

The Affordable Care Act requires <u>all</u> hospitals to make public the hospital's standard charges for items and services provided by the hospital [Affordable Care Act, Section 2718(e) of the Public Health Service Act].

Regulations released in the FFY 2015 Inpatient Prospective Payment System Final Rule directs hospitals to *either*:

- Make public a list of their charges (their charge master or another form of their choice) or
- Post their policy for how the hospital will process requests from the public to view a list of those charges.

Notably, Iowa hospitals currently provide publicly-available charge information posted on <a href="http://www.iowahospitalcharges.com">http://www.iowahospitalcharges.com</a>, a web-based tool developed by IHA in consultation with the IHA Council on Health Information.

IHA has been in contact with the Centers for Medicare & Medicaid Services (CMS) regional and central offices seeking a decision on whether iowahospitalcharges.com would be sufficient to meet the requirement if a hospital were to link to the site from the hospital's website.

CMS Central Office in Baltimore provided the following response:

"Hospitals are in the best position to determine the exact manner and method by which to make their charges available to the public. Therefore, we provide hospitals with the flexibility to determine how they make a list of their standard charges public. Our focus is on encouraging hospitals moving forward to engage in consumer friendly communications of their charges to help patients understand what their potential financial liability might be for services they obtain at the hospital, and to enable patients to compare charges for similar services across hospitals." - Don Thompson in the Center for Medicare, Division of Acute Care

Based on this response, IHA's position is that hospitals may direct consumers to <a href="https://www.iowahospitalcharges.com">www.iowahospitalcharges.com</a> from the hospital's website which would meet the broad criteria that CMS has set out.

IHA will continue to monitor this issue and any additional guidance released by CMS.