



CATALYST
FOR
PAYMENT
REFORM



Report Card on State Price Transparency Laws

March 18, 2013



Dear Colleagues,

As health care costs continue to rise, consumers are increasingly being required to take on a growing share. To underscore that point, the most recent survey by Mercer shows that close to two-thirds of all large employers offer a high deductible/high co-insurance health plan and that close to 20 percent of all commercially insured health plan members are enrolled in such plans. In this environment, it is only fair and logical to ensure that consumers have the necessary quality and price information to make informed decisions about where to seek health care. We have made progress sharing information about the quality of care, with organizations like Bridges to Excellence and The Leapfrog Group leading the way and federal and state governments getting in on the act. But with recent studies showing us that the price for an identical procedure within a market can vary seven-fold with no demonstrable difference in quality, price transparency is more important than ever.

While the private sector has made progress recently in making prices more available to consumers, there are still large gaps. States can play an important role in ensuring that consumers have access to both quality and price information by setting policies and implementing laws that advance transparency. The most comprehensive, consumer-friendly laws ensure ready access to information and data about a broad range of providers and services.

This Report Card on State Price Transparency Laws represents a joint effort between Catalyst for Payment Reform and the Health Care Incentives Improvement Institute to examine existing transparency laws in all 50 states and grade them, using well-defined criteria, on how well they support the information needs of consumers. The Methodology section of this report contains detail about these criteria.

We hope the Report Card will inform advocates, lawmakers and policy experts about today's best practices or what constitutes a top grade and, over time, generate improvements in public policies across the nation. American consumers deserve to have as much information about the quality and price of their health care as they do about restaurants, cars, and household appliances.

Sincerely,

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I. METHODOLOGY

Catalyst for Payment Reform (CPR) and the Health Care Incentives Improvement Institute (HCI³) teamed up to review state-specific laws focused on price transparency for health care. The review generated two products: (1) a Report Card on State Price Transparency Laws and (2) a reference table that provides the details of the price transparency laws for each state.

CPR and HCI³ examined statutes and enacted bills using WestLawNext database, the National Conference on State Legislature’s website, and websites from various state legislatures, among other sources.

This research revealed a wide variety of state laws, with two common and critical elements: (1) varying levels of price information and (2) varying levels of public access to that information. Using that continuum, the research team established levels of price transparency and scoring criteria.

Levels of Price Transparency:

- Pricing information reported to the State only
- Pricing information available upon request by an individual consumer
- Pricing information available in a public report
- Pricing information available via a public website

Scoring Criteria:

- Scope of price: including charges, average charge, amount paid by the insurer and amount paid by the consumer (allowed amount)
- Scope of services covered under the law including: all medical services, inpatient services only, outpatient services only or the most common inpatient and outpatient services
- Scope of providers affected by the law including: hospitals, physicians, and surgical centers

Next, the team developed a scoring matrix (shown on following page), which allocates points based on level of price transparency and scope of price, services, and providers.

We evaluated each level of price transparency laws for scope of price, services, and providers. For example, if laws required pricing information (both paid amounts and charges) to be posted on a public website for all inpatient and outpatient services across all hospitals and providers, the state received full credit (50 out of 50 possible points) for that level of transparency. However, if the laws required only charges to be posted for

the most common hospital discharges across a subset of hospitals, the state received substantially fewer points (15 out of 50 possible points). We calculated a score for each level separately and then summed for a total score out of 100 possible points. Every state received a cumulative additive score, taking into account all relevant laws passed in that state. Thus, grades do not reflect individual statutes or bills but rather each state’s overall legislative effort toward price transparency for health care.

The objective of this research was to determine how much pricing information each state makes accessible to the consumer. As a result, we allocated more points to states with laws requiring that information be posted on a public website than to those with provisions for releasing a public report, making the information available upon request, and only

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specific to both what was paid for a service and what was charged for that service is more meaningful than only releasing what was charged. Charges often are of little value to consumers; the amount that is actually paid for the service, particularly the amount that the consumer is responsible for paying, provides the most actionable information. Similarly, releasing pricing information for all inpatient and outpatient services and for all hospitals and providers, rather than just the most common services or a subset of providers, is more meaningful to the consumer. As a result, we allotted a higher point value to the broader scope of services/providers.

				SUBTOTAL	TOTAL	GRADE
Provision for publishing a report to the state only				1 (weight)		10
Scope of Price Legislated (three levels, can only have 1 score out of 3)	Paid Amounts and Charges	4	4			
	Paid Amounts	3				
	Charges	1				
Scope of Services Legislated (three levels, can only have 1 score out of 3)	All IP and OP	3	3			
	All IP or OP	2				
	Most common IP or OP	1				
Scope of Health Care Providers Legislated (three levels, can only have 1 score out of 3)	All hospitals and providers	3	3			
	All hospitals or providers	2				
	Subset of hospitals/providers	1				
Ability for patient to request pricing information prior to rendering of services				2 (weight)		20
Scope of Price Legislated (three levels, can only have 1 score out of 3)	Paid Amounts and Charges	4	8			
	Paid Amounts	3				
	Charges	1				
Scope of Services Legislated (three levels, can only have 1 score out of 3)	All IP and OP	3	6			
	All IP or OP	2				
	Most common IP or OP	1				
Scope of Health Care Providers Legislated (three levels, can only have 1 score out of 3)	All hospitals and providers	3	6			
	All hospitals or providers	2				
	Subset of hospitals/providers	1				
Provision for publishing a public report on pricing information				2 (weight)		20
Scope of Price Legislated (three levels, can only have 1 score out of 3)	Paid Amounts and Charges	4	8			
	Paid Amounts	3				
	Charges	1				
Scope of Services Legislated (three levels, can only have 1 score out of 3)	All IP and OP	3	6			
	All IP or OP	2				
	Most common IP or OP	1				
Scope of Health Care Providers Legislated (three levels, can only have 1 score out of 3)	All hospitals and providers	3	6			
	All hospitals or providers	2				
	Subset of hospitals/providers	1				
Provision for posting pricing information on a public website				5 (weight)		50
Scope of Price Legislated (three levels, can only have 1 score out of 3)	Paid Amounts and Charges	4	20			
	Paid Amounts	3				
	Charges	1				
Scope of Services Legislated (three levels, can only have 1 score out of 3)	All IP and OP	3	15			
	All IP or OP	2				
	Most common IP or OP	1				
Scope of Health Care Providers Legislated (three levels, can only have 1 score out of 3)	All hospitals and providers	3	15			
	All hospitals or providers	2				
	Subset of hospitals/providers	1				

100

A

While no state has implemented laws that meet all of our criteria, we graded on a curve to acknowledge the states with the most advanced laws to date. We anticipate that this curve will shift as transparency becomes more of a priority nationally. We based the letter grades on the following scores:

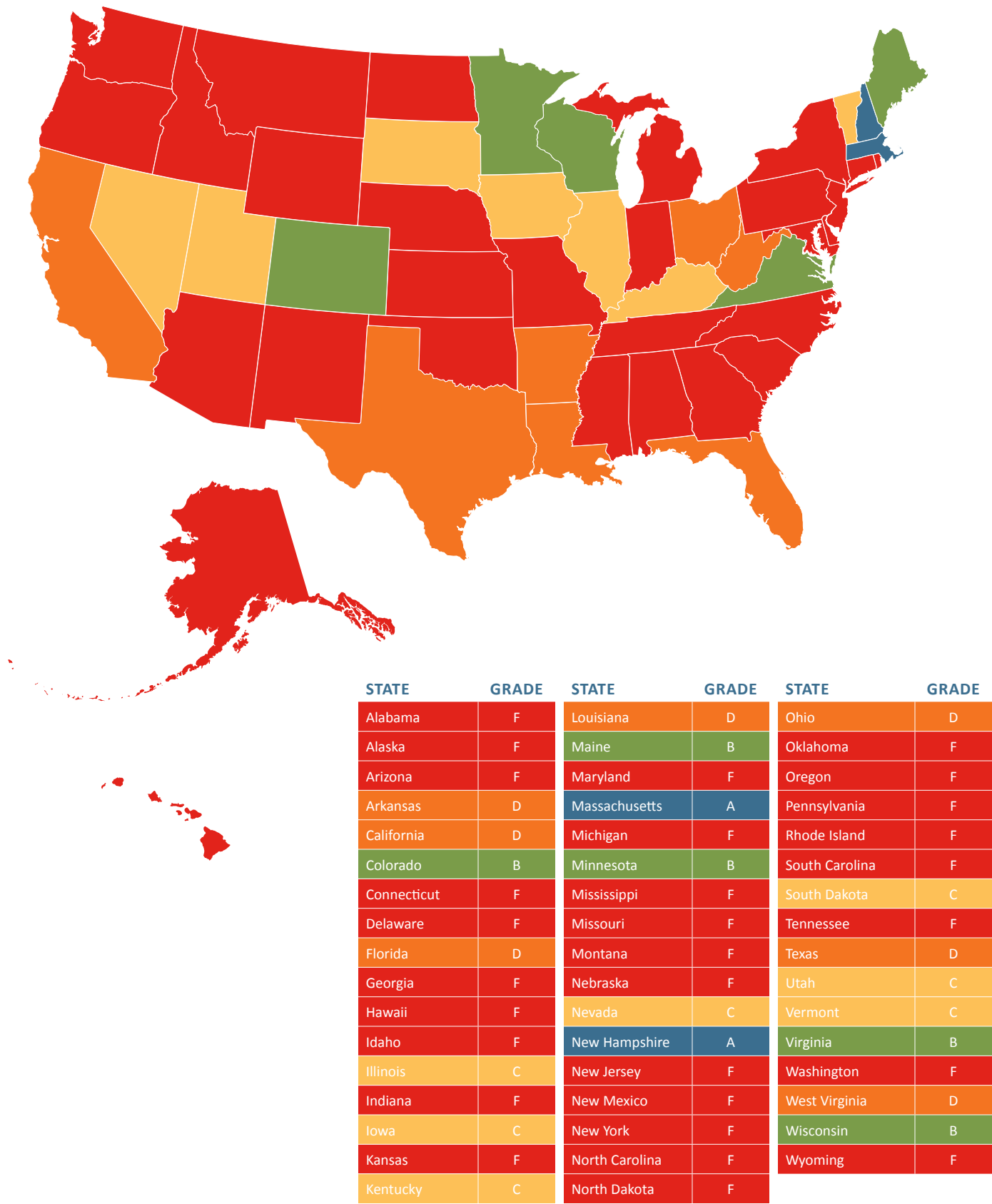
GRADE	FROM	TO
A	60%	100%
B	50%	59%
C	40%	49%
D	30%	39%
F	0%	29%

Limitations of this research include (1) variation in definitions among states and (2) accounting for the difference between laws and execution. Numerous permutations exist in the ways states define terms, such as the term “health care provider” or what is included in a “public report.” Many times these public reports, even when developed for the explicit purpose of enabling consumers to make informed decisions, do not contain the resolution of information needed to understand a specific provider’s price. Instead, public reports may contain aggregate or average charges for all providers for a specific service. Interested readers should refer to the statute text and example reports, which are hyperlinked in the “Reference Table.” The second limitation is accounting for the difference between laws and execution. A website intended for consumer use may be legislated but not easily identifiable or actionable, while in other cases, such a website was not legislated but nonetheless developed by the state or an independent party, often the state’s hospital association. These considerations were addressed on a state by state basis with all relevant details present or hyperlinked in the Reference Table.

