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Massachusetts Hospitals: Uneven Compliance with New Federal Price Transparency Law

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Executive Summary

Until a few years ago, the federal government had not made transparency in healthcare prices a priority. Although for well over a decade, various states, including Massachusetts, enacted laws and regulations requiring that hospitals make prices available to the public, there was no broad federal mandate. That changed in 2019, when Congress passed the Public Health Service Act and the U.S. Department of Health and Human Services' Centers for Medicare and Medicaid Services (CMS) promulgated regulations, effective in January 2021, requiring that hospitals make all prices available **online** to consumers in a "consumer-friendly" format and also that hospitals make prices available online to all competitors and purchasers of healthcare services.

Over the past several years, Pioneer Institute conducted several surveys of compliance with Massachusetts' healthcare price transparency laws by hospitals, other providers, and insurers. This report, the latest survey by Pioneer, focuses on compliance with the new federal law among Massachusetts hospitals. We focused on a sample 19 out of 61 hospitals. The sample consists of hospitals of all sizes in urban, suburban, and rural areas across the state.

Our survey focused primarily on the experience of an ordinary consumer looking for the discounted cash price of various procedures. We found, in general, that searching for price on a hospital website could be a circuitous or frustrating process and, sometimes, not very consumer friendly. In addition, discounted cash price information was unavailable for 37 percent of the hospitals in our sample. Even among hospitals that post some discounted cash prices, there are varying rates of compliance with posting prices of all the procedures for which it is mandated. Compliance rates ranged from a low of 60 percent to a high of 97 percent.

We also found great variations in prices of several common procedures among our sample of 19 hospitals. These price variations ranged from nearly 100 percent for an abdominal ultrasound to over 300 percent for an MRI of a leg joint.

Such deviations occur among competitors within the City of Boston limits, as well as among those located in different parts of the state. Significant price variations pose problems for all purchasers of hospital services: consumers, employers, and insurers. Prices that are difficult to find or not made public help perpetuate these disparities.

The Act also requires that hospitals make all their prices available in certain machine-readable formats (MRF) for the benefit of employers, competitors, insurers, governments, and researchers. This format is not intended for consumers. In this category, Massachusetts hospitals do quite well. Only 2 in our sample of 19 do not make this data available in MRF style. While a number of national surveys have been critical of this requirement and the massive amount of data it produces in an unorganized fashion, there is an opportunity here for large purchasers of healthcare services to harness and utilize such data to their advantage.

In view of our findings, Pioneer makes a number of recommendations:

- Hospitals should designate one administrator to be in charge of price transparency
- The 37 percent of hospitals that do not comply with posting of discounted cash prices should come into compliance as soon as possible
- The federal government should provide specific guidance to hospitals as to how they can make websites "consumer friendly" as required by the law
- The availability of pricing information should be publicized by hospitals in direct and robust ways
- In Massachusetts, compliance with the federal law should become elements of a hospital's compliance with the Attorney General's Community Benefits Guidelines
- The federal government needs to step up its pace of compliance actions, and also work with hospitals to improve their MRF data so that it is more useful to all purchasers

- Massachusetts government should look at ways to create incentives for much greater compliance among hospitals
- Insurers, employers, benefits managers, and all levels of government should focus on MRF data
 to obtain the best prices possible for their employees and members

Introduction and Background

One thing most of us can agree on is that American consumers have a right to know the price of goods and services before purchasing them. If we are not satisfied with a price, we can try to find a less expensive alternative at a comparable value. This holds true for the most part, except in one major area: the price of healthcare services and procedures.

This lack of healthcare price information may not be bothersome to some consumers because they have good healthcare insurance and therefore believe the price to be unimportant. This is a mistake, however, because we all pay for rising healthcare costs directly or indirectly through higher insurance premiums. In many cases, however, the lack of price transparency does present problems because of health insurance with high deductibles or situations where consumers are underinsured or uninsured. The lack of price transparency has unfortunately become embedded in the American healthcare system.

Massachusetts Price Transparency Laws and Compliance History

Over the years, Massachusetts and other states have enacted a patchwork of transparency laws aimed at requiring providers and/or insurers to make prices of healthcare services available to consumers. In 2012, Massachusetts passed Chapter 224, which requires that providers, upon request, disclose to consumers the price of a procedure before such service is delivered. The law also requires state-regulated insurance companies to develop and make available to their members cost estimator tools that would disclose and compare prices among providers as well as disclose the member's remaining deductible amount.

Since 2015, Pioneer Institute has conducted several surveys to examine compliance with Massachusetts state transparency laws by both providers and carriers. While we found that carriers have improved their customers' access to price transparency tools over the years and made these tools more consumer friendly, *providers* did not score as well when it came to making prices easily available to consumers looking for particular procedures. These reports revealed that many Massachusetts hospitals had cumbersome systems in place to handle price inquiries, consumers had to request discounts for self-pay or ask about additional fees, websites were inadequate when it came to providing consumers with price information, and there was generally much room for improvement.

In 2019, Pioneer commissioned a random consumer survey to determine the views of Massachusetts commercially-insured consumers toward healthcare price information. We found that 70 percent of consumers wanted to know the price of healthcare procedures before receiving them.⁶ We also found that 11 percent of Massachusetts insureds had a deductible of \$3,000 or more.⁷ For these consumers, healthcare price transparency seems especially important.

It should be noted that since 2014, the effective date of the 2012 Massachusetts healthcare price transparency laws, there have been no actions taken by any Massachusetts state government agency to enforce the laws. One plausible reason is because the laws contained no direct enforcement mechanisms. However, in Massachusetts, such laws could be deemed laws for the protection of consumers, and therefore, violations could be addressed under the broad contours of the state's Consumer Protection Act, M.G.L. Ch. 93A.⁸ In addition, no state agency that regulates hospitals or insurers has used its authority to motivate adherence to price transparency laws. Enforcement of price transparency laws has not been a priority for state government.

