

HB 617 -- HEALTH CARE COST REDUCTION AND TRANSPARENCY ACT

SPONSOR: Frederick

This bill establishes the Health Care Cost Reduction and Transparency Act that requires the Department of Health and Senior Services to make available to the public on its Internet website the most current price information it receives from hospitals and ambulatory surgical centers under these provisions. The department must provide this information in a manner that is easily understood by the public and meets minimum requirements as specified in the bill. Any data disclosed to the department by a hospital or ambulatory surgical center under these provisions must be the sole property of the hospital or center that submitted the data. Any data or product derived from the data disclosed under these provisions must be the sole property of the state. The department is prohibited from allowing proprietary information it receives under these provisions from being used by any person or entity for commercial purposes.

Beginning with the quarter ending June 30, 2016, and quarterly thereafter, each hospital must electronically provide to the department specified information about the 100 most frequently reported admissions by a diagnosis related group for inpatients as established by the department. Beginning with the quarter ending September 30, 2016, and quarterly thereafter, the bill requires each hospital and ambulatory surgical center to electronically submit to the department information on the total cost of the 25 most common surgical procedures and the 20 most common imaging procedures, by volume, performed in hospital or outpatient settings or in ambulatory surgical settings including the related current procedural terminology and health care common procedure coding system codes. A hospital or ambulatory surgical center must not be required to report the information required by these provisions if the reporting of that information reasonably could lead to the identification of the person or persons admitted to the hospital in violation of the federal Health Insurance Portability and Accountability Act of 1996 (HIPAA) or other federal law.

Upon request of a patient for a particular diagnosis related group, imaging procedure, or surgery procedure reported under these provisions, a hospital or ambulatory surgical center must provide the information to the patient in writing, either electronically or by mail, within three business days after receiving the request.