HOUSE RESEARCH ORGANIZATION	bill analysis 4/19/2021	(2nd reading) HB 1490 Dean, et al.
SUBJECT:	Requiring hospitals to disclose cash price of certain health care	eservices
COMMITTEE:	Public Health — favorable, without amendment	
VOTE:	1 ayes — Klick, Guerra, Allison, Campos, Coleman, Collier, Jetton, Diverson, Price, Smith, Zwiener	
	0 nays	
WITNESSES:	For — (<i>Registered, but did not testify</i> : Charles Miller, Texas 20 Baxter, Texas Association of Health Plans; Thomas Parkinson)	
	Against — None	
	On — Cameron Duncan, Texas Hospital Association	
DIGEST:	HB 1490 would require hospitals licensed under Health and Sa ch. 241 or owned or operated by the state or a state agency to d hospital's cash price for each health care service it regularly pro-	lisclose the
	The disclosure of cash prices would have to be made by postin on the hospital's website or, if the hospital did not have a webs provided in writing on request to any person.	• •
	The bill would take effect September 1, 2021.	
SUPPORTERS SAY:	HB 1490 would improve price transparency for consumers by statute a federal rule that requires hospitals to disclose the cash certain health care services.	
	Currently, Texans lack access to transparent prices for hospital leaving patients without adequate information to make decision their health. The bill would increase Texans' access to hospital information, empowering them to make more informed choices their health care prior to receiving services. While federal rule requires hospitals to disclose cash prices, HB 1490 is necessary	ns regarding price s about already

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	patients from potential changes in federal rule, allowing Texas to maintain and enforce transparency efforts.
	Any concerns about the bill requiring cash prices to be disclosed in writing could be addressed in a floor amendment.
CRITICS SAY:	HB 1490 would impose an administrative burden on hospitals by requiring them to provide a lengthy list of prices to any person who requested such information. Some hospitals do not always have the cash price available for each health care service due to a hospital's charity care policies, financial assistance policies, and uninsured discount policies. In addition, the bill could place hospitals in a difficult position if a patient experiencing a medical emergency requested a list of prices before hospital staff stabilized or treated the patient, potentially delaying treatment in violation of federal regulations.
NOTES:	The author intends to offer a floor amendment to HB 1490 that would remove the provision requiring a hospital that did not have a website to provide the cash prices for services in writing to any person on request.