A New Federal Transparency Law

In 2019 however, Congress passed the Public Health Service Act which, in part, enabled the Centers for Medicare and Medicaid Services (CMS) to promulgate regulations to require that hospitals post prices. This requirement grew out of one small sentence in the 2010 Affordable Care Act, which stipulated that all hospitals post their standard charges. For years, CMS allowed hospitals to be in compliance if they gave out prices upon request. Basically, there were no regulations and meaningful guidance regarding compliance until 2019, when the Public Health Service Act (the Act) empowered CMS to promulgate hospital price transparency regulations, which ultimately became effective on January 1, 2021. Under CMS regulations, hospitals must publish pricing information about the items and services they provide in two ways. They must display:

- 1. online the prices of 300 shoppable services in a consumer-friendly format, ¹³ and
- 2. a comprehensive machine-readable file with prices of all items and services.¹⁴

According to CMS regulations, hospitals must make public the following five types of pricing information:

- 1. **Gross charges:** the non-discounted gross price of a service or procedure as reflected in a hospital's "chargemaster" list;
- 2. **Discounted cash prices:** the rate the hospital would charge individuals who pay cash or cash equivalent; this is a discount from the chargemaster price;
- 3. **Payer-specific negotiated charges:** the rate that a hospital has negotiated with a third-party payer (for example, an insurer) for an item or service provided in the hospital;
- 4. **De-identified minimum negotiated rates:** the lowest rate that a hospital has negotiated with all third-party payers, without identifying the payer; and
- 5. **De-identified maximum negotiated rates:** the highest rate that a hospital has negotiated with all third-party payers, without identifying the payer.

In addition, under the Act, CMS has the authority to monitor compliance with the law, require corrective plans, and impose on non-complying hospitals fines ranging from \$300 to \$5,500 per day, depending on the number of beds.¹⁵

There have been a number of national surveys of hospitals' compliance with the new regulations. Most have reported large scale non-compliance with the Act. One early 2022 study found only 14 percent of hospitals were in complete compliance with the federal rules. There has also been criticism that fines have not been levied by CMS on non-complying hospitals, although that appears to be changing. Some of these surveys have also pointed out the difficulties hospitals face in posting prices under CMS rules, and others have criticized the prices posted as indecipherable, confusing, and not providing much value to ordinary consumers.

Against this backdrop, Pioneer conducted its own survey of Massachusetts hospitals to gauge compliance with the new federal price transparency regulations and assess the experience of locating online prices as an ordinary consumer might approach such a task. In particular, Pioneer focused on the single price that is most important for consumers: number 2 above, the *discounted cash prices* that consumers paying out of their own pocket would most likely be charged. This is a departure from other reports and articles on this topic, as they have until now primarily focused on evaluating prices from the machine-readable format (MRF) files of all prices published on hospital websites. This report describes the results of the Pioneer survey and its methodology.

Massachusetts Hospital Survey Results

Overview

This survey set out to accomplish several main objectives: 1) to evaluate the ease or difficulty the ordinary consumer experiences in obtaining pricing information online; 2) to determine compliance among Massachusetts hospitals with respect to making available to consumers actual prices they would pay for shoppable medical services; 3) to identify the actual discounted cash price of a number of shoppable services and compare them among hospitals; 4) to assess compliance of Massachusetts hospitals with the CMS' MRF requirement; and 5) to make recommendations for the future.

Sample Size and Access to "Consumer-Friendly" Pricing Information

According to the Massachusetts Center for Health Information and Analysis, the state is home to 61 acute care hospitals. ²⁰ Pioneer surveyed 19 of those hospitals, largely the same cohort of hospitals it had evaluated in previous price transparency surveys. These are large and small hospitals across Massachusetts located in all regions of the state. The hospitals Pioneer surveyed are:

Hospital	Location
Boston Children's Hospital (Boston)	Boston
Brigham and Women's Hospital (Boston)	Boston
<u>Carney Hospital (Dorchester)</u>	Boston (Dorchester)
Cooley Dickinson Hospital (Northampton)	Northampton
Emerson Hospital (Concord)	Concord
Falmouth Hospital (Falmouth)	Falmouth
Holyoke Medical Center (Holyoke)	Holyoke
Lahey Hospital and Medical Center (Burlington)	Burlington
Massachusetts General Hospital (Boston)	Boston
MetroWest Medical Center (Framingham)	Framingham
Morton Hospital and Medical Center (Taunton)	Taunton
Mount Auburn Hospital (Cambridge)	Cambridge
New England Baptist Hospital (Boston)	Boston
Newton-Wellesley Hospital (Newton)	Newton
Saint Vincent Hospital (Worcester)	Worcester
Signature Healthcare Brockton Hospital (Brockton)	Brockton
South Shore Hospital (South Weymouth)	South Weymouth
Tufts Medical Center (Boston)	Boston
UMass Memorial Medical Center (Worcester)	Worcester

Under the law, every hospital is required to post, in a "consumer-friendly" format, prices for 300 shoppable services. While the 2021 CMS regulations define "shoppable services," they do not define what constitutes a "consumer-friendly format" for the display of shoppable services—a frequent criticism of the law itself. Pioneer attempted to measure the consumer friendliness of a hospital's price information for consumers. Our assessment looked at two components: first, the ease or difficulty faced by the consumer in finding the location of discounted cash price information on the hospital's website, and second, the search tool or other computer feature that would provide actual price. We made a determination that intuitive or easy-to-navigate websites and the presence of a cost estimator tool were "consumer friendly." These hospital websites were, therefore, displayed in Table 1 below as "somewhat easy" for consumers to navigate. We determined that non-intuitive, difficult-to-navigate sites or Excel spreadsheets that require downloading a data-filled spreadsheet are not very consumer friendly. These hospital websites were classified as "somewhat difficult" or "difficult."

Table 1 displays Pioneer's assessment of consumer-friendly formats for each hospital. We found that some hospitals—such as Brigham and Women's, Lahey, Massachusetts General Hospital (MGH), Newton-Wellesley, South Shore, and Tufts—provide an intuitive path to access pricing information and present consumers with a fairly easy-to-use search tool that yields a cost estimate. Other hospitals, such as Carney and Morton, provide a relatively intuitive path to their pricing data, but the data itself is displayed in an Excel spreadsheet that is not easy for consumers to navigate.