Resources permitting, CPR and HCI³ will partner again next year to update this state report card. We anticipate that we will raise the scoring thresholds for each letter grade at that time.

II. 50 STATE REPORT CARD ON PRICE TRANSPARENCY LAWS

Figure 1: Map Overlay



III. SIMPLIFIED SCORING AND GRADES BY STATE

State	Level of Transparency	Scope of Providers			Scope of Price			Scope of Services			Grade
		Both Practitioners & Facilities	Health Care Practitioner or Facility	Subset of Either Practitioner or Facility	Both	Paid Amounts	Charges	All IP & OP	All IP or OP	Most common IP or OP	
AK	State Only										F
	Upon Request										
	Report										
	Website										
AL	State Only										F
	Upon Request										
	Report										
	Website										
AR	State Only		✓				✓			✓	D
	Upon Request										
	Report		✓				✓			✓	
	Website		✓				✓			✓	
AZ	State Only			✓			✓		✓		F
	Upon Request		✓				✓			✓	
	Report			✓			✓		✓		
	Website										
CA	State Only		✓				✓	✓		✓	D
	Upon Request			✓			✓	✓		✓	
	Report										
	Website		✓				✓			✓	
CO	State Only			✓		✓	✓			✓	B
	Upon Request		✓				✓			✓	
	Report										
	Website		✓	✓		✓	✓			✓	
CT	State Only	✓				✓	✓		✓		F
	Upon Request	✓					✓			✓	
	Report										
	Website										
DE	State Only		✓				✓		✓		F
	Upon Request										
	Report		✓				✓		✓		
	Website										
FL	State Only		✓				✓		✓		D
	Upon Request			✓			✓			✓	
	Report										
	Website		✓				✓			✓	
GA	State Only	✓					✓		✓		F
	Upon Request										
	Report										
	Website										
HI	State Only										F
	Upon Request										
	Report										
	Website										

State	Level of Transparency	Scope of Providers			Scope of Price			Scope of Services			Grade
		Both Practitioners & Facilities	Health Care Practitioner or Facility	Subset of Either Practitioner or Facility	Both	Paid Amounts	Charges	All IP & OP	All IP or OP	Most common IP or OP	
IA	State Only		✓				✓	✓			C
	Upon Request										
	Report										
	Website		✓				✓	✓		✓	
ID	State Only										F
	Upon Request										
	Report										
	Website										
IL	State Only		✓				✓	✓			C
	Upon Request		✓				✓		✓		
	Report		✓				✓	✓			
	Website		✓				✓			✓	
IN	State Only		✓				✓		✓		F
	Upon Request		✓				✓		✓		
	Report		✓				✓		✓		
	Website										
KS	State Only	✓					✓		✓		F
	Upon Request										
	Report										
	Website										
KY	State Only	✓					✓		✓		C
	Upon Request										
	Report	✓					✓		✓		
	Website	✓					✓		✓		
LA	State Only	✓					✓		✓		D
	Upon Request										
	Report										
	Website	✓					✓		✓		
MA	State Only	✓			✓			✓			A
	Upon Request				✓				✓		
	Report		✓				✓	✓			
	Website	✓				✓				✓	
MD	State Only		✓				✓		✓		F
	Upon Request										
	Report		✓				✓		✓		
	Website										
ME	State Only	✓			✓					✓	B
	Upon Request	✓				✓				✓	
	Report										
	Website		✓		✓					✓	
MI	State Only										F
	Upon Request										
	Report										
	Website										

State	Level of Transparency	Scope of Providers			Scope of Price			Scope of Services			Grade
		Both Practitioners & Facilities	Health Care Practitioner or Facility	Subset of Either Practitioner or Facility	Both	Paid Amounts	Charges	All IP & OP	All IP or OP	Most common IP or OP	
MN	State Only	✓			✓			✓			B
	Upon Request			✓			✓		✓		
	Report		✓				✓		✓		
	Website		✓				✓			✓	
MO	State Only										F
	Upon Request										
	Report										
	Website										
MS	State Only										F
	Upon Request										
	Report										
	Website										
MT	State Only										F
	Upon Request										
	Report										
	Website		✓				✓	✓			
NC	State Only		✓				✓			✓	F
	Upon Request		✓				✓			✓	
	Report										
	Website										
ND	State Only	✓					✓	✓			F
	Upon Request										
	Report	✓					✓			✓	
	Website										
NE	State Only										F
	Upon Request	✓					✓		✓		
	Report										
	Website										
NH	State Only	✓			✓			✓			A
	Upon Request	✓			✓					✓	
	Report										
	Website	✓			✓					✓	
NJ	State Only		✓		✓				✓		F
	Upon Request										
	Report		✓		✓				✓		
	Website										
NM	State Only		✓				✓		✓		F
	Upon Request										
	Report		✓				✓		✓		
	Website										
NV	State Only		✓				✓			✓	C
	Upon Request		✓				✓			✓	
	Report		✓				✓			✓	
	Website		✓				✓			✓	

State	Level of Transparency	Scope of Providers			Scope of Price			Scope of Services			Grade
		Both Practitioners & Facilities	Health Care Practitioner or Facility	Subset of Either Practitioner or Facility	Both	Paid Amounts	Charges	All IP & OP	All IP or OP	Most common IP or OP	
NY	State Only	✓					✓			✓	F
	Upon Request										
	Report	✓					✓			✓	
	Website										
OH	State Only		✓				✓		✓		D
	Upon Request		✓				✓			✓	
	Report										
	Website		✓				✓		✓		
OK	State Only		✓		✓				✓		F
	Upon Request										
	Report										
	Website										
OR	State Only	✓					✓		✓		F
	Upon Request										
	Report	✓					✓		✓		
	Website										
PA	State Only	✓			✓				✓		F
	Upon Request										
	Report	✓			✓				✓		
	Website										
RI	State Only	✓			✓				✓		F
	Upon Request										
	Report	✓					✓		✓		
	Website										
SC	State Only		✓				✓	✓			F
	Upon Request										
	Report		✓				✓		✓		
	Website										
SD	State Only		✓				✓		✓		C
	Upon Request		✓				✓		✓		
	Report		✓				✓			✓	
	Website		✓				✓			✓	
TN	State Only	✓					✓	✓			F
	Upon Request										
	Report	✓					✓	✓			
	Website										
TX	State Only	✓					✓	✓			D
	Upon Request	✓					✓	✓			
	Report	✓					✓	✓			
	Website										
UT	State Only	✓					✓		✓		C
	Upon Request										
	Report	✓					✓		✓		
	Website	✓					✓		✓		

State	Level of Transparency	Scope of Providers			Scope of Price			Scope of Services			Grade
		Both Practitioners & Facilities	Health Care Practitioner or Facility	Subset of Either Practitioner or Facility	Both	Paid Amounts	Charges	All IP & OP	All IP or OP	Most common IP or OP	
VA	State Only	✓			✓			✓			B
	Upon Request										
	Report	✓			✓				✓		
	Website	✓					✓			✓	
VT	State Only	✓					✓	✓			C
	Upon Request										
	Report	✓					✓			✓	
	Website	✓					✓			✓	
WA	State Only										F
	Upon Request	✓					✓	✓			
	Report										
	Website										
WI	State Only				✓				✓		B
	Upon Request	✓					✓	✓			
	Report		✓				✓		✓		
	Website		✓				✓			✓	
WV	State Only	✓					✓		✓		D
	Upon Request		✓				✓	✓			
	Report	✓					✓		✓		
	Website										
WY	State Only										F
	Upon Request										
	Report										
	Website		✓				✓	✓			

STATE LAWS ON HEALTH CARE PRICE TRANSPARENCY AND DISCLOSURE											
STATE	LAWS	YEAR	SCOPE OF HEALTH CARE PROVIDERS		SCOPE OF PRICE		SCOPE OF SERVICES	LEVEL OF TRANSPARENCY			
			Scope of Health Care Providers	Insurers are required to report? (Not factored in grading)	Charge	Paid Amount	Scope of Services	Reported to the State	Available upon request	Available in Report	Available on Website
Description	Relevant statute(s) with a hyperlink to the text and all relevant enacted bills with available hyperlinks	If available, date of enactment	May legislate hospitals, surgical centers, or all providers including individual physicians	May legislate health plans, insurers, or carriers to report to the state	Includes average annual charges, charge estimates, actual charges	Demonstrates accepted reimbursement rates from different payers	May legislate only most common procedures, only outpatient services, or all billable services	Price information is reported to the state	Price information is available to an individual upon request	Price information is available in a publicly available report	Price information is available on a website
Arizona	STATUTE(S): Arizona Revised Statutes § 36-125.05 ENACTED BILL(S): Added: 1983; Amended: S.B. 1201 (1988), S.B. 1486 (1988), S.B. 1086 (1990), S.B. 1352 (1994), H.B. 2048 (1996) , S.B. 1142 (2005) , H.B. 2150 (2010)	Added: 1983 Amended: 1988, 1990, 1994, 2005, 2010	"hospitals [except] state hospitals"		"The average charge per day [and] The average charge per confinement"		"all inpatient services"	"[report to] the department"		"All reports filed pursuant to this section are open to public inspection"	
	STATUTE(S): Arizona Revised Statutes § 36-125.05 ENACTED BILL(S): Added: 1983; Amended: S.B. 1201 (1988), S.B. 1486 (1988), S.B. 1086 (1990), S.B. 1352 (1994), H.B. 2048 (1996) , S.B. 1142 (2005) , H.B. 2150 (2010)	Added: 1983 Amended: 1988, 1990, 1996, 2005, 2010	"Emergency departments"		"Charges for services"		"outpatient services"	"[report to] the department"		"All reports filed pursuant to this section are open to public inspection"	
	STATUTE(S): Arizona Revised Statutes § 36-125.06 ENACTED BILL(S): Added: 1983; Amended: S.B. 1086 (1990), H.B. 2048 (1996) , S.B. 1230 (2000) , S.B. 1142 (2005)	Added: 1983 Amended: 1990, 1996, 2000, 2005	"hospitals and emergency departments"		"average charges per confinement"		"the most common diagnoses and procedures for inpatient and emergency department"		"shall make available in its reception area a sufficient number of these brochures for free distribution of one copy to each individual requesting a copy"	"The director shall publish a comparative report "	

