



# 126th MAINE LEGISLATURE

## FIRST REGULAR SESSION-2013

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Legislative Document

No. 990

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S.P. 335

In Senate, March 12, 2013

### An Act To Require Public Disclosure of Health Care Prices

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Reference to the Committee on Health and Human Services suggested and ordered printed.

A handwritten signature in black ink, appearing to read 'D M Grant'.

DAREK M. GRANT  
Secretary of the Senate

Presented by Senator WOODBURY of Cumberland.  
Cosponsored by Senators: CLEVELAND of Androscoggin, WHITTEMORE of Somerset,  
Representatives: MALABY of Hancock, STUCKEY of Portland, TREAT of Hallowell,  
WALLACE of Dexter.

1 **Be it enacted by the People of the State of Maine as follows:**

2 **Sec. 1. 22 MRSA §1718-A** is enacted to read:

3 **§1718-A. Consumer information regarding health care practitioner prices**

4 Each health care practitioner, as defined in section 1711-C, subsection 1, paragraph  
5 F, shall maintain a price list of the health care practitioner's most frequently provided  
6 health care services and procedures. The prices stated must be the prices that the health  
7 care practitioner charges clients directly, when there is no insurance coverage for the  
8 services or procedures or when reimbursement by an insurance company is denied. For  
9 purposes of this section, "frequently provided health care services and procedures" means  
10 those health care services and procedures that were provided by the health care  
11 practitioner at least 50 times in the preceding calendar year. Health care practitioners  
12 shall inform clients about the availability of the price list and provide copies of the price  
13 list upon request.

14 **Sec. 2. 24 MRSA §2987**, as enacted by PL 2003, c. 469, Pt. C, §30, is repealed.

15 **Sec. 3. Effective date.** This Act takes effect January 1, 2014.

16 **SUMMARY**

17 This bill requires health care practitioners to maintain and make available to clients a  
18 price list of their most frequently provided services and procedures. The prices stated are  
19 the prices charged to a patient when there is no insurance coverage or when  
20 reimbursement by an insurance company is denied.