Some hospitals, such as Cooley Dickinson and UMass Medical Center, have more circuitous paths to their pricing information, though their search tools are still relatively easy to use. Emerson provides a somewhat difficult route to pricing data and offers only a downloadable Excel spreadsheet to find desired prices.

Table 1: Consumer Friendliness and Accessibility

Please note that this table reflects information available online as of August 3, 2022.

This table reflects the subjective consumer experience of navigating to the discounted cash price information on each hospital's website. After reaching the pricing information webpage, the consumer must then click on the provided search tool and input the procedure key words or CPT charge code in order to obtain the price for a specific procedure. While it is not necessarily objectively simple for the average consumer to navigate to pricing information webpage on any hospital's website, we have assigned three subjective, comparative ratings of "easy," "somewhat easy," and "difficult" to attempt to communicate the website navigation experience. These ratings represent a judgment call on Pioneer's part. Once the consumer reaches the hospital's search tool, the process of searching for discounted cash price with a hospital's search tool is quite simple and intuitive.

- A "somewhat easy" rating indicates that the path to the pricing information webpage is intuitive enough for the average consumer.
- A "somewhat difficult" rating indicates that the path to the pricing information webpage is not necessarily intuitive, but still not too difficult to navigate for the average consumer.
- A "difficult" rating indicates that the path to the pricing information webpage is not intuitive for the average consumer, as he/she may even have to enter keywords directly into the website search function in order to access the price information webpage.
- * The Boston Children's Hospital search tool indicates that each procedure's charge is up to individual consideration (I.C.) and includes a phone number to call to obtain pricing information.
- ** The South Shore Hospital website offers 2 different search tools that show discounted cash price information. The search tool we accessed and used for the purposes of this report yields discounted cash prices that appear slightly higher than the discounted cash prices on the other search tool.

Hospitals	How intuitive (easy or difficult) is it to navigate to pricing information on the hospital's website?
Boston Children's Hospital (Boston)*	no discounted cash price information
Brigham and Women's Hospital (Boston)	somewhat easy
Carney Hospital (Dorchester)	somewhat easy; offers downloadable Excel spreadsheet
Cooley Dickinson Hospital (Northampton)	somewhat difficult
Emerson Hospital (Concord)	somewhat difficult; offers downloadable Excel spreadsheet
Falmouth Hospital (Falmouth)	no discounted cash price information
Holyoke Medical Center (Holyoke)	no discounted cash price information
Lahey Hospital and Medical Center (Burlington)	somewhat easy
Massachusetts General Hospital (Boston)	somewhat easy
MetroWest Medical Center (Framingham)	no discounted cash price information, but provides low, medium, and high price estimates for given procedure
Morton Hospital and Medical Center (Taunton)	somewhat easy; offers downloadable Excel spreadsheet
Mount Auburn Hospital (Cambridge)	no discounted cash price information

New England Baptist Hospital (Boston)	no discounted cash price information; estimated price ranges provided
Newton-Wellesley Hospital (Newton)	somewhat easy
Saint Vincent Hospital (Worcester)	no discounted cash price information, but provides low, medium, and high price estimates for given procedure
Signature Healthcare Brockton Hospital (Brockton)	difficult
South Shore Hospital (South Weymouth)**	somewhat easy
Tufts Medical Center (Boston)	somewhat easy
UMass Memorial Medical Center (Worcester)	somewhat difficult

One hospital, Signature Healthcare Brockton, presents consumers with a circuitous, difficult path to locating pricing information online. Indeed, we resorted to using the website's search function to find the pricing information, as it was so difficult to independently navigate to the correct page. Nevertheless, Signature's actual search tool was a cost estimator tool similar to what other hospitals provide.

Unfortunately, seven hospitals in the sample could not be evaluated for consumer friendliness because they do not display the discounted cash price as required by the Act. Those hospitals are Boston Children's Hospital, Falmouth Hospital, Holyoke Medical Center, MetroWest Medical Center, Mount Auburn Hospital, New England Baptist Hospital, and St. Vincent Hospital. MetroWest and St. Vincent's, however, do provide low, medium, and high prices for a given procedure, although not the discounted cash price. New England Baptist Hospital provides wide price ranges for a procedure. Consumers, however, must provide name, birthdate, and some other data in order to obtain such information.

Boston Children's Hospital is in a unique category. While it is relatively easy to find the location where discounted cash price should be displayed, the Hospital's search tool does not post actual discounted cash price information. Instead, Children's search tool indicates that all prices are subject to "individual consideration," which presumably means a case-by-case basis. Consumers would have to call the telephone number provided to try to obtain pricing information.

Therefore, in many cases, a consumer may navigate through a hospital's website in search of pricing information only to find no discounted cash price information available. In addition to the hospital not being in compliance with the Act, this is a distinctly frustrating and unsatisfactory experience for consumers.

Results show that in almost 37 percent of hospitals surveyed—7 out of 19—it would be impossible for consumers to locate discounted cash price data. This is true notwithstanding that each hospital's pricing information webpage contains verbiage that this pricing information will be provided and each text cites the federal transparency law. So, not only does it appear that these hospitals are not in compliance with the law, but they actually advertise to consumers that such information is available, when in fact, our researchers found it was not available.²¹ The only saving feature of this finding is that all hospitals in the survey display a phone number consumers can call to obtain pricing information.²²

Compliance with Posting Discounted Cash Price for Shoppable Services

As stated above, CMS requires that hospitals post prices for 300 shoppable services, 70 of which are dictated by CMS. Each hospital is then free to choose the remaining 230 procedures and post prices accordingly. To measure compliance with the shoppable services provision, Pioneer randomly selected 35 procedures out of the mandated 70 and evaluated each of the 19 hospitals to determine compliance. Table 2 is a list of the 35 procedures chosen for this survey, along with the diagnostic code for each procedure. Pioneer's selection covers a broad spectrum of medical procedures and services, including psychotherapy visits, blood tests, MRIs, mammographies, biopsies, ultrasounds, obstetric care, and cataract surgeries. We believe this list is diverse and broad enough

to draw conclusions about a hospital's overall compliance with posting prices for the shoppable services requirement. To replicate the experience of the average consumer, our researcher searched for these 35 procedures using their names and/or textual description, not their diagnostic code.

