Seventy-Eighth Oregon Legislative Assembly - 2015 Regular Session MEASURE: SB 900 A

STAFF MEASURE SUMMARY

Senate Committee On Health Care

Fiscal: Fiscal impact issued **Revenue:** No Revenue Impact

Action Date: 04/08/15

Action: Do Pass With Amendments And Requesting Referral To Ways And Means.

(Printed A-Engrossed.)

Meeting Dates: 03/25, 04/08

Vote:

Yeas: 4 - Knopp, Kruse, Monnes Anderson, Steiner Hayward

Nays: 1 - Shields

Prepared By: Zena Rockowitz, Committee Administrator

WHAT THE MEASURE DOES:

Requires Oregon Health Authority (OHA) to post data on website on price information including median prices paid to hospitals and hospital outpatient clinics for 50 most common inpatient procedures and 100 most common outpatient procedures. Requires price information to be consumer friendly, easily accessible by consumers and updated annually. Requires OHA to use data collected to empower consumers of health care to make economically sound and medically appropriate decisions, not limited to price and quality. Requires OHA to apply for funds. Creates operative date of July 1, 2016. Declares emergency, effective on passage.

ISSUES DISCUSSED:

- Transparency in order to reduce cost
- Informed choices and education for patients
- Ability to create user-friendly website
- Use of existing data
- Low administrative burden
- How to make cost data meaningful and put in context

EFFECT OF COMMITTEE AMENDMENT:

Requires Oregon Health Authority (OHA) to use data collected to empower consumers of health care to make economically sound and medically appropriate decisions, not limited to price and quality. Creates operative date of July 1, 2016. Declares emergency, effective on passage.

BACKGROUND:

Health care spending growth outpaces the growth of the overall economy and workers' wages. Annual estimates of Oregon's health care spending range between \$20 to \$25 billion. The federal Government Accountability Office found that meaningful price information is difficult for consumers to obtain prior to receiving health care services. The Centers for Medicare and Medicaid Services report that prices between hospitals for the same services vary dramatically, even within the same city. Presently, 34 states require hospitals to report certain charges and reimbursement rates in order to contain hospital costs, provide financial stability for hospitals and offer quality care. California, Colorado, Florida and New Hampshire are required to maintain websites to show prices charged for various procedures. Oregon is one of twelve states with an all-payer claims database. Senate Bill 2009 in 2009 created the Oregon All-Payer All-Claims Data Reporting Program to collect health insurance data (e.g., medical and pharmacy claims) from health insurance carriers and third-party administrators. Oregon hospitals also submit monthly utilization and financial summaries.