

HOUSE BILL NO. HB0121

Hospital pricing transparency.

Sponsored by: Representative(s) Singh, Andrew, Bear, Haroldson, Harshman, Locke, Neiman and Rodriguez-Williams and Senator(s) Biteman, Hutchings, Laursen, D, Rothfuss and Salazar

A BILL

for

1 AN ACT relating to public health and safety; requiring
2 hospitals to list prices for medical items and services as
3 specified; requiring the department of health to monitor
4 and enforce the provisions of this act; providing
5 penalties; prohibiting collection actions as specified;
6 requiring recommendations for proposed legislation;
7 providing definitions; requiring rulemaking; making
8 conforming amendments; and providing for effective dates.

9

10 *Be It Enacted by the Legislature of the State of Wyoming:*

11

12 **Section 1.** W.S. 35-2-1501 through 35-2-1511 are
13 created to read:

14

1

ARTICLE 15

2

DISCLOSURE OF HOSPITAL PRICING

3

4

35-2-1501. Short title; purpose.

5

6

(a) This act shall be known and may be cited as the

7

"Hospital Price Transparency Act."

8

9

(b) The purpose of this act is to require hospitals

10

to disclose prices for certain items and services, to

11

provide civil penalties and to prohibit debt collection by

12

noncompliant facilities.

13

14

35-2-1502. Definitions.

15

16

(a) As used in this act:

17

18

(i) "Ancillary service" means a facility item or

19

service that a facility customarily provides as part of a

20

shoppable service;

21

22

(ii) "Department" means the department of

23

health;

1

2 (iii) "De-identified maximum negotiated charge"
3 means the highest charge a facility has negotiated with all
4 third party payors for a facility item or service;

5

6 (iv) "De-identified minimum negotiated charge"
7 means the lowest charge a facility has negotiated with all
8 third party payors for a facility item or service;

9

10 (v) "Discounted cash price" means the charge
11 that applies to a person who pays cash, or a cash
12 equivalent, for a facility item or service;

13

14 (vi) "Facility" means a hospital licensed under
15 title 35 of the Wyoming statutes;

16

17 (vii) "Facility item or service" means all items
18 and services, including individual items and services and
19 service packages, that may be provided by a facility to a
20 patient in connection with an inpatient admission or an
21 outpatient department visit for which the facility has
22 established a standard charge, including:

23

1 (A) Supplies and procedures;

2

3 (B) Room and board;

4

5 (C) Use of the facility and other areas,
6 generally referred to as facility fees;

7

8 (D) Services of health care providers
9 employed by the facility, generally referred to as
10 professional charges;

11

12 (E) Any other item or service for which a
13 facility has established a standard charge.

14

15 (viii) "Gross charge" means the charge for a
16 facility item or service that is reflected on a facility's
17 list, less any discounts;

18

19 (ix) "Machine-readable format" means a digital
20 representation of information that can be imported or read
21 into a computer system for processing;

22

1 (x) "Payor-specific negotiated charge" means the
2 charge that a facility has negotiated with a third party
3 payor for a facility item or service;

4

5 (xi) "Shoppable service" means a service that
6 may be scheduled by a patient in advance;

7

8 (xii) "Standard charge" means the regular rate
9 established by the facility for a facility item or service
10 provided to a specific group of paying patients. The term
11 includes all of the following:

12

13 (A) The gross charge;

14

15 (B) The payor-specific negotiated charge;

16

17 (C) The de-identified minimum negotiated
18 charge;

19

20 (D) The de-identified maximum negotiated
21 charge;

22

23 (E) The discounted cash price.

1

2 (xiii) "Third-party payor" means a person that
3 is, by statute, contract or agreement, legally responsible
4 for payment of a claim for a facility item or service;

5

6 (xiv) "This act" means W.S. 35-2-1501 through
7 35-2-1511.

