

STATE OF MAINE

In House _____

ORDERED, the Senate concurring, that the Commission To Study Transparency, Costs and Accountability of Health Care System Financing is established as follows.

1. Commission To Study Transparency, Costs and Accountability of Health Care System Financing established. The Commission To Study Transparency, Costs and Accountability of Health Care System Financing, referred to in this order as "the commission," is established.

2. Membership. The commission consists of 9 members appointed as follows:

A. Four members of the Senate appointed by the President of the Senate, including members from each of the 2 parties holding the largest number of seats in the Legislature; and

B. Five members of the House of Representatives appointed by the Speaker of the House, including members from each of the 2 parties holding the largest number of seats in the Legislature.

3. Commission chairs. The first-named Senator is the Senate chair of the commission and the first-named member of the House is the House chair of the commission.

4. Appointments; convening of commission. All appointments must be made no later than 30 days following passage of this order. The appointing authorities shall notify the Executive Director of the Legislative Council once all appointments have been made. When the appointment of all members has been completed, the chairs of the commission shall call and convene the first meeting of the commission. If 30 days or more after the passage of this order a majority of but not all appointments have been made, the chairs may request authority and the Legislative Council may grant authority for the commission to meet and conduct its business.

5. Duties. The commission shall:

A. Review and evaluate the current data reported by hospitals and other health care facilities in the State pursuant to state and federal law relating to charges, costs of providing services, revenue and other financial data and make recommendations for standardizing financial reporting to enhance transparency to the public of health care costs;

B. Make recommendations for changes and modifications to the current data reporting requirements so that hospitals and other health care facilities publicly report charges, negotiated rates for public and private payors, advertising fees, lobbying expenses, administrative costs and other expenses in a transparent manner. The commission shall consider the costs of implementing any recommendations and the impact of public reporting of negotiated rates on proprietary information held by public and private payors;

C. Make recommendations for increasing transparency to the public of data relating to the costs, price and negotiated rates for health care services in an accessible manner;

- D. Seek public input from individuals, hospitals, health care providers, insurers, 3rd-party payors, government-sponsored health care programs and interested organizations;
- E. Consult and collaborate with stakeholders and experts in the fields of health care and hospitals and public policy; and
- F. Examine any other issues to further the purposes of the study.

The commission may solicit health care cost data and information from both the public and private sectors to help inform the commission's work, including, but not limited to, the data and information of the Department of Health and Human Services, the Maine Health Data Organization, a statewide health care management association, a statewide hospital association and a statewide public health association.

6. Meetings. The commission shall hold at least 4 meetings.

7. Staff assistance. The Legislative Council shall provide necessary staffing services to the commission. The commission may invite the Department of Health and Human Services, the Maine Health Data Organization, the Department of Professional and Financial Regulation, Bureau of Insurance and other agencies of State Government to provide additional staff support or assistance to the commission.

8. Report. The commission shall submit a report and any suggested legislation for presentation to the Joint Standing Committee on Health and Human Services and the Joint Standing Committee on Insurance and Financial Services no later than December 4, 2013.

SPONSORED BY: _____

(Representative TREAT)

TOWN: Hallowell