.

(1) This act first applies to charges for emergency services, as defined in section 146.901 (a), as created by this act, incurred on the effective date of this subsection.