Table 2: List of 35 Shoppable Services

*Please note that this table reflects information available online as of August 3, 2022.

Shoppable Service Name	Shoppable Service CPT (Current Procedural Terminology) Code
Psychotherapy, 30 minutes	90832
Psychotherapy, 60 minutes	90837
Family psychotherapy, including patient, 50 min	90847
New patient office or other outpatient visit, typically 30 min	99203
New patient office of other outpatient visit, typically 60 min	99205
Patient office consultation, typically 60 min	99244
Initial new patient preventive medicine evaluation, for those ages 40 to 64	99386
Blood test, comprehensive group of blood chemicals	80053
Blood test, lipids	80061
Liver function blood test panel	80076
Automated urinalysis test	81003
Blood test, thyroid stimulating hormone	84443
Complete blood count, automated	85027
Coagulation assessment blood test	85730
MRI scan of brain before and after contrast	70553
MRI scan of lower spinal canal	72148
MRI scan of leg joint	73721
Ultrasound of abdomen	76700
Ultrasound pelvis through vagina	76830
Mammography of both breasts	77066
Cardiac valve and other major cardiothoracic procedures with cardiac catheterization with major complications or comorbidities	216
Major joint replacement or reattachment of lower extremity without major comorbid conditions or complications	470
Uterine and adnexa procedures for non-malignancy without comorbid conditions or major comorbid conditions or complications	743
Shaving of shoulder bone using an endoscope	29826
Removal of tonsils and adenoid glands patient younger than age 12	42820
Biopsy of the esophagus, stomach, and/or upper small bowel using an endoscope	43239
Biopsy of large bowel using an endoscope	45380
Ultrasound examination of lower large bowel using an endoscope	45391
Repair of groin hernia patient age 5 or older	49505
Surgical removal of prostate and surrounding lymph nodes using an endoscope	55866
Routine obstetric care for cesarean delivery, including pre-and post-delivery care	59510
Injection of substance into spinal canal of lower back or sacrum using imaging guidance	62323
Removal of recurring cataract in lens capsule using laser	66821
Electrocardiogram, routine, with interpretation and report	93000
Sleep study	95810

Table 3 below shows the percent of the 35 shoppable services for which each hospital posted the discounted cash price.

Table 3: Percent of the 35 Procedures with Posted Prices

Please note that this table reflects information available online as of August 3, 2022.

0.00% compliance means that the discounted cash price is not available due to an absence of pricing information on the hospital website or no discounted cash price information offered by the search tool.

- * The Boston Children's Hospital search tool indicates that each procedure's charge is up to individual consideration (I.C.) and includes a phone number to call to obtain pricing information.
- **The South Shore Hospital website offers 2 different search tools that show discounted cash price information. The search tool we accessed and used for the purposes of this report yields discounted cash prices that appear slightly higher than the discounted cash prices on the other search tool.

Hospitals	% Compliance (discount cash price out of the 35 select services)
Boston Children's Hospital (Boston)*	0.00%
Brigham and Women's Hospital (Boston)	88.57%
Carney Hospital (Dorchester)	80.00%
Cooley Dickinson Hospital (Northampton)	77.14%
Emerson Hospital (Concord)	60.00%
Falmouth Hospital (Falmouth)	0.00%
Holyoke Medical Center (Holyoke)	0.00%
Lahey Hospital and Medical Center (Burlington)	62.86%
Massachusetts General Hospital (Boston)	97.14%
MetroWest Medical Center (Framingham)	0.00%
Morton Hospital and Medical Center (Taunton)	71.43%
Mount Auburn Hospital (Cambridge)	0.00%
New England Baptist Hospital (Boston)	0.00%
Newton-Wellesley Hospital (Newton)	88.57%
Saint Vincent Hospital (Worcester)	0.00%
Signature Healthcare Brockton Hospital (Brockton)	71.43%
South Shore Hospital (South Weymouth)**	68.57%
Tufts Medical Center (Boston)	71.43%
UMass Memorial Medical Center (Worcester)	71.43%

As stated above, for 37 percent of hospitals there is no discounted cash price posted for any of the 35 sampled procedures. We feel confident in projecting this result to all shoppable procedures and in concluding that these hospitals are not posting consumer-friendly discounted cash prices for shoppable services. The hospitals are: Boston Children's Hospital, Falmouth Hospital, Holyoke Medical Center, MetroWest Medical Center, Mount Auburn Hospital, New England Baptist Hospital, and St. Vincent Hospital.

Among the remaining 63 percent, or 12 hospitals, we found varying rates of compliance, ranging from 97 percent down to 60 percent. MGH was at 97 percent and Brigham and Women's and Newton-Wellesley were at 89 percent. This means that these three hospitals—members of the Mass General Brigham (MGB) integrated healthcare system—posted the discounted cash price for 97 percent or 89 percent of their shoppable service procedures. Emerson Hospital was at the other end of the scale, posting discounted cash price for only 60 percent of its shoppable service procedures. Others came in as follows: Carney Hospital at 80 percent; Cooley Dickinson at 77 percent; Morton Hospital, Signature, Tufts, and UMass Memorial at 71 percent; South Shore at almost 69 percent; and Lahey at nearly 63 percent.

Hospitals are required by law to post prices for 300 shoppable services. Based on the results of this survey, it appears that even among those hospitals that post prices, compliance is very uneven. Here again, a consumer would spend time searching a hospital's website for a price for particular services or procedures only to find such information is not available.

Comparative Discounted Cash Prices

Pioneer also examined actual discounted cash prices for five common procedures (selected out of our sample of 35) across the 12 hospitals that provided this information. Those procedures and their discounted cash prices are displayed in Table 4. The remaining seven non-compliant hospitals are shown in this table with the notation "n/a" for "not available." The selected procedures are: MRI of the brain, ultrasound of the abdomen, MRI of leg joint, mammography of both breasts, and an electrocardiogram.

