

LEGISLATURE OF NEBRASKA
ONE HUNDRED THIRD LEGISLATURE
SECOND SESSION
LEGISLATIVE BILL 76
Final Reading

Introduced by Nordquist, 7; Campbell, 25.

Read first time January 10, 2013

Committee: Health and Human Services

A BILL

- 1 FOR AN ACT relating to health care; to adopt the Health Care
- 2 Transparency Act; to create an advisory committee; and to
- 3 declare an emergency.
- 4 Be it enacted by the people of the State of Nebraska,

1 Section 1. Sections 1 to 4 of this act shall be known and
2 may be cited as the Health Care Transparency Act.

3 Sec. 2. The Director of Insurance shall appoint the
4 Health Care Data Base Advisory Committee to make recommendations
5 regarding the creation and implementation of the Nebraska Health Care
6 Data Base which shall provide a tool for objective analysis of health
7 care costs and quality, promote transparency for health care
8 consumers, and facilitate the reporting of health care and health
9 quality data. The Nebraska Health Care Data Base shall be used to:

10 (1) Provide information to consumers and purchasers of
11 health care;

12 (2) Determine the capacity and distribution of existing
13 health care resources;

14 (3) Identify health care needs and inform health care
15 policy;

16 (4) Evaluate the effectiveness of intervention programs
17 on improving patient outcomes;

18 (5) Review costs among various treatment settings,
19 providers, and approaches; and

20 (6) Improve the quality and affordability of patient
21 health care and health care coverage.

22 Sec. 3. (1) The Health Care Data Base Advisory Committee
23 shall be appointed within forty-five business days after the
24 effective date of this act.

25 (2) The advisory committee members appointed by the

1 Director of Insurance shall include, but not be limited to:

2 (a) A member of academia with experience in health care
3 data and cost efficiency research;

4 (b) At least one representative of hospitals;

5 (c) At least one representative of physicians;

6 (d) At least one other representative of health care
7 providers;

8 (e) A representative of small employers that purchase
9 group health insurance for employees, which representative is not an
10 insurer or insurance producer;

11 (f) A representative of large employers that purchase
12 health insurance for employees, which representative is not an
13 insurer or insurance producer;

14 (g) At least one health care consumer advocate,
15 knowledgeable about private market insurance, public health insurance
16 programs, enrollment and access, or related areas and has background
17 or experience in consumer health care advocacy;

18 (h) At least one representative of health insurers;

19 (i) A representative of organizations that facilitate
20 health information exchange to improve health care for all
21 Nebraskans; and

22 (j) At least one representative of local public health
23 departments.

24 (3) The following shall serve as ex officio members of
25 the advisory committee:

1 (a) The Director of Insurance or his or her designee;

2 (b) The Director of Medicaid and Long-Term Care of the
3 Division of Medicaid and Long-Term Care of the Department of Health
4 and Human Services or his or her designee; and

5 (c) The Director of Public Health of the Division of
6 Public Health of the Department of Health and Human Services or his
7 or her designee.

8 (4) The members of the advisory committee appointed
9 pursuant to subsection (2) of this section shall serve without
10 compensation and shall not be reimbursed for expenses incurred in the
11 performance of their duties on the committee.

12 Sec. 4. (1) The Health Care Data Base Advisory Committee
13 shall make recommendations to the Director of Insurance regarding the
14 Nebraska Health Care Data Base that:

15 (a) Include specific strategies to measure and collect
16 data related to health care safety and quality, utilization, health
17 outcomes, and cost;

18 (b) Focus on data elements that foster quality
19 improvement and peer group comparisons;

20 (c) Facilitate value-based, cost-effective purchasing of
21 health care services by public and private purchasers and consumers;

22 (d) Result in usable and comparable information that
23 allows public and private health care purchasers, consumers, and data
24 analysts to identify and compare health plans, health insurers,
25 health care facilities, and health care providers regarding the

1 provision of safe, cost-effective, high-quality health care services;

2 (e) Use and build upon existing data collection
3 standards, reporting requirements, and methods to establish and
4 maintain the data base in a cost-effective and efficient manner;

5 (f) Incorporate and utilize claims, eligibility, and
6 other publicly available data to the extent it is the most cost-
7 effective method of collecting data to minimize the cost and
8 administrative burden on data sources;

9 (g) Include discussions regarding the standardization of
10 the Nebraska Health Care Data Base with other states and regions and
11 federal efforts concerning all-payer claims data bases;

12 (h) Include discussions regarding the integration of data
13 collection requirements of the health insurance exchange as required
14 by the federal Patient Protection and Affordable Care Act, Public Law
15 111-148, as amended by the federal Health Care and Education
16 Reconciliation Act of 2010, Public Law 111-152, and any amendments
17 thereto or regulations or guidance issued under those acts;

18 (i) Include discussions regarding a limit on the number
19 of times the Nebraska Health Care Data Base may require submission of
20 the required data elements;

21 (j) Include discussions regarding a limit on the number
22 of times the data base may change the required data elements for
23 submission in a calendar year considering administrative costs,
24 resources, and time required to fulfill the requests;

25 (k) Include discussions regarding compliance with the

1 federal Health Insurance Portability and Accountability Act of 1996,
2 Public Law 104-191, as amended, and other proprietary information
3 related to collection and release of data;

4 (l) Discuss issues surrounding the availability of the
5 data for research and other purposes; and

6 (m) Include whether the advisory committee should
7 continue to exist and provide recommendations to the Department of
8 Insurance regarding the Nebraska Health Care Data Base after the
9 report required in subsection (2) of this section is completed.

10 (2) On or before December 15, 2014, the Director of
11 Insurance shall report to the Governor and the Legislature the
12 recommendations of the advisory committee.

13 Sec. 5. Since an emergency exists, this act takes effect
14 when passed and approved according to law.