STATE LAWS ON HEALTH CARE PRICE TRANSPARENCY AND DISCLOSURE											
STATE	LAWS	YEAR	SCOPE OF HEALTH CARE PROVIDERS		SCOPE OF PRICE		SCOPE OF SERVICES	LEVEL OF TRANSPARENCY			
			Scope of Health Care Providers	Insurers are required to report? (Not factored in grading)	Charge	Paid Amount	Scope of Services	Reported to the State	Available upon request	Available in Report	Available on Website
Description	Relevant statute(s) with a hyperlink to the text and all relevant enacted bills with available hyperlinks	If available, date of enactment	May legislate hospitals, surgical centers, or all providers including individual physicians	May legislate health plans, insurers, or carriers to report to the state	Includes average annual charges, charge estimates, actual charges	Demonstrates accepted reimbursement rates from different payers	May legislate only most common procedures, only outpatient services, or all billable services	Price information is reported to the state	Price information is available to an individual upon request	Price information is available in a publicly available report	Price information is available on a website
Arizona	STATUTE(S): Arizona Revised Statutes § 36-436 ENACTED BILL(S): Added: 1971; Amended: S.B. 1355 (1989), S.B. 1352 (1994)	Added: 1971 Amended: 1989, 1994	"hospital or nursing care institution"		"schedule of its rates and charges"		"all services performed and commodities furnished"	"file [...] with the director"	"posted in a conspicuous place in the reception area of each [and] Another copy also shall be kept in the reception area and be available for inspection by the public at all times upon request"	"publish information"	
	STATUTE(S): Arizona Revised Statutes § 36-436.03 ENACTED BILL(S): Added: S.B. 1352 (1994)	Added: 1994	"A home health agency, supervisory care home and a hospice"		"a copy of the institution's rates and charges"				"to the public on request"	"report"	
Arkansas	STATUTE(S): Arkansas Code §§ 20-7-303, 4, 5 ENACTED BILL(S): Added: S.B. 596 (1995) Amended: H.B. 1470 (2005) , H.B. 1513 (2007)	Added: 1995 Amended: 2005, 2007	"All hospitals and outpa-tient surgery centers"		"health data" AND "price [...] information"			"collected by the Division of Health of the Department of Health and Human Services"		"disseminate"	"provide data to the Arkansas Hospital Association for its price transparency and consumer-driven health care project"

STATE LAWS ON HEALTH CARE PRICE TRANSPARENCY AND DISCLOSURE											
STATE	LAWS	YEAR	SCOPE OF HEALTH CARE PROVIDERS		SCOPE OF PRICE		SCOPE OF SERVICES	LEVEL OF TRANSPARENCY			
			Scope of Health Care Providers	Insurers are required to report? (Not factored in grading)	Charge	Paid Amount	Scope of Services	Reported to the State	Available upon request	Available in Report	Available on Website
Description	Relevant statute(s) with a hyperlink to the text and all relevant enacted bills with available hyperlinks	If available, date of enactment	May legislate hospitals, surgical centers, or all providers including individual physicians	May legislate health plans, insurers, or carriers to report to the state	Includes average annual charges, charge estimates, actual charges	Demonstrates accepted reimbursement rates from different payers	May legislate only most common procedures, only outpatient services, or all billable services	Price information is reported to the state	Price information is available to an individual upon request	Price information is available in a publicly available report	Price information is available on a website
California	STATUTE(S): California Health and Safety Code §1339.51, §1339.55 ENACTED BILL(S): Added: A.B. 1627 §6 (2003)	Added: 203	“hospital[s]” except “small and rural hospital[s]”		“charge description master”				“shall make a written [...] copy available at the hospital location.” AND “shall post a clear and conspicuous notice in its emergency department, if any, in its admissions office, and in its billing office that informs patients that the hospital’s charge description master is available”		[...] electronic copy [...] by posting an electronic copy [...] on the hospital’s Internet Web site ”
	STATUTE(S): California Health and Safety Code §1339.56 ENACTED BILL(S): Added: A.B. 1627 §6 (2003) ; Amended: by A.B. 1045 §1 (2005)	Added: 2003	“each hospital”		“average charges”		“25 common outpatient procedures” and “25 most commonly performed inpatient procedures”	“submit annually to the office”	“shall provide a copy [...] to any person upon request”		“the office shall publish this information on its Internet Web site ”

STATE LAWS ON HEALTH CARE PRICE TRANSPARENCY AND DISCLOSURE											
STATE	Laws	YEAR	SCOPE OF HEALTH CARE PROVIDERS		SCOPE OF PRICE		SCOPE OF SERVICES	LEVEL OF TRANSPARENCY			
			Scope of Health Care Providers	Insurers are required to report? (Not factored in grading)	Charge	Paid Amount	Scope of Services	Reported to the State	Available upon request	Available in Report	Available on Website
Description	Relevant statute(s) with a hyperlink to the text and all relevant enacted bills with available hyperlinks	If available, date of enactment	May legislate hospitals, surgical centers, or all providers including individual physicians	May legislate health plans, insurers, or carriers to report to the state	Includes average annual charges, charge estimates, actual charges	Demonstrates accepted reimbursement rates from different payers	May legislate only most common procedures, only outpatient services, or all billable services	Price information is reported to the state	Price information is available to an individual upon request	Price information is available in a publicly available report	Price information is available on a website
California	STATUTE(S): California Health and Safety Code §1339.585 ENACTED BILL(S): Added: A.B. 1045 §1 (2005)	Added: 2005	“hospital”		“written estimate of the amount the hospital will require the person to pay [...] based on an average length of stay and services provided for the person’s diagnosis”		“for health care services, procedures, and supplies [...] does not apply to emergency services”		“Upon the request of a person without health coverage”		
	STATUTE(S): California Health and Safety Code §128735 ENACTED BILL(S): Added: S.B. 1360 §5 (1995) ; Amended: S.B. 1659 §2 (1996) , S.B. 1973 §8 (1998) , S.B. 680 §2 (2001) , S.B. 1498 §163 (2008)	Added: 1995 Amended: 1996, 1998, 2001, 2008	“Every organization that operates, conducts, or maintains a health facility”		“Total charges”			“submit annually to the office”			
Colorado	STATUTE(S): Colorado Revised Statutes §10-16-133 ENACTED BILL(S): Added: H.B. 08-1385 §1 (2008)	Added: 2008		“each carrier”	“information [...] useful to consumers and purchasers of health care insurance”				“alternative methods of making the consumer guide accessible to consumers who do not have internet access”		“maintain a consumer guide on the division of insurance web site ”

STATE LAWS ON HEALTH CARE PRICE TRANSPARENCY AND DISCLOSURE											
STATE	LAWS	YEAR	SCOPE OF HEALTH CARE PROVIDERS		SCOPE OF PRICE		SCOPE OF SERVICES	LEVEL OF TRANSPARENCY			
			Scope of Health Care Providers	Insurers are required to report? (Not factored in grading)	Charge	Paid Amount	Scope of Services	Reported to the State	Available upon request	Available in Report	Available on Website
Description	Relevant statute(s) with a hyperlink to the text and all relevant enacted bills with available hyperlinks	If available, date of enactment	May legislate hospitals, surgical centers, or all providers including individual physicians	May legislate health plans, insurers, or carriers to report to the state	Includes average annual charges, charge estimates, actual charges	Demonstrates accepted reimbursement rates from different payers	May legislate only most common procedures, only outpatient services, or all billable services	Price information is reported to the state	Price information is available to an individual upon request	Price information is available in a publicly available report	Price information is available on a website
Colorado	STATUTE(S): Colorado Revised Statutes §10-16-111 §1 ENACTED BILL(S): Added: S.B. 92-104 §1 (1992) ; Amended: S.B. 92-90 §113 (1992)	Added: 1992 Amended: 1992	“Nonprofit hospital, medical-surgical, and health service corporations”	“all insurance companies”		“amounts actually paid”	“for hospital, medical-surgical, and other health services”	“file annually with the commissioner”			
	STATUTE(S): Colorado Revised Statutes §10-16-111 §4 ENACTED BILL(S): Added: H.B. 08-1389 §9 (2008)	Added: 2008		“all carriers”	“medical provider price increases” AND “pharmaceutical price increases”	“The cost of providing or arranging health care services”		“file annually with the commissioner”			“publish the information on the division’s web site ”
	STATUTE(S): Colorado Revised Statutes §25.5-6-202 ENACTED BILL(S): Added: S.B. 06-219 (2006) ; Amended: H.B. 08-1114 (2008) , S.B. 09-263 (2009) , H.B. 10-1324 (2010) , H.B. 10-1379 (2010) , S.B. 11-215 (2011) , H.B. 12-1340 (2012)	Added: 2006 Amended: 2009, 2010, 2011, 2012	“each nursing facility provider”		“cost reports”			“filed with the state department”			
	STATUTE(S): Colorado Revised Statutes §6-20-101 ENACTED BILL(S): Added: S.B. 03-015 (2003) ; Amended: S.B. 04-239 (2004)	Added: 2003 Amended: 2011	“each hospital”		“Average facility charge [...] the average charge information”		“Frequently performed inpatient procedure” (explicitly excludes emergency care)		“disclose to a person seeking care or treatment”		

STATE LAWS ON HEALTH CARE PRICE TRANSPARENCY AND DISCLOSURE											
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Colorado	STATUTE(S): Colorado Revised Statutes §25-3-705 ENACTED BILL(S): Added: H.B. 08-1393 (2008) ; Amended: H.B. 1303 (2011)	Added: 2008 Amended: 2011	"each hospital"		"Mean charge"		"the top twenty-five diagnostic-related groups with more than ten occurrences"	"shall report annually to the association of hospitals"			"division of insurance web site " AND "shall be made available on the [Colorado Hospital Association's] web site in a manner that allows consumers to conduct an interactive search to view and compare the information for specific hospitals"
	STATUTE(S): Colorado Revised Statutes §10-16-134 ENACTED BILL(S): Added: H.B. 08-1393 (2008)	Added: 2008		"each carrier"		"average reimbursement rates"	"for the average inpatient day [...]the twenty-five most common inpatient procedures"	"submit to the division"			"division of insurance web site " AND "shall ensure that the [Colorado Hospital Association's] web site and information is easy to navigate, contains consumer-friendly language"

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Connecticut	STATUTE(S): Connecticut General Statutes §20-7a ENACTED BILL(S): Added: 1973 Amended: S.H.B. 7214 (1991), S.H.B. 5139 (1992), S.H.B. 6713 (2005) , S.H.B. 5820 (2006) , H.B. 6678 (2009) , H.B. 5292 (2010)	Added: 1973 Amended: 1991, 1992, 2005, 2006, 2009, 2010	“Any practitioner of the healing arts who agrees with a clinical laboratory, either private or hospital, to make payments to such a laboratory for [patients’] tests...”		“amounts charged by such laboratory for individual tests or test series and the amount of his procurement or processing charge”				“shall disclose on the bills to patients or third party payors”		
	STATUTE(S): Connecticut General Statutes §20-7b ENACTED BILL(S): Added: 1973 Amended: S.H.B. 7214 (1991), S.H.B. 5139 (1992), S.H.B. 6713 (2005) , S.H.B. 5820 (2006) , H.B. 6678 (2009) , H.B. 5292 (2010)	Added: 1973 Amended: 1991, 1992, 2005, 2006, 2009, 2010	“Each practitioner of the healing arts”		“approximate range of costs”		“test[s] to aid in the diagnosis”		“inform the patient”		
	STATUTE(S): Connecticut General Statutes §19a-613 ENACTED BILL(S): Added: H.B. 6002 (1994) ; Amended: H.B. 6002 (1994), S.B. 1164 (1995), S.B. 572 (1998), S.B. 547 (1998) , S.B. 1373 (1999) , H.B. 6802 (2009)	Added: 1994 Amended: 1994, 1995, 1998, 1999, 2009	“health care facilities or institutions”		“Patient-level outpatient data”		“outpatient data”	Collected by “The Office of Health Care Access”			

