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STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2026

A N A C T

RELATING TO HEALTH AND SAFETY -- PREVENTING UNWARRANTED FACILITY FEES

Introduced By: Representatives Potter, Kislak, Giraldo, Handy, McGaw, Tanzi, Donovan, Morales, Cotter, and Bennett

Date Introduced: February 27, 2026

Referred To: House Health & Human Services

It is enacted by the General Assembly as follows:

1 SECTION 1. Title 23 of the General Laws entitled "HEALTH AND SAFETY" is hereby
2 amended by adding thereto the following chapter:

3 CHAPTER 17.31

4 PREVENTING UNWARRANTED FACILITY FEES

5 **23-17.31-1. Definitions.**

6 For the purposes of this chapter:

7 (1) "Campus" means:

8 (i) The hospital's main buildings, the physical area immediately adjacent to a hospital's
9 main buildings and other areas and structures that are not strictly contiguous to the main buildings
10 but are located within two hundred fifty yards (250 yds.) of the main buildings or as may otherwise
11 be defined under federal law or regulation including 42 CFR § 413.65(a)(2) (or successor
12 regulations) or any other area that has been determined on an individual case basis by the Centers
13 for Medicare and Medicaid Services to be part of a hospital's campus.

14 (ii) "Off-site from a hospital campus" or "off-campus location" means any location that is
15 not located:

16 (A) On the "campus" as defined in this section; or

17 (B) Within the distance described in the definition of "campus".

18 (iii) Services provided via telecommunications or telemedicine are deemed to be rendered

1 off-site from a hospital campus for the purposes of this section.

2 (2) "Facility fee" means any fee that is:

3 (i) Intended to compensate the hospital, healthcare facility, or health system for the
4 operational, administrative, or overhead expenses of the hospital or health system; and

5 (ii) Separate and distinct from a professional fee.

6 (3) "Healthcare facility" has the meaning as set forth in § 23-17-2.

7 (4) "Healthcare clearinghouse" has the same meaning as set forth in 45 CFR § 160.103.

8 (5) "Healthcare provider" means any person, group, professional corporation, or other
9 organization that is licensed or otherwise authorized in this state to furnish a healthcare service or
10 provides the services of such individuals, groups, corporations, or organization including, but not
11 limited to, a medical clinic, a medical group, a home health care agency, a health infusion center,
12 an urgent care center, and an emergent care center.

13 (6) "Health system" means:

14 (i) A parent corporation of one or more hospitals and any entity affiliated with such parent
15 corporation through ownership, governance, membership or other means; or

16 (ii) A hospital and any entity affiliated with such hospital through ownership, governance,
17 membership or other means.

18 (7) "NPI" or "national provider identifier" means the standard, unique health identifier for
19 health care providers that is issued by the national provider system in accordance with 45 CFR
20 §162.408.

21 (8) "Subpart" has the same meaning as that term used in 45 CFR § 162.410 and means a
22 component or separate physical location of a health system that may be separately licensed or
23 certified by the state.

24 **23-17.31-2. Enhanced consumer protections from facility fees.**

25 (a) A healthcare facility, hospital-based facility, healthcare provider, or health system, shall
26 not bill, charge, collect, or seek compensation, remuneration, or reimbursement, for a facility fee
27 for services provided off-site from a hospital campus, and shall not submit, and no payer shall be
28 required to reimburse, an institutional claim, including a claim submitted on a UB-40 or any
29 successor or substantially similar form, or to include other claims code reserved for or indicating
30 services were provided on a hospital campus, for the services.

31 (b) An off-site entity may be required to submit claims for professional services by billing
32 via a claim form that reflects professional services only, such as CMS-1500, or any successor or
33 substantially similar form, and reimbursement shall be limited to the applicable professional fee.

34 (c) Any claim for outpatient services shall include the physical address where the services

1 were furnished and a unique site identifier required by § 23-17.31-3.

2 **23-17.31-3. Providers to obtain unique NPI.**

3 (a) An off-campus location of a hospital shall apply for, obtain, and use on all claims for
4 reimbursement or payment for health care services provided at the off-campus location submitted
5 on or after January 1, 2027, a unique National Provider Identifier (NPI) that is separate and distinct
6 from the hospital's NPI. The off-campus location's unique NPI shall be included on any claim for
7 reimbursement or payment for health care services provided at the off-campus location, regardless
8 of whether the claim is filed or submitted by or through a central office of the hospital or a health
9 care clearinghouse.

10 (b) Each health system and each subpart that is required or eligible to obtain an NPI
11 pursuant to 45 CFR § 162.410 shall apply for, obtain, and use on all claims for payment for medical
12 care, services, or goods, a unique NPI for each site at which the health system or its subparts deliver
13 medical care, services, or goods.

14 (c) Each health system and each subpart that is required or eligible to obtain an NPI
15 pursuant to 45 CFR § 162.410 shall apply for, obtain, and use on all claims for payment for medical
16 care, services, or goods a unique NPI for each provider type under which the health system or its
17 subparts deliver medical care, services, or goods.

18 (d) A health system or subpart submitting a claim for payment for medical care, services,
19 or goods shall include on the claim the unique NPI that identifies both the site where the medical
20 care, services, or goods were provided and the provider type regardless of whether the claim is filed
21 or submitted by or through a central office of the health system or a health care clearinghouse.

22 (e) For a health system that is a licensed or certified hospital contracting for services, the
23 hospital shall obtain and use a unique, separate, and distinct NPI for:

24 (1) Its main campus;

25 (2) Each off-campus location of the hospital; and

26 (3) Each provider types when the hospital delivers medical care, services, or goods at either
27 the hospital's main campus or at an off-campus location.

28 (f) A hospital submitting a claim for payment for medical care, services, or goods shall
29 include on the claim the unique NPI that identifies both the site where the medical care, services,
30 or goods were provided and the provider type, regardless of whether the claim is filed or submitted
31 by or through a central office of the hospital or a health care clearinghouse.

32 (g) Commencing January 1, 2027, a health system applying to enroll as a new provider
33 shall demonstrate that it has obtained or applied one or more NPIs as required by this section and,
34 upon enrollment, shall use its unique NPI on every claim for payment in the manner required by

1 this section.

2 (h) Commencing January 1, 2027, a health system enrolled and applying for revalidation
3 as a provider shall demonstrate that it has obtained or applied one or more NPIs as required by this
4 section as a condition of receiving revalidation, and upon receiving revalidation as a provider, shall
5 use its unique NPI on every claim for payment in the manner required by this section.

6 (i) Federal alignment. If the office of the health insurance commissioner determines that
7 federal law or rules from CMS provide a substantially similar alternative requirement or process,
8 then the office shall report to the speaker of the house and president of the senate as soon as practical
9 whether amendments to the above section are advisable.

10 SECTION 2. This act shall take effect upon passage.

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EXPLANATION
BY THE LEGISLATIVE COUNCIL
OF

A N A C T

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FEES

1 This act would prohibit the addition of facility fees when health care services are not
2 rendered on a hospital campus, and require each off-campus location of a hospital to have a unique
3 identification number in order that the charges associated with those facilities are transparent and
4 accountable.

5 This act would take effect upon passage.

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