Senator Bailey, Representative Perry and Members of the Joint Standing Committee on Health Coverage Insurance and Financial Services, I am Katie Fullam Harris of MaineHealth, and I am here to testify in opposition to LD 953.

MaineHealth is health system that is committed to meeting its vision of “Working Together so Our Communities are the Healthiest in America.” As part of meeting that vision, we seek to provide our patients and communities with access to high quality care, including the relevant information they need to make informed decisions. We recognize the importance of ensuring that patients have information about health care costs, and we are particularly supportive of the investments the Legislature and State have made in the Maine Health Data Organization's Comparemaine.org tool.

This bill seeks to impose state governance over a federally governed hospital prices transparency regulation. This bill is both unnecessary, and it has the potential to create significant challenges in the future.

The federal hospital price transparency requirement – 45 CFR Part 180 – is currently governed by CMS. They take this role seriously, and I have attached a list of enforcement actions that included monetary penalties that CMS has imposed since 2021.

This bill seeks to impose state oversight over the same requirements. While MaineHealth hospitals are in full compliance with the federal requirements and committed to remaining so, federal regulations are subject to administrative change, which would immediately place Maine hospitals in a conflicting situation between state and federal requirements.

In addition, the penalties imposed in this bill for noncompliance are extreme. The federal requirement includes a (1) a written warning from CMS, (2) an opportunity to do a corrective action plan for a “material” violation, and (3) a civil monetary penalty if the hospital fails to do a satisfactory corrective action plan.

This bill would prohibit the hospital from collecting payment for a service rendered if the hospital was out of compliance with the federal requirements – even if the non-compliance was not applicable to the service delivered to the patient. In other words, hospitals would not be able to collect payment for services rendered to patients if they were not compliance with the regulations at the time of delivery. That is an extreme penalty to impose in addition to the federal penalties to which hospitals are already subject.

This bill appears to be trying to solve a non-existent problem in Maine. And in doing so, it would create significant compliance challenges for hospitals in the future.

Thank you, and I would be happy to answer questions.