8

9 **35-2-1503. Public availability of price information;**
10 **requirements.**

11

12 (a) Notwithstanding any other law, a facility shall
13 make public:

14

15 (i) A digital file in a machine-readable format
16 that contains a list of all standard charges, expressed in
17 dollar amounts, for all facility items or services as
18 described by W.S. 35-2-1504;

19

20 (ii) A consumer-friendly list of standard
21 charges for a limited set of shoppable services as provided
22 in W.S. 35-2-1505.

23

1 **35-2-1504. List of standard charges required.**

2

3 (a) A facility shall:

4

5 (i) Maintain a list of all standard charges for
6 all facility items or services in accordance with this
7 section; and

8

9 (ii) Make the list required under paragraph (i)
10 of this subsection available at all times to the public,
11 including by posting the list in the manner provided by
12 this section.

13

14 (b) The standard charges contained in the list
15 required to be maintained by a facility under subsection
16 (a) of this section shall reflect the standard charges
17 applicable to that location of the facility, regardless of
18 whether the facility operates in more than one (1) location
19 or operates under the same license as another facility.

20

21 (c) The list required under subsection (a) of this
22 section shall include the following items, if applicable:

23

1 (i) A description of each facility item or
2 service provided by the facility;

3

4 (ii) The following charges, expressed in dollar
5 amounts, for each individual facility item or service when
6 provided in either an inpatient setting or an outpatient
7 department setting:

8

9 (A) The gross charge;

10

11 (B) The de-identified minimum negotiated
12 charge;

13

14 (C) The de-identified maximum negotiated
15 charge;

16

17 (D) The discounted cash price;

18

19 (E) The payor-specific negotiated charge,
20 listed by the name of the third party payor and plan
21 associated with the charge and displayed in a manner that
22 clearly associates the charge with each third party payor
23 and plan; and

1

2 (F) Any code used by the facility for
3 purposes of accounting or billing for the facility item or
4 service.

5

6 (d) The list required by subsection (a) of this
7 section shall be displayed in a prominent location on the
8 home page of the facility's publicly accessible website or
9 accessible through a link on that website. If the facility
10 operates multiple locations and maintains a single website,
11 the list shall be posted for each location the facility
12 operates in a manner that clearly associates the list with
13 the applicable location of the facility.

14

15 (e) The list required under subsection (a) of this
16 subsection shall:

17

18 (i) Be available:

19

20 (A) Free of charge;

21

22 (B) Without having to establish a user
23 account or password;

1

2 (C) Without having to submit personal
3 identifying information;

4

5 (D) Without having to enter a code to
6 access the list.

7

8 (ii) Be accessible to a common commercial
9 operator of an internet search engine to the extent
10 necessary for the search engine to index and display the
11 list as a result in response to a search query of a user of
12 the search engine;

13

14 (iii) Be formatted in a manner prescribed by the
15 department;

16

17 (iv) Be digitally searchable;

18

19 (v) Use the naming convention specified by the
20 centers for Medicare and Medicaid services.

21

22 (f) In prescribing the format for the list under
23 paragraph (e)(iii) of this section, the department shall:

1

2 (i) Develop a template that each facility shall
3 use in formatting the list;

4

5 (ii) Consider any applicable federal guidelines
6 for formatting similar lists required by federal law or
7 rule and ensure that the design of the template enables
8 health care researchers to compare the charges contained in
9 the lists maintained by each facility; and

10

11 (iii) Design the template to be substantially
12 similar to the template used by the centers for Medicare
13 and Medicaid services for purposes similar to those of this
14 act, if the department determines that designing the
15 template in that manner serves the purposes of paragraph
16 (ii) of this subsection and that the department benefits
17 from developing and requiring that substantially similar
18 design.

19

20 (g) Each facility shall update the list required by
21 subsection (a) of this section not less than annually. Each
22 facility shall clearly indicate the date on which the list
23 was updated.

