LEGISLATURE OF THE STATE OF IDAHO

Sixty-seventh Legislature

Second Regular Session - 2024

IN THE HOUSE OF REPRESENTATIVES

HOUSE BILL NO. 501

BY BUSINESS COMMITTEE

AN ACT RELATING TO MEDICAL LIENS; AMENDING SECTION 45-701, IDAHO CODE, TO REVISE PROVISIONS REGARDING THE RIGHT TO CERTAIN LIENS; AMENDING SECTION 45-702, IDAHO CODE, TO REVISE PROVISIONS REGARDING THE FILING OF CER-TAIN HOSPITAL LIENS; AMENDING SECTION 45-704A, IDAHO CODE, TO REVISE PROVISIONS REGARDING CERTAIN LIENS FOR NURSING CARE; AMENDING SEC-TION 45-704B, IDAHO CODE, TO REVISE PROVISIONS REGARDING CERTAIN LIENS FOR MEDICAL CARE; AMENDING SECTION 48-303, IDAHO CODE, TO PROVIDE FOR THE APPLICATION OF THE IDAHO PATIENT ACT TO CERTAIN LIENS AND TO MAKE TECHNICAL CORRECTIONS; PROVIDING APPLICABILITY; AND DECLARING AN EMER-GENCY.

Be It Enacted by the Legislature of the State of Idaho:

SECTION 1. That Section 45-701, Idaho Code, be, and the same is hereby amended to read as follows:

45-701. RIGHT TO LIEN CONFERRED. Every individual, partnership, firm, association, corporation, institution, or any governmental unit or combination or parts thereof maintaining and operating a hospital in this state shall be entitled to a lien for the reasonable charges for value of hospital care, treatment, and maintenance of an injured person upon any and all causes of action, suits, claims, counterclaims, or demands accruing to the person to whom such care, treatment, or maintenance was furnished, or to the legal representatives of such person, on account of injuries giving rise to such causes of action and which that necessitated such hospital care, treatment, and maintenance.

SECTION 2. That Section 45-702, Idaho Code, be, and the same is hereby amended to read as follows:

45-702. PERFECTING LIEN -- STATEMENT OF CLAIM -- CONTENTS -- FILING. (1) In order to perfect such lien, an officer or agent of such hospital, before, or within ninety (90) days after, such person shall have been discharged therefrom, shall file in the office of the recorder of the county in which such hospital shall be is located a verified statement in writing setting forth the name and address of such patient, as it shall appear appears on the records of such hospital, the name and location of such hospital, and the name and address of the officer or agent of such hospital filing the lien, the dates of admission to the hospital and discharge of such patient therefrom, the amount claimed to be due for such hospital care, and, to the best of claimant's knowledge, the names and addresses of all persons, firms, or corporations claimed by such injured person or the legal representative of such person, to be liable for damages arising from such injuries; such. The claimant shall also, within one (1) day after the filing of such claim or

lien, mail a copy thereof, postage prepaid, to each person, firm, or corporation s_{Θ} claimed to be liable for such damages, at the address s_{Θ} given in such statement.

- (2) (a) In the case of a patient who has no third-party payor, as defined in section 48-303, Idaho Code, a lien authorized by this chapter must be filed before or within ninety (90) days after either the date the patient was discharged from the hospital or the last day services were provided to the patient as a result of the injury, whichever is later.
- (b) In the case of a patient who has a third-party payor, as defined in section 48-303, Idaho Code, a lien authorized by this chapter may be filed during the ninety (90) day period after either the date the patient was discharged from the hospital or the last day services were provided to the patient as a result of the injury but only after all contracted billing adjustments for the services as ordinarily used with that third-party payor are made, provided that such lien may additionally be filed during the thirty (30) days after the hospital has received payment from the third-party payor.
- $\underline{(3)}$ The filing of such claim or lien shall be notice thereof to all persons, firms, or corporations liable for such damages, whether or not they are named in such claim or lien.
- SECTION 3. That Section 45-704A, Idaho Code, be, and the same is hereby amended to read as follows:
- 45-704A. LIENS FOR NURSING CARE. Every person licensed under the laws of the state of Idaho to render nursing care shall be entitled to a lien for the reasonable charges for value of nursing care and treatment rendered an injured person upon any and all causes of action, suits, claims, counterclaims, or demands accruing to the person to whom such care and treatment was furnished, or to the legal representatives of such person, on account of injuries giving rise to such causes of action and which that necessitate such nursing care and treatment; said. Such a lien shall be perfected within the time prescribed and in the form and manner as provided in section 45-702, Idaho Code; said lien, and shall be recorded and indexed in the manner provided in section 45-703, Idaho Code; said. The lien shall be enforced and/or released in the manner provided in section 45-704, Idaho Code; and if. If the claimant of said lien shall prevail in an action to enforce said lien, the court may allow reasonable attorney's fees and disbursements.
- SECTION 4. That Section 45-704B, Idaho Code, be, and the same is hereby amended to read as follows:
- 45-704B. LIENS FOR MEDICAL CARE. Every individual or association licensed or incorporated under the laws of the state of Idaho to practice medicine and surgery (hereinafter "physician") shall be entitled to a lien for the reasonable charges for value of medical care and treatment rendered an injured person upon any and all causes of action, suits, claims, counterclaims, or demands accruing to the person to whom such care and treatment was furnished, or to the legal representatives of such person, on account of injuries giving rise to such causes of action and which that necessitate such medical care and treatment. In order to perfect the lien, the physician or

his agent shall, before or within ninety (90) days after the last date of medical services for the injury, file the lien within the time prescribed and in the same general form and manner as provided in section 45-702, Idaho Code, in the office of the recorder of the county in which the physician rendered the services. The lien shall be recorded and indexed in the manner provided in section 45-703, Idaho Code. The lien shall be enforced and/or released in the manner provided in section 45-704, Idaho Code. If the claimant of the lien shall prevail prevails in an action to enforce the lien, the court may allow reasonable attorney's fees and disbursements.