Table 4: Discounted Cash Prices for Five Common Procedures

Please note that this table reflects information available online as of August 3, 2022.

- "n/a" means that the discounted cash price is not available due to an absence of pricing information on the hospital website or no discounted cash price information offered by the search tool.
- * The Boston Children's Hospital search tool indicates that each procedure's charge is up to individual consideration (I.C.) and includes a phone number to call to obtain pricing information.
- ** The Excel spreadsheets displaying standard charges for Carney Hospital and Morton Hospital and Medical Center (both members of the Steward Health Care System) yield 2 different, inconsistent prices for the mammography of both breasts. We portray them here for the reader to understand, and we cannot make any assessment as to what the actual discounted cash price is for those services.
- *** The South Shore Hospital website offers 2 different search tools that show discounted cash price information. The search tool we accessed and used for the purposes of this report yields discounted cash prices that appear slightly higher than the discounted cash prices on the other search tool.
- **** The Tufts Medical Center search tool yields 2 different, inconsistent prices for the MRI brain scan and MRI of the leg joint. We portray them here for the reader to understand, and we cannot make any assessment as to what the actual discounted cash price is for those services.

Hospitals	MRI of brain scan (70553)	Ultrasound of abdomen (76700)	MRI of leg joint (73721)	Mammography of both breasts (77066)	Electrocardio-gram (93000)
Boston Children's Hospital (Boston)*	I.C. (Individual Consideration)	I.C. (Individual Consideration)	I.C. (Individual Consideration)	I.C. (Individual Consideration)	I.C. (Individual Consideration)
Brigham and Women's Hospital (Boston)	\$4,871.00	\$779.00	\$3,461.00	\$688.00	\$223.00
Carney Hospital (Dorchester)**	\$1,457.03	\$482.21	\$775.18	\$413.98 \$440.89	\$86.03
Cooley Dickinson Hospital (Northampton)	\$3,090.00	\$648.00	\$1,669.00	\$514.00	\$131.00
Emerson Hospital (Concord)	\$2,035.47	\$1,096.68	\$1,180.47	\$410.40	\$176.70
Falmouth Hospital (Falmouth)	n/a	n/a	n/a	n/a	n/a
Holyoke Medical Center (Holyoke)	n/a	n/a	n/a	n/a	n/a
Lahey Hospital and Medical Center (Burlington)	\$2,768.00	\$942.00	\$1,933.00	\$962.00	n/a
Massachusetts General Hospital (Boston)	\$4,871.00	\$779.00	\$3,461.00	\$688.00	\$223.00

MetroWest Medical Center (Framingham)	n/a	n/a	n/a	n/a	n/a
Morton Hospital and Medical Center (Taunton)**	\$1,457.03	\$482.21	\$775.18	\$413.98 \$440.89	\$86.03
Mount Auburn Hospital (Cambridge)	n/a	n/a	n/a	n/a	n/a
New England Baptist Hospital (Boston)	n/a	n/a	n/a	n/a	n/a
Newton-Wellesley Hospital (Newton)	\$4,315.00	\$696.00	\$3,053.00	\$620.00	\$185.00
Saint Vincent Hospital (Worcester)	n/a	n/a	n/a	n/a	n/a
Signature Healthcare Brockton Hospital (Brockton)	\$1,908.94	\$373.77	\$1,207.26	\$556.17	\$166.11
South Shore Hospital (South Weymouth)***	\$3,538.50	\$563.50	\$1,597.17	\$392.09	n/a
Tufts Medical Center (Boston)****	\$4,479.00 \$2,727.00	\$379.00	\$510.00 \$1,631.00	\$519.00	\$239.00
UMass Memorial Medical Center (Worcester)	\$5,278.00	\$1,663.00	\$3,147.00	\$789.00	\$131.00

Comparing prices among the 12 hospitals that provide discounted cash price information for a given shoppable service reveals large price disparities for the same services offered. For example, the price of a mammography of both breasts ranges from a high of \$962 at Lahey in Burlington to a low of \$392 at South Shore Hospital in Weymouth. These two hospitals are roughly 33 miles apart, but travel is along heavily-trafficked routes. A closer competitor to Lahey is Emerson, which charges \$410 for the same procedure. Lahey and Emerson are roughly 22 miles apart or less than a 15-minute ride on Interstate 95. Such prices beg the question of why the price of this very common procedure is more than twice as expensive at Lahey than at a relatively nearby competitor, Emerson, or a more distant competitor, South Shore in Weymouth.

Prices for this common procedure are \$789 at Worcester's UMass Memorial and \$688 at Boston's Massachusetts General and Brigham and Women's Hospitals. Compare Tufts in Boston, a nearby competitor to MGH, which charges \$519. Meanwhile, Cooley Dickinson charges \$514 in more rural Northampton, while Signature Healthcare at the opposite end of the state charges \$556 in urban, economically diverse Brockton. These variations are impossible to explain.

Another popular procedure, an MRI of a leg joint, shows even wider variations. Disparities range from a high of over \$3,400 at Brigham and its related hospital, MGH, to a low of \$775 at Carney in Boston and its related hospital, Morton, in Taunton. While Taunton is almost 40 miles from Boston, Carney Hospital is within 10 miles of MGH and seven miles of Brigham and Women's, but an MRI of a leg joint costs over 300 percent more at MGH and Brigham than at Carney. In terms of price disparities, why is there a nearly \$2,700 difference in the discounted cash price of this very routine procedure?

A routine electrocardiogram also shows disparities, although they are smaller in magnitude due to the relatively lower cost of this procedure. Prices range from a high of \$239 at Tufts and \$223 at Brigham and MGH to a low of \$86 at Carney and Morton Hospitals.

A very important procedure, an MRI of a brain scan before and after contrast, reveals huge price disparities across the state. Prices range from almost \$5,300 at Worcester's UMass Memorial Medical Center to less than \$1,500 at Boston's Carney Hospital.