1

2 **35-2-1505. Consumer-friendly list of shoppable**
3 **services; requirements.**

4

5 (a) A facility shall maintain and make publicly
6 available a list of the standard charges described by W.S.
7 35-2-1504(c) for not less than three hundred (300)
8 shoppable services provided by the facility. Each facility
9 may select the shoppable services to be included in the
10 list, except that the list shall include:

11

12 (i) The seventy (70) services specified by the
13 centers for Medicare and Medicaid services in 45 C.F.R.
14 part 180; or

15

16 (ii) If the facility does not provide all of the
17 shoppable services described by paragraph (i) of this
18 subsection, as many of those shoppable services as the
19 facility does provide. Services that are not provided but
20 are Medicare and Medicaid listed services shall be
21 identified by the facility; and

22

1 (iii) State each location where a facility
2 provides the shoppable service and whether the standard
3 charges included in the list apply at that location to the
4 provision of that shoppable service in an inpatient
5 setting, an outpatient department setting or in both of
6 those settings.

7

8 (b) In selecting a shoppable service for purposes of
9 inclusion in the list required by subsection (a) of this
10 section, a facility shall:

11

12 (i) Consider how frequently the facility
13 provides the services and the facility's billing rate for
14 that service; and

15

16 (ii) Prioritize the selection of services that
17 are among the services most frequently provided by the
18 facility.

19

20 (c) The list required by subsection (a) of this
21 section shall be:

22

1 (i) Displayed in a manner prescribed by W.S.
2 35-2-1504(d);

3

4 (ii) Available:

5

6 (A) Free of charge;

7

8 (B) Without having to register or establish
9 a user account or password;

10

11 (C) Without having to submit personal
12 identifying information; and

13

14 (D) Without having to enter a code to
15 access the list.

16

17 (iii) Searchable by service description, billing
18 code and third party payor;

19

20 (iv) Updated in the manner prescribed by W.S.
21 35-2-1504(g);

22

1 (v) Accessible to a common commercial operation
2 of an internet search engine to the extent necessary for
3 the search engine to index and display the list as a result
4 in response to a search query of a user of the search
5 engine; and

6

7 (vi) Formatted in a manner that is consistent
8 with the format prescribed by the department under W.S.
9 35-2-1504(e)(iii).

10

11 **35-2-1506. Reporting requirement.**

12

13 Each time a facility updates a list as required by W.S.
14 35-2-1504(g) and 35-2-1505(c)(iv), the facility shall
15 submit the updated list to the department. The department
16 shall prescribe the form in which the updated list shall be
17 submitted to the department.

18

19 **35-2-1507. Monitoring.**

20

21 (a) The department shall monitor each facility's
22 compliance with the requirements of this act using any of
23 the following methods:

1

2 (i) Evaluating complaints made by persons to the
3 department regarding noncompliance with the act;

4

5 (ii) Reviewing any analysis prepared regarding
6 noncompliance with this act;

7

8 (iii) Auditing the websites of facilities for
9 compliance with this act;

10

11 (iv) Confirming that each facility submitted the
12 lists as required by W.S. 35-2-1506.

13

14 (b) Notwithstanding any provision of law to the
15 contrary, in considering an application for renewal of a
16 facility's license or certificate, the department shall
17 consider whether a facility is or has been in compliance
18 with this act.

19

20 **35-2-1508. Material violation; corrective action**
21 **plan.**

22

1 (a) A facility materially violates this act if the
2 facility fails to:

3

4 (i) Comply with the requirements of W.S.
5 35-2-1503; or

6

7 (ii) Publicize the facility's standard charges
8 in the form and manner required by W.S. 35-2-1504 and
9 35-2-1505.

10

11 (b) If the department determines that a facility has
12 materially violated this act, the department shall issue a
13 material violation notice to the facility and request that
14 the facility submit a corrective action plan within thirty
15 (30) days of receiving the material violation notice. The
16 notice shall indicate the form and manner that the
17 corrective action plan shall be submitted to the department
18 and shall clearly state the date by which the facility
19 shall submit the plan.

