

Facility Fees

September 18, 2018 (revised 10-9-2018)

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Any fee charged or billed by a hospital or health system for outpatient hospital services provided in a hospital-based facility that:

- a) is intended to compensate the hospital or health system for operational expenses; and
- b) is separate and distinct from a professional fee.

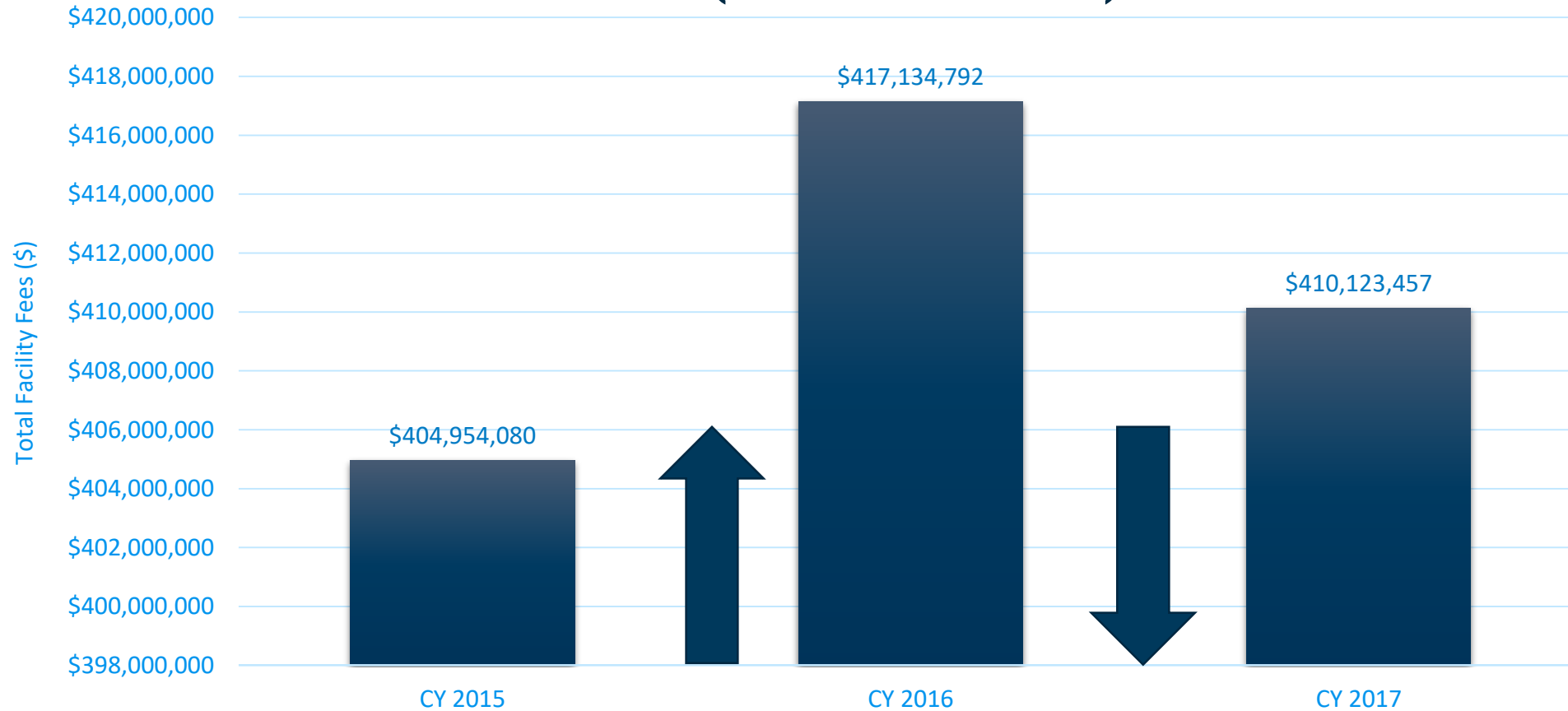
As of 1/1/2017, no hospital, health system or hospital-based facility is allowed to collect facility fees for outpatient health care services that use a current procedural terminology evaluation & management (E/M) code.