STATE LAWS ON HEALTH CARE PRICE TRANSPARENCY AND DISCLOSURE											
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Connecticut	STATUTE(S): Connecticut General Statutes §19a-646 ENACTED BILL(S): Added: 1984; Amended: H.B. 6002 (1994), S.B. 1164 (1995), S.H.B. 5154 (2002) , H.B. 5321 (2012)	Added: 1984 Amended: 1994, 1995, 2012	"the hospital"		"charges"	"payments for each payer"		"reported as required by the office"		Unlegislated report	
	STATUTE(S): Connecticut General Statutes §19a-649 ENACTED BILL(S): Added: 1958, S.H.B. 7290 (1989); Amended: S.H.B. 7214 (1991), S.H.B. 6949 (1993), S.H.B. 7079 (1993), H.B. 6678 (2009) , H.B. 5321 (2012)	Added: 1958, 1989 Amended: 1991, 1993, 1993, 2009, 2012	"Each hospital"		"the total and average charges and costs"		"of charity care and reduced cost services provided"	"report [to the office]"		Unlegislated report	
	STATUTE(S): Connecticut General Statutes §§19a-644, 19a-654 ENACTED BILL(S): Added: 1958, S.H.B. 7290 (1989); Amended: S.H.B. 7214 (1991), S.H.B. 6949 (1993), S.H.B. 7079 (1993), H.B. 6678 (2009) , H.B. 5321 (2012)	Added: 1958, 1989 Amended: 1991, 1993, 2009, 2012	"short-term acute care general or children's hospitals"		"discharge data [...] from medical record abstracts and hospital bills"			"submit [to the] office"		Unlegislated report	

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Connecticut	STATUTE(S): Connecticut General Statutes §19a-681 ENACTED BILL(S): Added: H.B. 7030 (1995) ; Amended: S.B. 1145 (2005) , S.B. 622 (2008) , S.B. 494 (2010)	Added: 1995 Last Amended: 2005, 2008, 2010	"Each hospital"		"current price-master which shall include each charge in its detailed schedule of charges"			"shall file with the office"			
Delaware	STATUTE(S): Delaware Code §2003 ENACTED BILL(S): Added: 1989; Amended: H.B. 507 (1994) , S.B. 47 (2009)	Added: 1989 Amended: 1994, 2009	"Hospitals and nursing homes"	"Charge levels [and] trends in health care charges"				"submitted by all [...] to the state agency"		"state agency shall prepare and distribute or make available reports to health care purchasers, health care insurers, health care providers and the general public"	
	STATUTE(S): Delaware Code Ann. §§2004, 2006 ENACTED BILL(S): Added: 1989; Amended: H.B. 507 (1994) , S.B. 235 (2008)	Added: 1989 Amended: 1994, 2009	"all hospitals [and] all nursing home"				"all hospital [and] nursing home inpatient discharges"	"submitted by all [...] to the state agency"		"All compilations prepared and authorized by the state agency for release and dissemination shall be public records"	

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Florida	STATUTE(S): Florida Statutes §381.026 ENACTED BILL(S): Added: S.B. 292 (1991), H.B. 367–H (1992), S.B. 598 (1995); Amended: C.S.H.B. 475 (2001), S.B. 1324 (2001), H.B. 1629 (2004), H.B. 7073 (2006) , S.B. 1488 (2008) , H.B. 155 (2011) , H.B. 935 (2011) , H.B. 7007 (2012)	Added; 1991, 1992, 1995 Amended: 1998, 1999, 2001, 2004, 2006, 2008, 2009, 2011, 2012	“primary care provider”		“schedule of charges [...] the schedule must include the prices charged to an uninsured person”		“must include, but is not limited to, the 50 services most frequently provided”		“posted in a conspicuous place in the reception area”		
	STATUTE(S): Florida Statutes §381.026 ENACTED BILL(S): Added: S.B. 292 (1991), H.B. 367–H (1992), S.B. 598 (1995); Amended: C.S.H.B. 475 (2001), S.B. 1324 (2001), H.B. 1629 (2004), H.B. 7073 (2006) , S.B. 1488 (2008) , H.B. 155 (2011) , H.B. 935 (2011) , H.B. 7007 (2012)	Added; 1991, 1992, 1995 Amended: 1998, 1999, 2001, 2004, 2006, 2008, 2009, 2011, 2012	“health care provider or a health care facility shall”		“a reasonable estimate of charges				“furnish a person [...] before the provision of a planned nonemergency medical service”		

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Florida	STATUTE(S): Florida Statutes §395.301 ENACTED BILL(S): Added: H.B. 367–H (1992), S.B. 598 (1995) Amended: S.B. 2128 (1998), H.B. 1629 (2004), H.B. 7073 (2006) , S.B. 1488 (2008)	Added: 1982, 1991, 1992, 1995 Amended: 1998, 2004, 2006, 2008	“Each licensed facility not operated by the state”		“good faith estimate of reasonably anticipated charges [...] The estimate may be the average charges for that diagnosis related group or the average charges for that procedure”		“any non-emergency medical services”		“upon request from the patient”		
	STATUTE(S): Florida Statutes §395.107 ENACTED BILL(S): Added: H.B. 935 (2011) ; Amended: H.B. 787 (2012)	Added: 2011 Amended: 2012	“urgent care center [and] affiliated facility”		“schedule of charges”		“no fewer than 150 of the most commonly performed adult and pediatric procedures, including outpatient, inpatient, diagnostic, and preventative procedures”		“publish [and] posted in a conspicuous place in the reception area”		
	STATUTE(S): Florida Statutes §408.05 ENACTED BILL(S): Added: H.B.1673 (1988); Amended: C.S.S.B. 314 (1998), H.B. 1053 (1999), S.B. 1766 (2000), S.B. 2568 (2003), H.B. 1629 (2004) , H.B. 763 (2005) , H.B. 7073 (2006) , S.B. 1488 (2008) , S.B. 1784 (2010)	Added: 1988, 1990, 1991, 1992, 1995, 1997 Amended: 1998, 1999, 2000, 2003, 2004, 2005, 2006, 2007, 2008, 2010	“health care facilities”		“undiscounted charges”		“no fewer than 150 of the most commonly performed adult and pediatric procedures”				“Publish on its website”

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Florida	STATUTE(S): Florida Statutes §408.061 ENACTED BILL(S): Added: S.B. 2390 (1992); Amended: S.B. 1914, 2006, 1784 & S.B. 406 (1993), S.B. 226 (1995), S.B. 226 (1996), S.B. 430 (1997), S.B. 314 (1998), H.B. 1053 (1999), S.B. 1766 (2000), S.B. 2568 (2003), H.B. 1629 (2004) , H.B. 763 (2005) , H.B. 7073 (2006)	Added: 1992 Amended: 2006 1993, 1996, 1997, 1998, 1999, 2000, 2003, 2004, 2005, 2006	"health care facilities"		"actual charge data by diagnostic groups"			"[to the] agency"			
	STATUTE(S): Florida Statutes §408.061 ENACTED BILL(S): Added: S.B. 2390 (1992); Amended: H.B. 7073 (2006)	Added: 1992 Amended: 2006	"health insurers"		"claims [...] However [...] shall not include specific provider contract reimbursement information"			"[to the] agency"			
Georgia	STATUTE(S): Georgia Code §31-7-280 ENACTED BILL(S): Added: 1988; Amended: S.B. 433 (2008)	Added: 1988 Amended: 2008	"each health care provider"		"total charges and summary of charges by revenue code"			"submitted to the department"			

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Illinois	STATUTE(S): 20 Illinois Compiled Statutes §2215/4-2 (4) ENACTED BILL(S): Added: 1984; Amended: H.B. 2343 (2005) , H.B. 1562 (2011) , S.B. 1282 (2011) , S.B. 3798 (2012)	Added: 1984 Amended: 2012	"hospitals"		"claims and encounter data"		"inpatient and outpatient claims and encounter data related to surgical and invasive procedures"	"compiled by the department"		"Publicly disclosed information must be provided in language that is easy to understand and accessible to consumers using an interactive query system"	
	STATUTE(S): Illinois Compiled Statutes §2215/4-2 (5) ENACTED BILL(S): Added: 1984; Amended: H.B. 2343 (2005) ; H.B. 1562 (2011) ; S.B. 1282 (2011) ; S.B. 3798 (2012)	Added: 1984 Amended: 2012	"each ambulatory surgical treatment center"		"outpatient claims and encounter data collected [...] for each patient"			"collect[ed] compile[d] by the department"		"Publicly disclosed information must be provided in language that is easy to understand and accessible to consumers using an interactive query system"	
	STATUTE(S): Illinois Compiled Statutes §2215/4-2 (6) ENACTED BILL(S): Added: 1984; Amended: H.B. 2343 (2005) , H.B. 1562 (2011) , S.B. 1282 (2011) , S.B. 3798 (2012)	Added: 1984 Amended: 2002, 2011, 2012	"Ambulatory surgical treatment centers and hospitals"		"average charges"		"at least 30 inpatient [and] 30 outpatient conditions and procedures [...] demonstrate[ing] the highest degree of variation in patient charges and quality of care"	"compiled by the department"			"shall make available on its website the 'Consumer Guide to Care'"

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Illinois	STATUTE(S): Illinois Compiled Statutes §2215/4-4(a) ENACTED BILL(S): Added: 1984; Amended: H.B. 4580 (2002)	Added: 1984 Amended: 2002	"Hospitals"		"the normal charge incurred"		"any procedure or operation the prospective patient is considering"		"to prospective patients"		
	STATUTE(S): Illinois Compiled Statutes §2215/4-4(b) ENACTED BILL(S): Added: 1984; Amended: H.B. 4580 (2002)	Added: 1984 Amended: 2002	"hospitals"		"the established charges"		"including but not limited to the hospital's private room charge, semi-private room charge, charge for a room with 3 or more beds, intensive care room charges, emergency room charge, operating room charge, electrocardiogram charge, anesthesia charge, chest x-ray charge, blood sugar charge, blood chemistry charge, tissue exam charge, blood typing charge and Rh factor charge"		"to post in letters"		