The last common procedure for analysis is an ultrasound of the abdomen. Here, once again, UMass Memorial lists the highest price at \$1,663, while Tufts Medical Center in Boston, about 45 miles away, charges a low of \$379 and Signature Health in Brockton, in southeast Massachusetts,

charges a comparable \$374. The striking variation in price begs the question: how can an abdominal ultrasound in Worcester cost over 300 percent more than the same procedure costs in downtown Boston or Brockton?

A look at other providers shows a closer cluster of prices for an abdominal ultrasound, but all are still appreciably less than UMass and significantly higher than Tufts and Signature: Emerson charges almost \$1,100; Lahey charges \$962; each of the three MGB hospitals charges \$779; and Cooley Dickinson comes in at \$648. Although Tufts, MGH, and Brigham are all within a few miles of one another, the MGH and Brigham hospitals' price for this procedure is over 100 percent higher than the price at Tufts.

Although this comparative price analysis is hampered by the lack of price information from the seven hospitals that appear not to be in compliance with the CMS rule to post discounted cash prices for shoppable services, we have enough data to repeatedly see significant price variations. These disparities portray a market dominated by certain systems that are able to maintain prices above competitive norms. This is why provider price transparency is crucial information to which consumers, employers, benefits managers, and insurers should have ready access. However, as this survey shows, 7 of the 19 hospitals in our survey did not provide this price information and, among those that did, some did not provide an easy online route to such data. It seems clear that no hospital made prominent mention of price availability on its website. In all cases, consumers had to search through the provider's website, sometimes encountering circuitous, non-intuitive routes to locate the pricing page.

As long as prices continue to be inaccessible to public view and scrutiny, there will be no market corrections to tamp down unwarranted price variations. The federal price transparency law is well-intentioned, but compliance and its desired effect on competition have yet to be realized.

Compliance with Machine-Readable Format (MRF) File Provisions

The final rule requires that "chargemaster information" 23 be made available to the public via the internet in "machine-readable" file (MRF) 24 format. This means that the file must be in a format that can be easily processed by a computer.

While the requirements of MRF price data are clearly defined, the data is not accessible to the average consumer. Indeed, the language of the law itself acknowledges that MRFs are not designed to be consumer friendly. Reading and understanding these files requires software and expertise not usually found among average healthcare consumers. Such files are meant to be accessed by an industrial computer and/or special computer software.

Hospitals are required to make pricing data accessible in the MRF format so their prices are transparent to competitors, insurance companies, researchers, and even the government. Presumably, the goal is that hospital price transparency will work to tamp down unwarranted price variations. An insurance company might see that it is paying more to a particular hospital than some of its competitors are and use such information as leverage to pay less. Alternatively, a hospital may see that its competitors are charging less for an identical procedure and, perhaps, reduce its price. So far, there is no public information that this price transparency has had either of these positive results. Across the nation, most surveys about compliance with the new price transparency law appear to have relied on data in the MRFs and, as mentioned above, compliance has been disappointing. Thus, the record is still incomplete in terms of measuring whether this new law has impacted pricing behavior.

In the instant survey, since our primary focus was on access to shoppable services by consumers, we approached the MRF requirement simply to determine if our sample of Massachusetts hospitals made their prices available in the MRF format as required by the law. We searched to determine whether each hospital abided by provision 1 of the 2021 CMS price transparency regulations, which stipulates that all hospitals must provide a "comprehensive machine-readable file (MRF) with all items and services," clearly accessible online. To conduct our evaluation, we used

specialized software to view the MRFs listing standard charges²⁵ on each hospital's website. As indicated in the table below, all but two hospitals, Signature Healthcare Brockton Hospital and South Shore Hospital in South Weymouth, had downloadable MRFs available on their websites.

Table 5: Presence of Machine-Readable Format (MRF) File

*Please note that this table reflects information available online as of June 10, 2022.

Hospitals	Does the website display a "Standard Charges" file as a Machine Readable File (MRF)?
Boston Children's Hospital (Boston)	yes
Brigham and Women's Hospital (Boston)	yes
Carney Hospital (Dorchester)	yes
Cooley Dickinson Hospital (Northampton)	yes
Emerson Hospital (Concord)	yes
Falmouth Hospital (Falmouth)	yes
Holyoke Medical Center (Holyoke)	yes
Lahey Hospital and Medical Center (Burlington)	yes
Massachusetts General Hospital (Boston)	yes
MetroWest Medical Center (Framingham)	yes
Morton Hospital and Medical Center (Taunton)	yes
Mount Auburn Hospital (Cambridge)	yes
New England Baptist Hospital (Boston)	yes
Newton-Wellesley Hospital (Newton)	yes
Saint Vincent Hospital (Worcester)	yes
Signature Healthcare Brockton Hospital (Brockton)	no
South Shore Hospital (South Weymouth)	no
Tufts Medical Center (Boston)	yes
UMass Memorial Medical Center (Worcester)	yes

Table 5 shows that most Massachusetts hospitals appear to be in compliance with the MRF requirements of the new law. It is important to note that national surveys on this subject showed dismal compliance rates among hospitals. In this regard, Massachusetts hospitals appear ahead of providers in other parts of the country. That said, other surveys have been highly critical of this provision and the confusing mega-data it requires hospitals to produce. While it is important to make public hospital prices paid by consumers and insurers, it is not yet clear how making huge amounts of data transparent will ultimately impact the unwarranted disparities in pricing that consumers, insurers, and employers face.

Conclusions

This survey focused primarily on the compliance of Massachusetts hospitals with a new federal price transparency law that requires the posting of prices of "shoppable services" in a "consumer-friendly" online format. Pioneer researchers put themselves in the shoes of ordinary consumers as they might approach a hospital's website searching for the price of various shoppable medical services. The one important advantage our researchers had over ordinary consumers is that of repetition. While an average consumer might search for one or two procedures among a small number of hospitals, our researchers had the benefit of searching for 35 procedures among 19 hospitals. Therefore, our assessments of accessibility and consumer friendliness are very likely more positive than that which actual consumers experience.