Facilities must:

- Give patient written notice that they may be charged a facility fee;
- Identify the fee as a facility fee in addition to, or separately from, any professional fee which may be an additional charge.
- Prominently display written notice that it may charge a facility fee.
- Clearly display signage, marketing, website, etc. that the facility is hospital-based.
- Provide a general notice to patients.

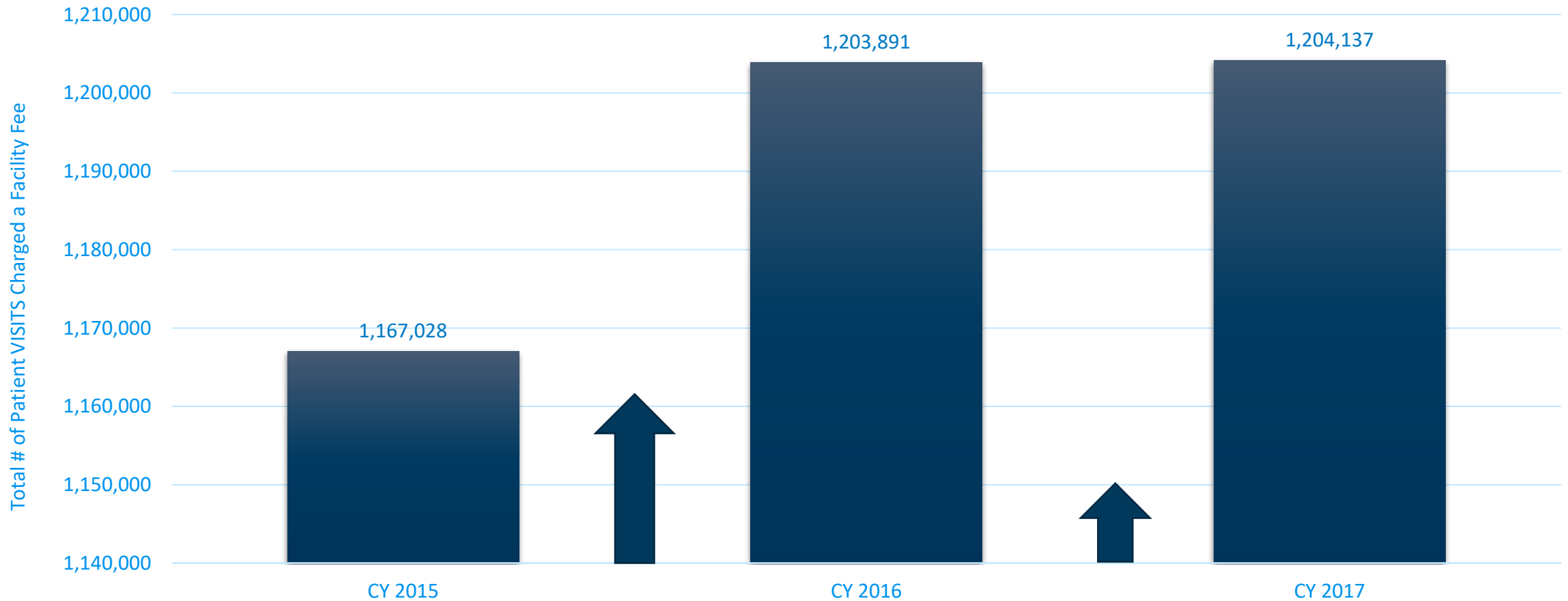
STATEWIDE FACILITY FEE NET REVENUE

(Revised 10/9/2018)