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Indiana	STATUTE(S): Indiana Code §16-21-6 ENACTED BILL(S): Added: S.E.A. 24 (1993); Amended: H.E.A. 1200 (2002) , S.E.A. 366 (2011)	Added: 1993 Amended: 2002, 2011	"each hospital"		"Total charge for patient's stay"			"file with the state department"	"shall provide copies of the reports [...] to the public upon request"	"Annually publish a consumer guide to Indiana hospitals"	
Iowa	STATUTE(S): Iowa Code §135.165; §135.166 ENACTED BILL(S): Added: H.B. 2539 (2008) ; Amended: S.F. 389 (2009)	Added: 2008 Amended: 2009	"hospitals"		"quality and cost measures"		"inpatient, outpatient, and ambulatory information"	"department of public health shall [...] utilize the Iowa hospital association to act as the department's intermediary in collecting, maintaining, and disseminating"			"shall be [...] published on a public internet site available to the general public" (originally the task of a work force now completed and deleted from statute)
Kansas	STATUTE(S): Kansas Statutes §65-6801; §65-6805 ENACTED BILL(S): Added: S.B. 118 (1993) ; Amended: S.B. 577 (1994), S.B. 272 (2005) , S.B. 397 (2012)	Effective 1993 Amended 1994, 2005, 2012	"all providers of health care services and third-party payors"		"costs"			"shall file [...] with the department of health and environment"	"made available in a form [...] to improve the decision-making processes"		

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Kentucky	STATUTE(S): Kentucky Revised Statute §216.2929 ENACTED BILL(S): Added: H.B. 250 (1994); Amended: S.B. 343 (1996), H.B. 132 (1998), S.B. 47 (2005) , H.B. 44 (2008) , H.B. 265 (2012)	Added: 1994 Amended: 1996, 1998, 2005, 2008, 2012	“every hospital and ambulatory facility, differentiated by payor if relevant, and for other provider groups”		“charges [...]include the median charge”			“compiled and reported by the cabinet”		“reported by the cabinet”	“make available on its Web site [...] sufficient explanation to allow consumers to draw meaningful comparisons” AND “provide linkages to organizations that publicly report comparative-charge data for Kentucky providers”
	STATUTE(S): Kentucky Revised Statutes §216.2923 , §216.2929 ENACTED BILL(S): Added: H.B. 250 (1994); Amended: S.B. 343 (1996), H.B. 132 (1998), S.B. 47 (2005) , H.B. 44 (2008) , H.B. 265 (2012)	Added: 1994 Amended: 1996, 1998, 2005, 2008, 2012			“information that relates to the health-care financing and delivery system, information on charges for health-care services”			“the secretary shall [...] collect”			

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Description	Relevant statute(s) with a hyperlink to the text and all relevant enacted bills with available hyperlinks	If available, date of enactment	May legislate hospitals, surgical centers, or all providers including individual physicians	May legislate health plans, insurers, or carriers to report to the state	Includes average annual charges, charge estimates, actual charges	Demonstrates accepted reimbursement rates from different payers	May legislate only most common procedures, only outpatient services, or all billable services	Price information is reported to the state	Price information is available to an individual upon request	Price information is available in a publicly available report	Price information is available on a website
Louisiana	STATUTE(S): Louisiana Revised Statutes §§40:1300.111, 112, 113, 114 ENACTED BILL(S): Added: H.B. 1462 (1997) ; Amended: S.B. 287 (2008)	Added: 1997 Amended: 2008	"All health care providers licensed by the state, including but not limited to hospitals, outpatient surgical facilities, and outpatient clinical facilities"		"health care cost, quality, and performance data"			"reported to the Department of Health and Hospitals"			"Internet publication of provider and health plan specific cost, quality, and performance data [...] for access and use by a consumer" AND Unlegislated Louisiana Hospital Inpatient Discharge Database (LAHIDD)
Maine	STATUTE(S): Maine Revised Statutes §§ 8704, 6 ENACTED BILL(S): Added: H.P. 1307 (1996) ; Amended: S.P. 560 (1997) , S.P. 18 (1999) , H.P. 1003 (1999) , S.P. 395 (2001) , H.P. 1187 (2003) , H.P. 942 (2005) , S.P. 677 (2006) , S.P. 290 (2007) , H.P. 5 (2007) , S.P. 578 (2012)	Added: 1996 Amended: 1997, 1999, 2001, 2003, 2005, 2006, 2007, 2012	"health care facilities, providers or payors"		"clinical, financial, quality and restructuring data"	"clinical, financial, quality and restructuring data"		"board shall develop and implement policies and procedures for the collection, processing, storage and analysis"			

STATE LAWS ON HEALTH CARE PRICE TRANSPARENCY AND DISCLOSURE											
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Maine	STATUTE(S): Maine Revised Statutes §8712 ENACTED BILL(S): Added: H.P. 1187 (2003) ; Amended: H.P. 975 (2005) , H.P. 85 (2009) , S.P. 529 (2009) , H.P. 1088 (2010) , H.P. 602 (2012)	Added: 2003 Amended: 2005, 2009, 2009, 2010, 2012	"health care facilities and practitioners"			"payments for services rendered"	"services presented must include, but not be limited to, imaging, preventative health, radiology and surgical services and other services that are predominantly elective and may be provided to a large number of patients who do not have health insurance"	"State shall collect, synthesize and publish information"	"shall make reports available to members of the public upon request"		"create a publicly accessible interactive website "
	STATUTE(S): Maine Revised Statutes §8712 ENACTED BILL(S): Added: H.P. 1187 (2003) ; Amended: H.P. 975 (2005) , H.P. 85 (2009) , S.P. 529 (2009) , H.P. 1088 (2010) , H.P. 602 (2012)	Added: 2003 Amended: 2005, 2009, 2009, 2010, 2012		"commercial health insurance companies, 3rd-party administrators and, unless prohibited by federal law, governmental payors"		"prices paid by individual commercial health insurance companies, 3rd-party administrators and, unless prohibited by federal law, governmental payors"	"15 most common diagnosis-related groups and the 15 most common outpatient procedures for all hospitals in the State and the 15 most common procedures for nonhospital health care facilities"	"State shall collect, synthesize and publish information"	"shall make reports available to members of the public upon request"		"create a publicly accessible interactive website "

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Maryland	STATUTE(S): Maryland Code, Health – General §19-133 ENACTED BILL(S): Added: 1993; Amended: S.B. 221 (1999) , H.B. 995 (1999) , S.B. 189 (2000) , S.B. 196 (2001) , S.B. 786 (2001) , H.B. 800 (2007)	Added: 1993 Amended: 1994, 1995, 1997, 1999, 2000, 2001, 2007	“health care practitioner or facility”	“payors and governmental agencies”	“the charge for the procedure,” [...]“health care costs, utilization, or resources”			“the Commission shall [collect]”		“shall publish an annual report [...] Describ[ing] the variation in fees charged by health care practitioners and facilities”	
	STATUTE(S): Maryland Code, Health – General §§ 19-202, 7 ENACTED BILL(S): Added: 1982; Amended: 1984, 1997, 1999, S.B. 479 (2003) , S.B. 380 (2006) , H.B. 844 (2007)	Added: 1982 Amended: 1984, 1997, 1999, 2003, 2006, 2007			“Health care costs”			Creates the “Health Services Cost Review Commission [that] shall Periodically participate in or do analyses and studies of”		“Each report filed and each summary, compilation, and report required under this subtitle available for public inspection”	

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Massachusetts	STATUTE(S): Massachusetts General Laws 12C §8 (a) ENACTED BILL(S): Added: S.B. 2400 (2012)	Added: 2012	"institutional providers and their parent organizations and any other affiliated entities, non-institutional providers and provider organizations"		"revenues, charges, costs, prices, and utilization [...]filing of a charge book, the filing of cost data and audited financial statements and the submission of merged billing and discharge data"		"medical, surgical, diagnostic and ancillary services"	"The center shall also collect and analyze"			
	STATUTE(S): Massachusetts General Laws 12C §8 (b) ENACTED BILL(S): Added: S.B. 2400 (2012)	Added: 2012	"any acute or non-acute hospital"		"a charge book, the filing of cost data and audited financial statements and the submission of merged billing and discharge data"					"at least annually, publish a report analyzing the comparative information to assist third-party payers and other purchasers of health services in making informed decisions"	"shall publicly report and place on its website [...] relative prices and hospital inpatient and outpatient costs, including direct and indirect costs"
	STATUTE(S): Massachusetts General Laws 12C §8 (d) ENACTED BILL(S): Added: S.B. 2400 (2012)	Added: 2012			"relative prices"		"inpatient and outpatient"				"shall publicly report and place on its website "

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Massachusetts	STATUTE(S): Massachusetts General Laws 12C §10 ENACTED BILL(S): Added: S.B. 2400 (2012)	Added: 2012		“from private and public health care payers, including third-party administrators”	“relative prices for the payer’s participating health care providers by provider type which shows the average relative price, the extent of variation in price, stated as a percentage, and identifies providers who are paid more than 10 per cent, 15 per cent and 20 per cent above and more than 10 per cent, 15 per cent and 20 per cent below the average relative price”	“submit claims data [...] and relative prices paid to every hospital, registered provider organization, physician group, ambulatory surgical center, freestanding imaging center, mental health facility, rehabilitation facility, skilled nursing facility and home health provider in the payer’s network, by type of provider, with hospital inpatient and outpatient prices listed separately by [insurance] product type”		“The center shall require the submission of data and other information”		“Except as specifically provided otherwise by the center or under this chapter, insurer data collected by the center under this section shall not be a public record”	
	STATUTE(S): Massachusetts General Laws 12C §16 ENACTED BILL(S): Added: S.B. 2400 (2012)	Added: 2012	“health care provider, provider organization”	“private and public health care payer”	“costs and cost trends [...] price [and] price variation between health care providers, by payer and provider type”	“costs and cost trends [...] and price variation between health care providers, by payer and provider type”		“The center collects”		“The center shall publish an annual report ”	

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Massachusetts	STATUTE(S): Massachusetts General Laws 6A C §16K ENACTED BILL(S): Added: H.B. 4479 (2006) Amended: H.B. 5240 (2006), S.B. 2863 (2008), S.B. 2585 (2010) , S.B. 2400 (2012)	Added: 2006 Amended: 2006, 2008, 2010, 2012		“health care quality and cost data”		“Cost information shall include, at a minimum, the average payment [...] on behalf of insured patients”	“for obstetrical services, physician office visits, high-volume elective surgical procedures, high-volume diagnostic tests and high-volume therapeutic procedures”	“shall be collected”			“shall establish and maintain a consumer health information website [...] comparing the cost and quality of health care services [...] by facility and, as applicable, by clinician or physician group practice”
	STATUTE(S): Massachusetts General Laws 111C § 228 ENACTED BILL(S): Added: S.B. 2400 (2012)	Added: 2012	“a health care provider”		“disclose the [...] charge”	“disclose the [...] the contractually agreed upon amount paid by a carrier to a health care provider for health care services provided to an insured” AND “out-of-pocket costs”	“of the admission, procedure or service, including the amount for any facility fees required”		“upon request by a patient or prospective patient”		