The survey revealed that while no hospital advertised a direct link to pricing information for consumers on its website, some systems, such as MGB and Lahey Health, had relatively intuitive

routes to pricing information. Generally, however, consumers are required to navigate through several steps on unfamiliar websites to find pricing information.

That said, a positive feature of the price finding process is that in all but three cases, once a consumer had located the pricing information page, hospital websites provided a simple-to-use cost estimator computer tool to find a particular price. The consumer simply has to enter the name of the procedure into the tool, and our research experience was that the price was provided. The exceptions are Carney Hospital, Emerson Hospital, and Morton Hospital. These providers use an Excel spreadsheet rather than a cost estimator tool. Excel spreadsheets are not the most consumer-friendly format for finding price.

The average consumer would not know that, based on our survey, almost 37 percent of hospitals in Massachusetts do not even post the price in which he or she is most interested: the discounted cash price. The import of this is that for common shoppable medical procedures—such as MRIs, mammographies, abdominal scans, or any of the other 300 services for which price must be posted—whether a consumer will be able to obtain price information is truly a hit-or-miss proposition.

The survey also looked at compliance rates among the 12 hospitals in our sample that did post some if not all prices. Specifically, we looked at what percent of 35 mandated services each hospital posted. We found failing-to-good compliance performance, ranging from 60 to 97 percent. We also found that, for the most part, the MGB hospitals showed excellent compliance, while some others — such as Lahey, Emerson, and South Shore — did not perform well.

No survey of hospital prices would be complete without an analysis of price variations among hospitals. In Massachusetts, price disparities are a source of critical attention. As is true in many other parts of the country, there have long existed price differences for the same procedures among hospitals that cannot be easily explained by cost, quality, or other quantitative measures. These prices differences are called unwarranted price variations.

Our survey examined prices for five common procedures across the sample hospitals and found huge unexplained variations for each procedure. Differences in price ranged from nearly 100 percent for an abdominal ultrasound to over 300 percent for an MRI of a leg joint. The common denominators were that certain hospital systems were always on the high end of these disparities, and others were usually on the low end.

Recommendations

The focus on price transparency in healthcare is not new and, as mentioned earlier, Massachusetts and other states adopted price transparency laws 10 or more years ago. More recently, the federal government has stepped into this space to establish a price transparency regime for hospitals and impose penalties on violators. After early criticism that CMS was not acting with sufficient vigor to enforce the new law, there has been a recent uptick in levying large fines on violators. Whether such enforcement activity will spur a focus on consumer-friendly access and shine attention on prices is not yet known.

In light of our survey results and knowledge of national studies on compliance, there are a number of steps CMS and Massachusetts can take to improve provider price transparency:

- The lack of hospital price transparency has been a systematic failure in this state for many years. There should be one person in each hospital who is responsible for compliance not just with the new federal law, but also with the 10-year-old Massachusetts price transparency law. It would appear from the survey results that transparency may not be anyone's top priority.
- 2. Hospitals that do not provide prices for consumer-friendly shoppable services should examine their websites and conform such sites to federal transparency law requirements. Such hospitals should immediately alter the language they use promising consumers that all prices are available when, in fact, they are not.

- 3. The federal government should provide clear guidance to hospitals as to what constitutes a consumer-friendly format for shoppable services. CMS should:
 - Specifically define the contours of a "consumer-friendly" format for displaying shoppable services;
 - Specifically determine that the use of Excel spreadsheets to display prices does not meet the "consumer-friendly" standard; and
 - Require a direct link from a hospital's home page to shoppable services pricing data.
 - Prohibit hospitals from requiring that consumers provide personal identifying information in order to obtain "discounted cash price" data.
- 4. The fact that pricing information is available to consumers needs to be publicized by hospitals in a more direct and robust way so the public knows such information is available. Consumers are not even aware that they both have a right to pricing information and that such information is required to be displayed on a hospital's webpage.
- 5. Compliance with the new federal law and existing state law should become elements of a hospital's compliance with the Massachusetts Attorney General's Community Benefits Guidelines, which require that hospitals ascertain unmet healthcare needs in their service areas and develop programs targeting such needs. The fact that many ordinary Massachusetts consumers have high deductibles or may be underinsured requires, at a minimum, as much pricing transparency as possible.
- 6. While the pace of CMS oversight and enforcement of the new law needs to accelerate, especially in the area of shoppable services, there should be a hard look at the MRF requirements. There is much uniform criticism about the large amounts of data hospitals provide in MRF and little follow-up to determine the competitive benefits of such disclosures in their current form. The underlying goal is a sound one: to increase price transparency in an industry whose prices have long been shrouded in secrecy. However, in its current form, it is far from clear how the MRF data will help accomplish that goal. CMS should work with hospitals to ensure that MRF data is useful to employers, benefits managers, and insurers alike. There are huge opportunities for hospital payers to use the transparency required by CMS to their advantage in negotiating payer prices.
- 7. Massachusetts government should look at ways it can incent compliance with the federal price transparency law. Recently, Colorado passed a law that bars hospitals not in compliance with the federal law from collecting bad debt from consumers (CBH 22-1285). While this route may or may not be best for Massachusetts, the state should explore its regulatory powers to create incentives to spur much greater compliance, especially in the area of consumer prices such as the discounted cash price.
- 8. The presence of this pricing data should be a focus of insurers, employers, benefits managers, and even state governments as each tries to negotiate the best prices possible for their employees and members.

Appendix A: Language Presenting Pricing Information on Hospital Website

Please note that this table reflects information available online as of August 3, 2022.

Rows highlighted in blue reflect hospitals whose discounted cash price is not available due to an absence of pricing information on the hospital website or no discounted cash price information offered by the search tool.