20

21 (c) The facility that receives a notice under
22 subsection (b) of this section shall:

23

1 (i) Submit a corrective action plan in the form
2 and manner, and by the specified date, prescribed by the
3 notice of violation; and

4

5 (ii) Act to comply with the plan within thirty
6 (30) days of submitting the plan to the department.

7

8 (d) A corrective action plan submitted to the
9 department shall:

10

11 (i) Describe in detail the corrective action the
12 facility will take to address any violation identified by
13 the department in the notice provided under subsection (b)
14 of this section; and

15

16 (ii) Provide a date by which the facility will
17 complete the corrective action plan.

18

19 (e) A corrective action plan is subject to review and
20 approval by the department. After the department reviews
21 and approves a facility's corrective action plan, the
22 department shall monitor and evaluate the facility's
23 compliance with the plan.

1

2 (f) A facility is considered to have failed to
3 respond to the department's request to submit a corrective
4 action plan if the facility fails to submit a corrective
5 action plan:

6

7 (i) In the form and manner specified in the
8 notice under subsection (b) of this section; or

9

10 (ii) By the date specified in the notice
11 provided in subsection (b) of this section.

12

13 (g) A facility is considered to have failed to comply
14 with a corrective action plan if the facility fails to
15 address a violation within the specified period of time
16 contained in the plan.

17

18 **35-2-1509. Civil penalty; notice of violations.**

19

20 (a) The department shall impose a civil penalty on a
21 facility if a facility fails to:

22

1 (i) Respond to the department's notice to submit
2 a corrective action plan; or

3

4 (ii) Comply with the requirements of a
5 corrective action plan submitted to the department.

6

7 (b) The department shall impose a civil penalty on a
8 facility of:

9

10 (i) For facilities categorized as critical
11 access hospitals:

12

13 (A) For a first offense, one hundred
14 dollars (\$100.00) per day for each day a facility fails to
15 comply with subsection (a) of this section;

16

17 (B) For a second offense, five hundred
18 dollars (\$500.00) per day for each day a facility fails to
19 comply with subsection (a) of this section;

20

21 (C) For a third or subsequent offense, one
22 thousand dollars (\$1,000.00) per day for each day a

1 facility fails to comply with subsection (a) of this
2 section.

3

4 (ii) For all other facilities, one thousand
5 dollars (\$1,000.00) per day for each day a facility fails
6 to comply with subsection (a) of this section.

7

8 (c) Beginning October 1, 2025, the department shall
9 create and maintain a publicly available list on its
10 website of facilities that have been found in violation of
11 this act, that have been issued a civil penalty or sent a
12 warning notice and that have been sent a request for a
13 corrective action plan from the department. Such penalties,
14 notices and communications shall be subject to public
15 disclosure under 5 U.S.C. § 552, notwithstanding any
16 exemptions or exclusions to the contrary, in full without
17 redaction. The list required by this subsection shall be
18 updated every thirty (30) days.

19

20 **35-2-1510. Legislative recommendations.**

21

22 The department shall propose to the legislature any
23 necessary recommendations for amending this act, including

1 recommendations in response to amendments by the centers
2 for Medicare and Medicaid services to 45 C.F.R. Part 180.

3

4 **35-2-1511. Prohibiting collective action of debt**
5 **against patients by non-compliant facilities.**

6

7 (a) As used in this section:

8

9 (i) "Collection action" means any of the
10 following actions taken with respect to a debt for items
11 and services that were purchased from or provided to a
12 patient by a facility on a date during which the facility
13 was in material noncompliance with this act:

14

15 (A) Attempting to collect a debt from a
16 patient or patient guarantor by referring the debt,
17 directly or indirectly, to a debt collector, a collection
18 agency or a third party payor retained by or on behalf of
19 the facility;

20

21 (B) Suing the patient or patient guarantor,
22 or enforcing an arbitration or mediation agreement; or

23

1 (C) Directly or indirectly causing a report
2 to be made to a consumer reporting agency.

