

**Rep. Rogers – price transparency language for HHC discussion**

Sec. A. GREEN MOUNTAIN CARE BOARD; PRICE TRANSPARENCY

DASHBOARD; REPORT

On or before February 1, 2021, the Green Mountain Care Board shall report to the House Committee on Health Care and the Senate Committees on Health and Welfare and on Finance regarding its progress in developing and implementing a public, interactive, Internet-based price transparency dashboard for use by health care consumers, including the results of the Board's efforts to validate VHCURES data through comparison with hospital discharge data and with information from the health insurers and the status of the Board's work with the various payers to incorporate location information into VHCURES data.

Sec. B. 18 V.S.A. § 9411 is added to read:

§ 9411. INTERACTIVE PRICE TRANSPARENCY DASHBOARD

(a) The Green Mountain Care Board shall develop and maintain a public, interactive, Internet-based price transparency dashboard that allows consumers to compare health care prices for certain health care services across the State. Using data from the Vermont Healthcare Claims Uniform Reporting and Evaluation System (VHCURES) established pursuant to section 9410 of this title, the dashboard shall provide the range of actual allowed amounts for selected health care services, showing both the amount paid by the health insurer or other payer and the amount of the member's responsibility, and shall allow the consumer to sort the information by geographic location, by health care provider, by payer type, and by the specific health care procedure or health care service.

(b) The Board shall update the information in the interactive price transparency dashboard at least annually.

Sec. C. INTERACTIVE PRICE TRANSPARENCY DASHBOARD;

DEMONSTRATION

On or before February 1, 2022, the Green Mountain Care Board shall provide a demonstration of the interactive price transparency dashboard developed pursuant to 18 V.S.A. § 9411 to the House Committees on Health Care and the Senate Committees on Health and Welfare and on Finance.

Sec. D. 18 V.S.A. § 9406 is added to read:

§ 9406. PRIVATE-PAY PATIENTS AT HOSPITALS AND HOSPITAL-AFFILIATED PRACTICES

(a) As used in this section, “private-pay rate” means the actual amount that is charged to a patient without health insurance coverage for the service or services provided.

(b) The private-pay rate for a health care service provided at a hospital or hospital-affiliated medical practice shall not exceed the maximum allowed amount that commercial health insurance plans reimburse the hospital or practice for the same service.

Sec. E. EFFECTIVE DATES

(a) Secs. A (Green Mountain Care Board; price transparency dashboard; report), C (interactive price transparency dashboard; demonstration), D (18 V.S.A. § 9406), and this section shall take effect on passage.

(b) Sec. B (18 V.S.A. § 9411) shall take effect on July 1, 2020, with the interactive price transparency dashboard becoming available for use by the public not later than January 1, 2022.