

## RÉSUMÉ DIGEST

**HB 658**

**2023 Regular Session**

**Crews**

Proposed law would have required a facility to provide price information to the public for commonly utilized healthcare services in accordance with present law.

Present law requires each hospital operating in the United States to establish and make public a list of the hospital's standard charges for items and services provided by the hospital annually and establishes regulation for the production and content of the list.

Proposed law would have tasked the La. Dept. of Health (LDH) with all of the following:

- (1) Monitoring facilities for compliance with present law.
- (2) Providing written notice to noncompliant facilities explaining how the facility is not in compliance with present law.
- (3) Ensuring that a noncompliant facility submit a corrective action plan describing the actions the facility plans to take to become compliant.
- (4) Reporting a facility to the Centers for Medicare and Medicaid Services if the facility fails to submit a corrective action plan or adhere to a corrective action plan within 90 days of receiving written notice of noncompliance from LDH.

Proposed law would have required health insurance issuers to comply with present law regarding price transparency to the public for certain healthcare services.

Proposed law would have tasked the Dept. of Insurance with all of the following:

- (1) Monitoring health insurance issuers for compliance with present law.
- (2) Providing written notice to noncompliant health insurance issuers explaining how the health insurance issuer is not in compliance with present law.
- (3) Ensuring that a noncompliant health insurance issuer submit a corrective action plan describing the actions the health insurance issuer plans to take to become compliant.
- (4) Reporting a health insurance issuer to the U.S. Dept. of Treasury if the health insurance issuer fails to submit to a corrective action plan within 90 days of receiving written notice of noncompliance from the Dept. of Insurance.

Proposed law would have tasked the Dept. of Insurance with promulgating any rules or regulations necessary to implement the provisions of this Act by Aug. 1, 2025.

Proposed law would have provided for definitions.

(Proposed to add R.S. 40:1176.1)

### **VETO MESSAGE:**

"Please be advised I have vetoed House Bill 658 of the 2023 Regular Session. The bill seeks to add additional layers of state bureaucracy to federal pricing transparency laws for healthcare facilities and health insurance issuers by requiring the Louisiana Department of Health and Department of Insurance to monitor and enforce compliance with existing federal law.

There is no question that pricing transparency is an important component to ensuring affordable access to healthcare for all, which is why these requirements were included in the Affordable Care Act. While I appreciate the author's and co-authors' support for my first executive action as governor in expanding Medicaid, making affordable healthcare more accessible to Louisianan, the legislation as finally passed provides for alternate notifications, timelines, and corrective action plans required by the State that do not align with federal law. Due to the confusion and administrative burden this bill will create if enacted, in addition to

increased agency costs not included in the budget for implementation, it will not become law."