3

4 (ii) "Collection agency" means any:

5

6 (A) Person who engages in a business the
7 principal purpose of which is the collection of debts; or

8

9 (B) Person who:

10

11 (I) Regularly collects or attempts to
12 collect, directly or indirectly, debts owed, due or
13 asserted to be owed or due to another;

14

15 (II) Takes assignment of debts for
16 collection purposes; or

17

18 (III) Directly or indirectly solicits
19 for collection debts owed, due or asserted to be owed or
20 due to another.

21

22 (iii) "Consumer reporting agency" means any
23 person who, for monetary fees, dues or on a cooperative

1 nonprofit basis, regularly engages, in whole or in part, in
2 the practice of assembling or evaluating consumer credit
3 information or other information on consumers for the
4 purpose of furnishing consumer reports to third parties.

5 "Consumer reporting agency" includes any person defined in
6 15 U.S.C. § 1681a(f). "Consumer reporting agency" shall not
7 include any business entity that provides check
8 verification or check guarantee services only;

9

10 (iv) "Debt" means any obligation or alleged
11 obligation of a consumer to pay money arising out of a
12 transaction, whether or not the obligation has been reduced
13 to a judgment. "Debt" shall not include a debt for
14 business, investment, commercial or agricultural purposes;

15

16 (v) "Debt collector" means any person employed
17 or engaged by a collection agency to perform the collection
18 of debts owed, due or asserted to be owed or due to
19 another.

20

21 (b) A facility that is in material noncompliance with
22 this act on the date that items and services are purchased
23 from or provided to a patient by the facility shall not

1 initiate or pursue a collection action against the patient
2 or patient guarantor for a debt owed for the item or
3 services.

4

5 (c) If a patient provides documentation that a
6 facility was in material noncompliance with this act on a
7 date that items or services were purchased by or provided
8 to the patient, and the facility takes collection action
9 against the patient or patient guarantor, the patient or
10 patient guarantor may file suit to determine if the
11 facility was materially out of compliance with this act on
12 the date of service, and the noncompliance is related to
13 the items and services. The facility shall not take a
14 collection action against the patient or patient guarantor
15 while the lawsuit is pending.

16

17 (d) A facility that has been found by a court of
18 competent jurisdiction to be materially out of compliance
19 with this act:

20

21 (i) Shall refund the payor any amount of the
22 debt the payor has paid and shall pay a penalty to the

1 patient or patient guarantor in an amount equal to the
2 total amount of the debt;

3

4 (ii) Shall dismiss or cause to be dismissed any
5 court action with prejudice and pay any attorney fees and
6 costs incurred by the patient or patient guarantor relating
7 to the action; and

8

9 (iii) Remove or cause to be removed from the
10 patient or patient guarantor's credit report any report
11 made to a consumer reporting agency relating to the debt.

12

13 (e) Nothing in this section:

14

15 (i) Prohibits a facility from billing a patient,
16 patient guarantor or third party payor for items or
17 services provided to the patient; or

18

19 (ii) Requires a facility to refund any payment
20 made to the facility for items or services provided to the
21 patient, provided no collection action is taken in
22 violation of this section.

23

1 **Section 2.** W.S. 35-2-905(a) by creating a new
2 paragraph (vi) is amended to read:

3

4 **35-2-905. Conditions, monitoring or revoking a**
5 **license.**

6

7 (a) The division may place conditions upon a license,
8 install a division approved monitor or manager at the
9 owner's or operator's expense, suspend admissions, or deny,
10 suspend or revoke a license issued under this act if a
11 licensee:

12

13 (vi) Violates any provision of W.S. 35-2-1501
14 through 35-2-1511.

15

16 **Section 3.** The department of health shall promulgate
17 all rules necessary to implement this act.

18

19 **Section 4.**

20

1 (a) Except as otherwise provided by subsection (b) of
2 this section, this act is effective July 1, 2025.

3

4 (b) Sections 3 and 4 of this act are effective
5 immediately upon completion of all acts necessary for a
6 bill to become law as provided by Article 4, Section 8 of
7 the Wyoming Constitution.

8

9

(END)