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Minnesota	STATUTE(S): Minnesota Statutes §62J.82 ENACTED BILL(S): Added: H.F. 139 (2005) Amended: H.F. 1078 (2007)	Added: 2005 Amended: 2007	"hospital"		"Charge information, [including] average charge, average charge per day and median charge"		"for each of the 50 most common inpatient diagnosis-related groups and the 25 most common outpatient surgical procedures"				"The Minnesota Hospital Association shall develop a Web-based system"
	STATUTE(S): Minnesota Statutes §62J.052 ENACTED BILL(S): Added: S.F. 1204 (2005) Amended: S.F. 3480 (2006)	Added: 2005 Amended: 2006	"Each pharmacy"		"usual and customary price for a prescription drug"				"readily available at no cost to the patient"		
	STATUTE(S): Minnesota Statutes §62U.04 (Subd. 1) ENACTED BILL(S): Added: S.F. 3780 (2008) Amended: S.F. 2082 (2009) , H.F. 3056 (2010) , H.F. 25 (2011) , S.F. 1809 (2012)	Added: 2008 Amended: 2009, 2010, 2011, 201	"providers"		"comparative information to consumers on variation"						
	STATUTE(S): Minnesota Statutes §62U.04 (Subd. 3c) ENACTED BILL(S): Added: S.F. 3780 (2008) Amended: S.F. 2082 (2009) , H.F. 3056 (2010) , H.F. 25 (2011) , S.F. 1809 (2012)	Added: 2008 Amended: 2009, 2010, 2011, 2012	"providers"		"total cost" AND "condition-specific cost"					"public report"	

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Minnesota	STATUTE(S): Minnesota Statutes §62U.04 (Subd. 5) ENACTED BILL(S): Added: S.F. 3780 (2008) Amended: S.F. 2082 (2009) , H.F. 3056 (2010) , H.F. 25 (2011) , S.F. 1809 (2012)	Added: 2008 Amended: 2009, 2010, 2011, 2012		“all health plan companies and third-party administrators”		“submit data on their contracted prices with health care providers”		“to a private entity designated by the commissioner of health”			
	STATUTE(S): Minnesota Statutes §62J.82 ENACTED BILL(S): Added: H.F. 139 (2005) Amended: H.F. 1078 (2007)	Added: 2005 Amended: 2007	“hospital”		“Charge information, [including] average charge, average charge per day and median charge”		“for each of the 50 most common inpatient diagnosis-related groups and the 25 most common outpatient surgical procedures”				“The Minnesota Hospital Association shall develop a Web-based system”
	STATUTE(S): Minnesota Statutes §144.698 ENACTED BILL(S): Added: S.F. 60 (1976) Amended: S.F. 109 (1977) , H.F. 1966 (1984) , H.F. 1759 (1989) , S.F. 910 (1991) , S.F. 2080 (2004) , H.F. 1078 (2007)	Added: 1976 Amended: 1977, 1984, 1989, 1991, 2004, 2007	“Each hospital and each outpatient surgical center”		“cost information”			“shall file annually with the commissioner of health”		“All reports [...] shall be open to public inspection”	
	STATUTE(S): Minnesota Statutes § 144.699 ENACTED BILL(S): Added: S.F. 60 (1976) Amended: S.F. 109 (1977) , H.F. 1966 (1984) , S.F. 51 (1987) , H.F. 1078 (2007)	Added: 1976 Amended: 1977, 1984, 1987, 2007	“hospitals, outpatient surgical centers, home care providers, and professionals”				“for procedures and services that are representative of the diagnoses and conditions for which citizens of this state seek treatment”			“The Commissioner of Health shall “disseminate available price information” AND “encourage [providers] to publish prices”	

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Minnesota	STATUTE(S): Minnesota Statutes § 144.701 ENACTED BILL(S): Added: S.F. 60 (1976) Amended: S.F. 109 (1977) , H.F. 2175 (1982) , H.F. 1966 (1984) , H.F. 1759 (1989) , S.F. 3346 (1998) , H.F. 2446 (2004) , S.F. 2082 (2009)	Added: 1976 Amended: 1977, 1982, 1984, 1989, 2998, 4004, 2009	"each hospital and outpatient surgical center"		"a current rate schedule"			"shall be filed with the commissioner of health"			
	STATUTE(S): Minnesota Statutes §144.0506 ENACTED BILL(S): S.F. 367 (2006)	Added: 2006	"health care provider"		"charges"		"for common procedures"				"agency Web sites, including minnesota-healthinfo.com "
Missouri	STATUTE(S): Missouri Revised Statutes §192.665 , §192.667 ENACTED BILL(S): Added: H.B. 1574 (1992) Amended: S.B. 721 (1992) , S.B. 796 (1992) , S.B. 1279 (2004)	Added: 1992 Amended: 1992, 2004	"All health care providers [includes hospitals and ambulatory surgical centers]"		"charge data"			"provide to the department"		"The report shall be made available to the public for a reasonable charge" AND "The Hospital Industry Data Institute shall publish a report" AND "publish information including at least an annual consumer guide"	

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Montana	UNLEGISLATED		“facility specific information”		“charges”		“inpatient and outpatient”				Unlegislated Montana PricePoint developed by Montana Hospital Association and An Association of Montana Health Care Providers
Nebraska	STATUTE(S): Nebraska Statutes §71-2075 ENACTED BILL(S): Added: 1985; Amended: L.B. 1210 (1994)	Added: 1985 Amended: 1994	“each hospital [...] and ambulatory surgical centers”		“average charges”				“Upon the written request of a prospective patient” AND “shall provide notice to the public that such hospital or center will provide an estimate of charges”		
Nevada	STATUTE(S): Nevada Revised Statutes §§ 439A.220, 439A.240, 439A.260, 439A.270 ENACTED BILL(S): Added: A.B. 146 (2007) ; Amended: S.B. 319 (2009) , A.B. 160 (2011) , S.B. 264 (2011) , S.B. 338 (2011) , S.B. 340 (2011)	Added: 2007 Amended: 2009, 2011	“each hospital” AND “each surgical center for ambulatory patients”		“average billed charges” AND “charges imposed”		“reported by diagnosis-related groups for inpatients and for the 50 medical treatments for outpatients” AND “for [...] potentially preventable readmissions”	“The Department shall establish and maintain a program that [...] must include the collection	“Upon request, make the information that is contained on the Internet website available in printed form”	“shall make a summary of the information available to Consumers of health care [and] the general public”	“shall establish and maintain an Internet website ”

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Nevada	STATUTE(S): Nevada Revised Statutes §449.490 ENACTED BILL(S): Added: 1975; Amended: 1985, 1987, A.B. 342 (2005), A.B. 146 (2007), A.B. 160 (2011)	Added: 1975 Amended: 1985, 1987, 2005, 2007, 2011	"each hospital"		"chargemaster"			"made available to the Department"	"information that may relate to individual citizens may be released"		
New Hampshire	STATUTE(S): New Hampshire Revised Statutes §§420-G:11, 420-G:11-a ENACTED BILL(S): Added: H.B. 670 (2003) Amended: S.B. 74 (2005)	Added: 2003 Amended: 2005		"All health carriers"	"encrypted claims data [and] Health Employer Data and Information Set (HEDIS) data"	"encrypted claims data [and] Health Employer Data and Information Set (HEDIS) data"		"to the department"			"develop a comprehensive health care information system" (NHCHIS) AND "shall be available as a resource for insurers, employers, providers, purchasers of health care, [...] to enhance the ability of New Hampshire consumers and employers to make informed and cost-effective health care choices"
	STATUTE(S): New Hampshire Revised Statutes §126:25 ENACTED BILL(S): Added: 1985 Amended: S.B. 197 (2009), H.B. 544 (2009), H.B. 629 (2011)	Effective: 1985 Amended: 2009, 2011	"Acute care hospitals, specialty hospitals, nursing homes"		"charge by discharge data [...] average patient day charge data"			"shall file health care data as required by the commissioner"			

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New Jersey	<p>STATUTE(S): New Jersey Statutes §26:2H-5, §26:2H-18.55</p> <p>ENACTED BILL(S): Added: 1971 and Assembly 2100 (1992); Amended: Assembly 2616 (1995), Assembly 1532 (1996), Senate 1181 (1998), Senate 539 (2006), Senate 1796 (2008)</p>	<p>Added: 1971, 1992</p> <p>Amended: 1995, 1996, 1998, 2008</p>	“hospital”	“costs” AND “charges for health care services”	“schedules of rates, payments, reimbursement”			“Reported to the department” AND “use of centralized data storage and transmission technology”		“ reports to provide assistance to consumers of health care in this State in making prudent health care choices”	Unlegislated website
New Mexico	<p>STATUTE(S): New Mexico Statutes §§ 24-14A-3, 24-14A-34, 24-14A-37</p> <p>ENACTED BILL(S): Added: 1989; Amended: S.B. 556 (1994), H.B. 1008 (2005), S.B. 786 (2005), H.B. 293 (2009), H.B. 18 (2012)</p>	<p>Added: 1989</p> <p>Amended: 1994, 2005, 2012</p>	“all data sources”		“collect health data sufficient for consumers to be able to evaluate health care services, plans, providers and payers and to make informed decisions regarding quality, cost and outcome of care across the spectrum of health care services, providers and payers”			“serve as a health information clearinghouse, including facilitating private and public collaborative, coordinated data collection”	“Any person may obtain any aggregate data”	“a report in printed format that provides information of use to the general public shall be produced annually”	
New York	<p>STATUTE(S): New York Public Health Law §2816</p> <p>ENACTED BILL(S): Added: A. 1644 (2001), Amended: A. 4122–C (2005), S. 2809-D (2011), S. 2812-C (2011)</p>	<p>Added: 2001</p> <p>Amended: 2005, 2011</p>	“hospitals [and] all ambulatory facilities” AND “emergency departments” AND “outpatient clinic[s]”		“patient and other data element”		“Top 50 diagnostic categories” AND “Top 50 surgical procedures”			“the publication and release of data reported” (SPARCS)	

STATE LAWS ON HEALTH CARE PRICE TRANSPARENCY AND DISCLOSURE											
STATE	LAWS	YEAR	SCOPE OF HEALTH CARE PROVIDERS		SCOPE OF PRICE		SCOPE OF SERVICES	LEVEL OF TRANSPARENCY			
			Scope of Health Care Providers	Insurers are required to report? (Not factored in grading)	Charge	Paid Amount	Scope of Services	Reported to the State	Available upon request	Available in Report	Available on Website
Description	Relevant statute(s) with a hyperlink to the text and all relevant enacted bills with available hyperlinks	If available, date of enactment	May legislate hospitals, surgical centers, or all providers including individual physicians	May legislate health plans, insurers, or carriers to report to the state	Includes average annual charges, charge estimates, actual charges	Demonstrates accepted reimbursement rates from different payers	May legislate only most common procedures, only outpatient services, or all billable services	Price information is reported to the state	Price information is available to an individual upon request	Price information is available in a publicly available report	Price information is available on a website
North Carolina	STATUTE(S): North Carolina General Statutes §131E-214.4 ENACTED BILL(S): Added: S.B. 345 (1995) ; Amended: S.B. 352 (1997)	Added: 1995 Amended: 1997			"charges"		"35 most frequently reported charges"	"The center shall require the submission of data and other information"	"makes medical care data available to interested persons, including medical care providers, third party payors, medical care consumers, and health care planners [...] compile reports from the patient data and make the reports available upon request to interested persons at a reasonable charge"		
North Dakota	STATUTE(S): North Dakota Century Code §§23-01.1-02.1 ENACTED BILL(S): Added: S.B. 2589 (1991)	Added: 1991	"each licensed physician practicing medicine"	"Insurers, nonprofit health service corporations, health maintenance organizations, and state agencies"	"average fees charged"			"health care data committee shall create a data collection"		"shall prepare a report which must [...] for consumers to use in comparing"	

