

SENATE BILL REPORT

HB 2605

As Reported by Senate Committee On:
Health & Long-Term Care, February 18, 2010

Title: An act relating to billing for anatomic pathology services.

Brief Description: Concerning billing for anatomic pathology services.

Sponsors: Representatives Driscoll, Kelley, Chase, Ormsby and Moeller.

Brief History: Passed House: 2/12/10, 61-36.

Committee Activity: Health & Long-Term Care: 2/18/10 [DP].

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: Do pass.

Signed by Senators Keiser, Chair; Franklin, Vice Chair; Pflug, Ranking Minority Member; Becker, Fairley and Parlette.

Staff: Mich'l Needham (786-7442)

Background: Current law (Chapter 19.68 RCW) permits a referring physician to charge patients for actual services performed by the physician for the patient, including reimbursement for the actual charges of pathologists performing services on referral. The referring physician is prohibited from charging any amount greater than the actual amount billed to the referring physician by the pathologist. There is no requirement that a referring physician disclose in the bill to a patient or payor the actual cost of the pathology service. It is difficult to apply and enforce the provisions of Chapter 19.68 RCW relating to prohibiting the markup of pathology services.

The federal Medicare program prohibits physicians from billing Medicare for laboratory work they did not supervise or perform. Sixteen states currently require direct billing for pathology services to address concerns of billing markups.

Summary of Bill: Clinical laboratories or physicians providing anatomic pathology services for patients must present a bill only to a patient, a third-party payor, a hospital or clinic ordering the service, the referring laboratory, or a government agency or its agent.

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

Physicians cannot bill, directly or indirectly, for anatomic pathology services unless they were rendered personally or under the direct supervision of the physician. A violation of these requirements is addressed under Chapter 18.130 RCW, the Uniform Disciplinary Act.

Appropriation: None.

Fiscal Note: Not requested.

Committee/Commission/Task Force Created: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony: PRO: Although Washington has an anti-rebate law in place to prevent providers from adding to a bill, it is difficult to verify or enforce without transparency in the billing. This is a consumer protection bill to ensure the bills are transparent.

Persons Testifying: PRO: Peter Schrappen, Washington State Society of Pathologists.