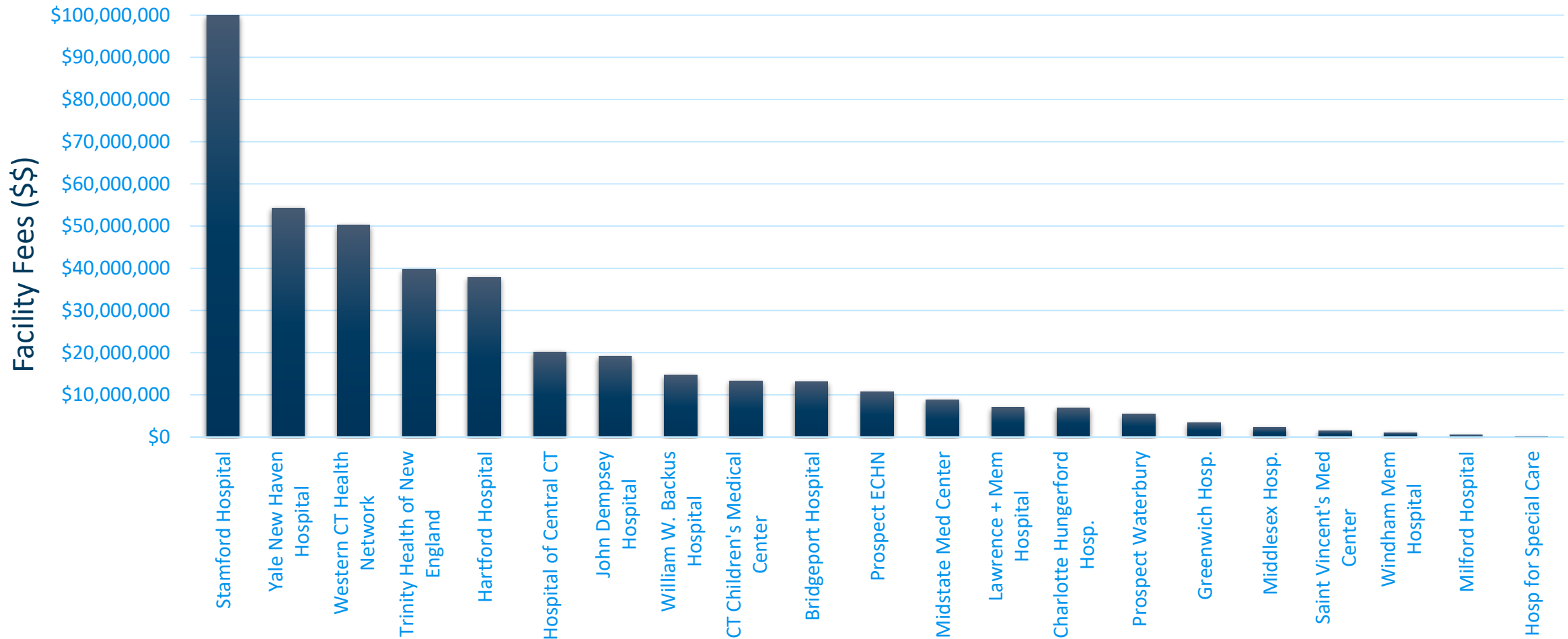
Total FACILITY FEES collected by CT's hospitals or systems decreased 1.7% from CY 2016 to CY 2017 after having increased 3% from CY 2015 to CY 2016.

STATEWIDE FACILITY FEE VISITS (REVISED 10-9-18)



Total patient VISITS for which a facility fee was charged/billed increased only 0.02% from CY 2016 to CY 2017 after having increased 3% from CY 2015 to CY 2016.

INDIVIDUAL HOSPITAL/SYSTEM CY 2017 FACILITY FEE NET REVENUE



Examples of procedures generating large amounts of facility fee revenue were Cataract/Eye Surgery, Digital Mammography Screening, Breast Tomosynthesis, Breast Ultrasound, Heart Echo, Upper GI Endoscopy Biopsy, and Colonoscopy.