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North Dakota	STATUTE(S): North Dakota Century Code §§23-01.1-02 ENACTED BILL(S): Added: S.B. 2589 (1991); Amended: H.B. 1058 (1995), H.B. 1065 (2003)	Added: 1991 Amended: 1995, 2003	“each nonfederal acute care hospital in this state”		“average aggregate charges by diagnosis [...] and the average charges by source of payment”		“twenty-five most common diagnoses”	“the health care data committee may collect, store, analyze, and provide”		“Prepare an annual report comparing the cost of hospitalization by diagnosis [...] Establish procedures that assure public availability of the information required to make informed health care purchasing decisions”	
Ohio	STATUTE(S): Ohio Revised Code §3727.42 ENACTED BILL(S): Added: H.B. 197 (2006) ; Amended: H.B. 487 (2012)	Added: 2006 Amended: 2012	“Every hospital”		“a price information list [...] including (1) The usual and customary room and board charges; (2) Rates charged for nursing care, if the hospital charges separately for nursing care [...] (3) The usual and customary charges, stated separately for inpatients and outpatients if different charges are imposed”		“Room and board [...] selected number of x-ray, laboratory, emergency room, operating room, delivery room, physical therapy, occupational therapy and respiratory therapy services”		“available for inspection by the public” AND “At the time of admission, or as soon as practical thereafter, inform each patient of the availability of the list and on request provide the patient with a free copy of the list” AND “On request, provide a paper copy of the list to any person”		“Make the list available free of charge on the hospital’s internet web site ” AND Hospital Association’s site

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Ohio	STATUTE(S): Ohio Revised Code §3727.34, §3727.39 ENACTED BILL(S): Added: H.B. 197 (2006)	Added: 2006	"each hospital"		"The mean, median, and range of total hospital charges"		"pertaining to inpatient services [...] of the sixty diagnosis related groups [...] most frequently treated" AND "pertaining to outpatient services [...] of the sixty categories [...] most frequently provided"	"submit to the director of health"	"On request, the hospital shall make copies available"		"available on an internet web site "
Oklahoma	STATUTE(S): Oklahoma Statutes §1-119; §1- 121 ENACTED BILL(S): Added: H.B. 2379 (1992) ; Amended: H.B. 1573 (1993) , H.B. 2570 (1994) , H.B. 2501 (1996) , H.B. 2868 (1998) , S.B. 1585 (2000)	Added: 1992 Amended 1993, 1994, 1996, 1998, 2000	"information providers"		"reimbursement, costs of operation, [...] rates, charges"			"To the Division of Health Care Information within the State Department of Health"			
Oregon	ENACTED BILL(S): Added: S.B. 329 (2007)	Added: 2007	"medical and dental providers"	"health plans"	AND "information about the cost"			"to the department"		"provides enrollees"	

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Oregon	STATUTE(S): Oregon Revised Statutes §442.405; §442.430; §442.460 ENACTED BILL(S): Added: 1985, Amended: S.B. 1079 (1995) , H.B. 2894 (1997) , H.B. 2146 (1999)	Added: 1985 Amended: 1995, 1997, 1999	“health care facilities”	“insurers or other third-party payers or employers or other purchasers of health care”	“costs of health care” AND “advance disclosure of the estimated out-of-pocket costs of a service or procedure”			“Requires the office to conduct or cause to have conducted such analyses and studies”		“file for public disclosure reports that will enable both private and public purchasers of services from such facilities to make informed decisions”	Unlegislated website
Pennsylvania	STATUTE(S): Pennsylvania Unconsolidated Statutes §449.6 ENACTED BILL(S): Added: 1986; Amended: S.B. 1052 (1993) , S.B. 387 (2003) , S.B. 89 (2009)	Added: 1986 Amended: 1993, 2003, 2009	“Hospitals, ambulatory services facilities, and physicians.”		“Total charges” AND “charges”	“actual payments to each physician or professional rendering service”	“including, but not limited to, room and board, radiology, laboratory, operating room, drugs, medical supplies and other goods and services” AND “of each physician or professional rendering service relating to an incident of hospitalization or treatment in an ambulatory service facility”	“the council shall be required to collect”		“Make available and provide comparisons ”	
	STATUTE(S): Pennsylvania Unconsolidated Statutes §449.7 ENACTED BILL(S): Added: 1986; Amended: S.B. 1052 (1993) , S.B. 387 (2003) , S.B. 89 (2009)	Added: 1986 Amended: 1993, 2003, 2009	“for every provider of both inpatient and outpatient services”		“cost”	“payment”				“prepare and issue reports ”	

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Rhode Island	STATUTE(S): Rhode Island General Laws §§23-17.17-10 ENACTED BILL(S): Added: 1956; Amended: S 2481B (2008) , H 7465A (2008)	Added: 1956 Amended: 2008	"health care providers, health care facilities"	"Insurers and governmental agencies"	"health care costs, prices"	"health insurance claims"	"health care facility services"	"The director shall establish and maintain a unified health care quality and value database"		"Provide information to consumers and purchasers of health care"	
South Carolina	STATUTE(S): South Carolina Code §44-6-170 ENACTED BILL(S): Added: 1985; Amended: 1989, S.B. 474 (1991), S.B. 507 (1993), H.B. 3546 (1993), S.B. 691 (1995)	Added: 1985 Amended: 1993, 1995	"All general acute care hospitals and specialized hospitals including, but not limited to, psychiatric hospitals, alcohol and substance abuse hospitals, and rehabilitation hospitals"	"or insurer"	"financial information" AND "charges"		"of inpatient and outpatient information"	"reported to the office"		"appropriate dissemination of health care-related data reports"	
South Dakota	STATUTE(S): South Dakota Codified Laws §34-12E-8 ENACTED BILL(S): Added: H.B. 1384 (1994)	Added: 1994	"health care provider or facility"		"All fees and charges"				"Upon request of patient"		
	STATUTE(S): South Dakota Codified Laws §§34-12E-11, 11.1 ENACTED BILL(S): Added: S.B. 169 (2005) , SB 182 (2008)	Added: 2005, 2008	"Any hospital"		"the charge information"		"All Patient Refined Diagnosis-Related Groups for which that hospital had at least ten cases"	"shall report annually to the South Dakota Association of Health Care Organizations"			"develop a web-based system , available to the public at no cost, for reporting the charge information of hospitals"

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Tennessee	STATUTE(S): Tennessee Code §68-1-108, §68-1-119 ENACTED BILL(S): Added: 1985, S.B. 2407 (2002); Amended: S.B. 63 (1994), H.B. 3449 (2004), H.B. 2827 (2006), H.B. 596 (2011) , S.B. 3011 (2012) , S.B. 2416 (2012)	Added: 1985, 2002 Amended: 1994, 2004, 2006, 2011, 2012	“Each licensed hospital” AND “Each licensed ambulatory surgical treatment center (ASTC) and each licensed outpatient diagnostic center (ODC)”		“all claims data”		“on every inpatient and outpatient discharge”	“to the commissioner of health [who] shall promptly make the data available for review and copying by the Tennessee hospital association (THA)”		“shall prescribe conditions under which the processed and verified data are available to the public”	
Texas	STATUTE(S): Vernon’s Texas Statute and Codes Texas Health & Safety Code §§108.006, 9, 11, 12 ENACTED BILL(S): Added: H.B. 1048 (1995); Amended: S.B. 802 (1997), H.B. 1513 (1999), S.B. 872 (2005)	Added: 1994 Amended: 1997, 1999, 2005	“hospitals, ambulatory surgical centers, and free-standing radiology centers”		“collect health care charges”		“prioritize data collection efforts on inpatient and outpatient surgical and radiological procedures”	“The council shall develop a statewide health care data collection system to”	“provide public use data and data collected [...] to those requesting it”	“make reports to the legislature, the governor, and the public on the charges and rate of change in the charges for health care services”	“shall provide a means for computer-to-computer access ” AND Unlegislated Texas Pricepoint
	STATUTE(S): Vernon’s Texas Statute and Codes Health & Safety Code § 324.051 AND Occupations Code § 154.002 ENACTED BILL(S): Added: S.B. 1731 (2007) Amended: H.B. 2256 (2009)	Added: 2007 Amended: 2009	“the facility” AND “physician”		“information in the guide concerning facility pricing practices and the correlation between a facility’s average charge” AND “the actual, billed charge”		“an inpatient admission or outpatient surgical procedure”	“to submit to the Department”		“shall make available on the department’s Internet website a consumer guide to health care”	

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Texas	<p>STATUTE(S): Vernon's Texas Statute and Codes Health & Safety Code §324.101 AND Occupations Code §101.352</p> <p>ENACTED BILL(S): Added: S.B. 1731 (2007); Amended: H.B. 2256 (2009)</p>	Added: 2007 Amended: 2009	"Facility" and "physician"		"an estimate of the facility's [or physician's] charges"		"for any elective inpatient admission or nonemergency outpatient surgical procedure or other service"		"on request and before the scheduling of the admission or procedure or service"		
Utah	<p>STATUTE(S): Utah Health Code §§26-33a-104, 106.1, 106.5</p> <p>ENACTED BILL(S): Added: S.B. 235 (1990), S.B. 171 (1996), H.B. 9 (2007); Amended: S.B. 171 (1996), H.B. 208 (2001), S.B. 132 (2005), H.B. 9 (2007), H.B. 63 (2008), H.B. 294 (2010), H.B. 213 (2011), H.B. 144 (2012)</p>	Added: 1990, 1996, 2007 Amended: 1996, 2001, 2005, 2007, 2008, 2010, 2011, 2012	"health care providers"		"measurements of cost" AND "rate and price increases"			"purpose of the committee is to direct a statewide effort to collect, analyze, and distribute health care data"		"assist the Legislature and the public with awareness of, and the promotion of, transparency in the health care market by reporting "	
	<p>STATUTE(S): Utah Health Code §§26-3-2, 4</p> <p>ENACTED BILL(S): Added: 1981</p>	Added: 1981			"health care costs and financing"			the department may [...] collect and maintain health data		"publish, make available, and disseminate such statistics on as wide a basis as practicable"	