SECTION 5. That Section 48-303, Idaho Code, be, and the same is hereby amended to read as follows:

48-303. DEFINITIONS. For the purposes of this chapter:

- (1) (a) "Consolidated summary of services" means a written notice that contains, at a minimum, the following:
 - (i) The name and contact information, including telephone number, of the patient;
 - (ii) The name and contact information, including telephone number, of the health care facility that the patient visited to receive goods or services;
 - (iii) The date and duration of the visit to the health care facility by the patient;
 - (iv) A general description of goods and services provided to the patient during the visit to the health care facility, including the name, address, and telephone number of each billing entity whose health care providers provided the services and goods to the patient; and
 - (v) A clear and conspicuous notification at the top of the notice that states: "This is Not a Bill. This is a Summary of Medical Services You Received. Retain This Summary for Your Records. Please Contact Your Insurance Company and the Health Care Providers Listed on this Summary to Determine the Final Amount You May Be Obligated to Pay."
- (b) For the purpose of calculating timeline requirements in this chapter in the event of multiple notices, a "consolidated summary of services" means the notice that first supplied the information required by paragraph (a) of this subsection if such information did not change in any subsequent notices.
- (2) "Contested judgment" means a court judgment sought by one (1) party that is challenged by another party through a filing with the court or by presenting evidence or argument at a hearing before the court.
 - (3) (a) "Extraordinary collection action" means any of the following actions done in connection with a patient's debt:
 - (i) Prior to sixty (60) days from the patient's receipt of the final notice before extraordinary collection action, selling, transferring, or assigning any amount of a patient's debt to any third party, or otherwise authorizing any third party to collect the debt in a name other than the name of the health care provider;
 - (ii) Reporting adverse information about the patient to a consumer reporting agency; or

- (iii) Commencing Except as provided in paragraph (c) of this subsection, commencing any judicial or legal action or filing or recording any document in relation thereto, including but not limited to:
 - 1. Placing a lien on a person's property or assets;
 - 2. Attaching or seizing a person's bank account or any other personal property;
 - 3. Initiating a civil action against any person; or
 - 4. Garnishing an individual's wages.

- (b) "Extraordinary collection action" does not include an action pursuant to and in compliance with section 28-22-105, Idaho Code.
- (c) A provider authorized to file a lien to secure payment of the reasonable value of services provided to an injured patient pursuant to section 45-701, Idaho Code, is not prevented from filing such a lien by the provisions of this chapter, but must do so pursuant to the timeline and provisions of chapter 7, title 45, Idaho Code.
- (4) (a) "Final notice before extraordinary collection action" means a written notice that contains, at a minimum, the following:
 - (i) The name and contact information, including telephone number, of the patient;
 - (ii) The name and contact information, including telephone number, of the health care facility where the health care provider provided goods and services to the patient;
 - (iii) A list of the goods and services that the health care provider provided to the patient during the patient's visit to the health care facility, including the initial charges for the goods and services and the date the goods and services were provided, in reasonable detail;
 - (iv) A statement that a full itemized list of goods and services provided to the patient is available upon the patient's request;
 - (v) The name of the third-party payors to which the charges for health care services were submitted by the health care provider;
 - (vi) A detailed description of all reductions, adjustments, off-sets, <u>and</u> third-party payor payments, including payments already received from the patient, that adjust the initial charges for the goods and services provided to the patient during the visit; and (vii) The final amount that the patient is liable to pay after taking into account all applicable reductions, including but not lim-
 - ing into account all applicable reductions, including but not limited to the items identified in subparagraph (vi) of this paragraph.
- (b) For the purpose of calculating timeline requirements in this chapter in the event of multiple notices, the "final notice before extraordinary collection action" means the notice that first supplied the information required by paragraph (a) of this subsection if such information did not change in any subsequent notices.
- (5) "Health care facility" means any person, entity, or institution operating a physical or virtual location that holds itself out to the public as providing health care services through itself, through its employees, or through third-party health care providers. Health care facilities include but are not limited to hospitals and other licensed inpatient centers; ambu-

latory surgical or treatment centers; skilled nursing centers; residential treatment centers; urgent care centers; diagnostic, laboratory, and imaging centers; and rehabilitation and other therapeutic health settings, as well as medical transportation providers.

(6) "Health care provider" means:

- (a) A physician or other health care practitioner licensed, accredited, or certified to perform health care services consistent with state law, or any agent or third-party representative thereof; or
- (b) A health care facility or its agent.
- (7) "Health care services" means services for the diagnosis, prevention, treatment, cure, or relief of a health condition, illness, injury, or disease.
- (8) "Patient" means a person who seeks or receives services from a health care provider. For the purposes of this chapter, "patient" includes a parent if the patient is a minor, a legal guardian if the patient is an adult under guardianship, or any person contractually or otherwise liable for the financial obligations of the person receiving goods or services from the health care provider.
- (9) "Third-party payor" means a health carrier as defined in section 41-5903, Idaho Code, or a self-funded plan as defined in section 41-4002 or 41-4102, Idaho Code, and includes multiple third-party payors when applicable.
- (10) "Uncontested judgment" means a court judgment sought by one (1) party that is not contested by another party by filing with the court or by presenting evidence or argument at a hearing before the court.
- SECTION 6. The provisions of this act shall apply to any services provided to a patient on and after the date of passage and approval of this act.
- SECTION 7. An emergency existing therefor, which emergency is hereby declared to exist, this act shall be in full force and effect on and after its passage and approval.