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Utah	STATUTE(S): Utah Health Code §26-21-27 ENACTED BILL(S): H.B. 294 (2010)	Added: 2010	"a health care facility"		"a list of prices charged"		"in-patient procedures; (b) out-patient procedures; (c) the 50 most commonly prescribed drugs in the facility; (d) imaging services; and (e) implants"	submitted to "the department"			"available for the consumer" Utah Pricepoint
Vermont	STATUTE(S): Vermont Statutes 18 §9405b ENACTED BILL(S): Added: H. 128 (2003) Amended: H. 516 (2005), H. 227 (2006), H. 881 (2006), H. 380 (2007) , H. 202 (2011)	Added: 2003 Amended: 2005, 2006, 2007, 2011	"hospitals and other groups of health care professionals"		"measures that provide valid, reliable, useful, and efficient information for payers and the public for the comparison of charges"		"for higher volume health care services"	"The commissioner[...] shall [establish] a standard format for community reports"		"The commissioner shall publish the reports on a public website and shall develop and include a format for comparisons of hospitals within the same categories of quality and financial indicators"	
	STATUTE(S): Vermont Statutes 18 §9410 ENACTED BILL(S): Added: H.B. 733 (1992), Amended: S. 345 (1996), H. 516 (2005), H. 678 (2006), H. 861 (2006) , H. 229 (2007) , S. 115 (2007) , S. 42 (2009) , H. 444 (2009) , H. 202 (2011)	Added: 1992 Amended: 1996, 2005, 2006, 2007, 2009, 2010, 2011	"health care providers, health care facilities"	"All health insurers"	"any other information relating to health care costs, prices"	"health insurance claim"		"required to be filed by the commissioner"			"a consumer health care price and quality information system designed to make available to consumers transparent health care price information"

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Virginia	STATUTE(S): Virginia Code §32.1-276.5:1 ENACTED BILL(S): Added: H.B. 603 (2008) Amended: S.B. 396 (2008)	Added: 2008 Amended: 2008	“for all providers and provider types, to include hospitals, outpatient or ambulatory surgery centers and physician offices”	“carriers offering private group health insurance policies”		“the average reimbursement paid for a specific service” AND “the same services provided for reimbursement by fee-for-service Medicare and Medicaid”	“a minimum of 25 most frequently reported health care services which may include inpatient and outpatient diagnostic services, surgical services or the treatment of certain conditions or diseases”	“managed by the Commissioner”			

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Virginia	<p>STATUTE(S): Virginia Code §32.1-276.4, 32.1-276.5:1, 32.1-276.6</p> <p>ENACTED BILL(S): Added: H.B. 1307 (1996), H.B. 603 (2008); Amended: S.B. 396 (2008), H.B. 710 (2010), H.B. 343 (2012), S.B. 135 (2012)</p>	<p>Added: 1996, 2008</p> <p>Amended: 2008, 2010, 2012</p>	“for all providers and provider types, to include hospitals, outpatient or ambulatory surgery centers and physician offices”	“carriers offering private group health insurance policies”	“price information” AND “total charges”	“the aggregate information so that readers will be able to determine the average amount of reimbursement paid”		“The Commissioner shall negotiate and enter into contracts or agreements with a nonprofit organization for the compilation, storage, analysis, and evaluation of data submitted by health care providers pursuant to this chapter; for the operation of the All-Payer Claims Database”		“public survey reports”	“shall be made available to the public through an Internet Website operated by the contracting organization” AND “shall take steps to increase public awareness of the data and information available through the nonprofit organization’s website and how consumers can use the data and information when making decisions about health care providers and services”

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Washington	STATUTE(S): Revised Code of Washington §70.41.250 ENACTED BILL(S): Added: S.S.S.B. 5304 (1993)	Added: 1993	"the hospital"		"charges"		"all health care services ordered"		"made available to any physician and/or other health care provider ordering care in hospital inpatient/outpatient services. The physician and/or other health care provider may inform the patient of these charges and may specifically review them"		Unlegislated Washington Hospital
West Virginia	STATUTE(S): West Virginia Codes §§16-29B-1, §16-29B-18, §16-29B-21, §16-29B-25 ENACTED BILL(S): Added: 1983; Amended: H.B. 2194 (1991), S.B. 458 (1997)	Added: 1983 Amended: 1991, 1997	"health care providers"		"health care costs"			"an entity of state government must be given authority [...] to gather and disseminate health care information"		"to analyze and report on changes in the health care delivery system" AND "publish and disseminate any information which would be useful to members of the general public in making informed choices about health care providers"	

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West Virginia	STATUTE(S): West Virginia Codes §16-5F-2 ENACTED BILL(S): Added: 1979; Amended: H.B. 2194 (1991)	Added: 1979 Amended: 1991, 1996	"Every covered facility and related organization"		"A complete schedule of such covered facility's or related organization's then current rates" AND "A statement of all charges"			"file with the board"	"Copies of such reports shall be made available to the public upon request"		
Wisconsin	STATUTE(S): Wisconsin Statutes §153.05 (1)(a) ENACTED BILL(S): Added: AB 907 §11-31 (2005)	Added: 2005	"health care providers other than hospitals and ambulatory surgery centers"		"health care information"					"disseminate [...] in language that is understandable to laypersons."	
	STATUTE(S): Wisconsin Statutes §153.05 (1)(c) ENACTED BILL(S): Added: AB 907 §11-31 (2005)	Added: 2005		"insurers" and administrators"	"health care claims information with respect to the cost, quality, and effectiveness"			"the data organization under contract"			"shall analyze and publicly report [...] in language that is understandable by lay persons"
	STATUTE(S): Wisconsin Statutes §153.05 (2m)(a) & (8)(b) ENACTED BILL(S): Added: AB 907 §11-31 (2005)	Added: 2005	"hospitals and ambulatory surgery centers"		"claims information and other health care information"			"a [contracted] entity"			
	STATUTE(S): Wisconsin Statutes §153.05 (8)(a) ENACTED BILL(S): Added: AB 907 §11-31 (2005)	Added: 2005	"from health care providers, other than hospitals and ambulatory surgery centers"		"claims information and other health care information"			"the department shall collect"		"disseminate, in language that is understandable to laypersons"	

STATE LAWS ON HEALTH CARE PRICE TRANSPARENCY AND DISCLOSURE											
STATE	LAWS	YEAR	SCOPE OF HEALTH CARE PROVIDERS		SCOPE OF PRICE		SCOPE OF SERVICES	LEVEL OF TRANSPARENCY			
			Scope of Health Care Providers	Insurers are required to report? (Not factored in grading)	Charge	Paid Amount	Scope of Services	Reported to the State	Available upon request	Available in Report	Available on Website
Description	Relevant statute(s) with a hyperlink to the text and all relevant enacted bills with available hyperlinks	If available, date of enactment	May legislate hospitals, surgical centers, or all providers including individual physicians	May legislate health plans, insurers, or carriers to report to the state	Includes average annual charges, charge estimates, actual charges	Demonstrates accepted reimbursement rates from different payers	May legislate only most common procedures, only outpatient services, or all billable services	Price information is reported to the state	Price information is available to an individual upon request	Price information is available in a publicly available report	Price information is available on a website
Wisconsin	STATUTE(S): Wisconsin Statutes §153.05 (8)(c) ENACTED BILL(S): Added: AB 907 §11-31 (2005)	Added: 2005		“insurers and administrators”	“health care claims information”			“the data organization”		publicly report, in language that is understandable to laypersons	
	STATUTE(S): Wisconsin Statutes §153.08 ENACTED BILL(S): Added: AB 907 §11-31 (2005)	Added: 2005	“hospital”		“rates or charge [change]”					“published a class 1 notice [...] in a newspaper”	
	STATUTE(S): Wisconsin Statutes §153.22 ENACTED BILL(S): Added: AB 907 §11-31 (2005)	Added: 2005	“hospitals and ambulatory surgery centers”		“utilization, charge, and quality data on patients”					“annual report”	
	STATUTE(S): Wisconsin Statutes §153.45 ENACTED BILL(S): Added: AB 907 §11-31 (2005)	Added: 2005	“health care provider that is not a hospital or ambulatory surgery center”		“Charges assessed with respect to the procedure code”					“public use data files”	
	STATUTE(S): Wisconsin Statutes §146.903 (3)(a) ENACTED BILL(S): Added: AB 907 §11-31 (2005)	Added: 2005	“health care provider or the health care provider’s designee”		“the median billed charge, assuming no medical complications”		“for a health care service, diagnostic test, or procedure”		“upon request by and at no cost to a health care consumer”		

STATE LAWS ON HEALTH CARE PRICE TRANSPARENCY AND DISCLOSURE											
STATE	LAWS	YEAR	SCOPE OF HEALTH CARE PROVIDERS		SCOPE OF PRICE		SCOPE OF SERVICES	LEVEL OF TRANSPARENCY			
			Scope of Health Care Providers	Insurers are required to report? (Not factored in grading)	Charge	Paid Amount	Scope of Services	Reported to the State	Available upon request	Available in Report	Available on Website
Description	Relevant statute(s) with a hyperlink to the text and all relevant enacted bills with available hyperlinks	If available, date of enactment	May legislate hospitals, surgical centers, or all providers including individual physicians	May legislate health plans, insurers, or carriers to report to the state	Includes average annual charges, charge estimates, actual charges	Demonstrates accepted reimbursement rates from different payers	May legislate only most common procedures, only outpatient services, or all billable services	Price information is reported to the state	Price information is available to an individual upon request	Price information is available in a publicly available report	Price information is available on a website
Wisconsin	STATUTE(S): Wisconsin Statutes §146.903 (3)(b) ENACTED BILL(S): Added: AB 614 §5 (2009)	Added: 2009	“a health care provider” EXCEPT “A health care provider that is an association of 3 or fewer individual health care providers”		“charge information” AND “1. The median billed charge; 2. If the health care provider is certified as a provider of Medicare, the Medicare payment to the provider; 3. The average allowable payment from private, 3rd-party payers”		“25 presenting conditions identified”		“upon request by and at no cost to a health care consumer, provide the consumer a copy of the document”		“may make the information available by attaching it to the document or by including the address of an Internet site where the information is posted” Wisconsin Price Point
	STATUTE(S): Wisconsin Statutes §146.903 (4)(a) ENACTED BILL(S): Added: AB 614 §5 (2009)	Added: 2009	“Each hospital”		“charge information” AND “1. The median billed charge; 2. The average allowable payment under Medicare; 3. The average allowable payment from private, 3rd-party payers”		“for inpatient care for each of the 75 diagnosis-related groups [...] and for each of the 75 outpatient surgical procedures identified”		“A hospital shall, upon request by and at no cost to a health care consumer, provide the consumer a copy of the document”		“may make the information available by attaching it to the document or by including the address of an Internet site where the information is posted” Wisconsin Price Point
Wyoming	UNLEGISLATED: Developed by Wyoming Hospital Association with data from Hospital Industry Data Institute.		“all Wyoming hospitals”		“charge information”						Wyoming Price Point