Hospital	Introduction to price info from hospital website
Boston Children's Hospital (Boston)	Search a list of 300 shoppable services that may be scheduled in advance, which includes routine and/or ancillary services associated with the shoppable service for all locations. These 300 shoppable services represent 70 services identified by the Centers for Medicare & Medicaid Services (CMS), as well as 230 services most commonly provided by the Hospital. Included in the shoppable services are the average payer-specific negotiated charges for the services and average de-identified minimum and maximum negotiated charges.
	The average payer-specific negotiated charges represent rates in effect as of January 1, 2021.
	Certain items are listed with the code "I.C." (Individual Consideration), which means the price may vary based on the services required for each patient, as determined by the patient's physician.
	The information included is not intended to provide all of the information needed to estimate the cost of care. For more information, you may contact the Hospital's Financial Assistance Counselors at 617-355-7201 or request an estimate of the cost for your care.
Brigham and Women's Hospital (Boston)	As required by the federal government (Centers for Medicare and Medicaid Services), we publish information (a comprehensive machine-readable file) about the rates negotiated with insurance companies for all services and items offered by our hospital. This file is listed below and available for download. Please note: Because of the size of the file, you may need special computer software/speed to open the file.
	The price information contained in this large file is NOT an estimate of the costs that you are responsible for paying. This file is not intended for patients and does not reflect your out of-pocket costs. If you are a patient, you can request a cost estimate by contacting Patient Billing Solutions or using our online tool to view a cost estimate of common health care services ("shoppable items"). Read more about patient cost estimates.
Carney Hospital (Dorchester)	The Centers for Medicare and Medicaid Services (CMS) requires all hospitals to provide patients access to price information* for all items and services. Steward Health Care System has complied with this requirement to help you make better informed health care decisions. Click here to access a tool that allows you to create your own accurate bill estimate at your convenience. Please note, the information provided is only an estimate and actual charges may vary.
	*Includes gross charges, self-pay cash prices and negotiated payor rates.
Cooley Dickinson Hospital (Northampton)	Cooley Dickinson Hospital, a member of Mass General Brigham, is committed to price transparency. Patients can contact Patient Billing Solutions or use our online tool to view a cost estimate of common health care services ("shoppable items").
	Patients can request a cost estimate for health care services at Cooley Dickinson Hospital, a member of Mass General Brigham. Contact Patient Billing Solutions at 617-726-3884.
	You also can generate a self-service estimate for select upcoming or potential services in real-time by using Patient Gateway and navigating to the Billing menu.
	If you do not have a Patient Gateway account, you can use our online price estimator tool of your out-of-pocket costs for "shoppable" items*, such as surgeries, procedures, labs, etc.

Emerson Hospital (Concord)

A hospital's standard charges document is a comprehensive list of all the billable services and items provided by a hospital. Our standard charges capture the costs of each procedure, service, supply, prescription drug, and diagnostic test provided at the hospital, as well as any fees associated with services, such as equipment fees and room charges. It also includes payer-specific negotiated charges. Because hospitals operate 24 hours a day, seven days a week, standard charges can contain thousands of services and related charges.

Standard charges are almost never billed to a patient or received as payment by a hospital. These are the rates negotiated with insurance companies, Medicare, or MassHealth. These payers then apply their reimbursement terms or contracted rates to the services that are billed. If a patient co-payment, co-insurance, or deductible is owed, these too are most often not based on standard charges amounts but rather the payment terms determined by the insurer or government program.

Standard Charges: As required by the federal government (Centers for Medicare and Medicaid Services), we publish information (a comprehensive machine-readable file) about the rates negotiated with insurance companies for all services and items offered by our hospital. This file is listed below and available for download.

Shoppable Services: The Centers for Medicare and Medicaid Services Price Transparency rule requires that hospitals provide cost information on 300 "shoppable" items per hospital. This file is listed below and available for download.

Falmouth Hospital (Falmouth)

To help patients better understand the cost of care, Cape Cod Healthcare, in accordance with federal guidelines, is providing information about Cape Cod Hospital and Falmouth Hospitals charges and negotiated commercial insurance prices for services.

The price estimator, also known as a consumer shoppable services sheet, includes both Cape Cod Hospital and Falmouth Hospital's standard charge and an estimate of commercial insurance providers' negotiated rate.

This is Only an Estimate

The information provided through this online tool is an estimate based on our latest information and is not a guarantee of what you will be charged. The cost estimates provided through this tool are primarily for services delivered at Cape Cod Hospital or at Falmouth Hospital and include, for example, lab tests, diagnostic imaging procedures and surgical procedures, as well as professional fees for our employed providers at Cape Cod Healthcare. Other professional fees from non-employed providers, (which include physicians, radiologists, and anesthesiologists) are NOT included in this estimate. Additional charges will apply if extra or unanticipated studies are ordered and performed in the course of your care. Please note that in many cases, it is impossible to predict final charges because of variables that affect services used in your care, such as the length of time spent in surgery or in the recovery room, specific equipment used in your care and treatment, supplies and medications required or because of any unusual special care, unexpected conditions or complications.

If you have insurance, your individual insurance benefits will ultimately determine the amount you owe, including deductibles, co-payments, co-insurance and out-of-pocket maximums. Benefits and eligibility are subject to change and are not a guarantee of payment. If you are uninsured, you may be eligible for a discount on your services; the rate quoted may not reflect our current policy.

There are over 300 services noted which are the most frequently used by our patients. These are defined as "Consumer Shoppable Services".

After accessing the hospital's price estimator, patients can access Consumer Shoppable Services by selecting the "Shoppable Services" tab. Patients can also access a machine-readable file, which is a complete list of all services provided with the hospital's standard charges and payments negotiated by payers, by selecting the "Standard Charges" tab.

Holyoke Medical Center (Holyoke)

Holyoke Medical Center provides quality care to all patients regardless of their ability to pay. Each patient is unique in their need for healthcare services and in their insurance coverage (such as copayments, deductibles, coverage limitations, etc.). This makes it difficult to provide specific cost information in every situation. If you would like to estimate the cost of a service based on your specific insurance coverage, including copays/deductible/co-insurance (as applicable to your benefits), HMC has installed CarePricer, a tool that can help you estimate your portion of the cost for the care you will receive:

Estimate the cost of your care with CarePricer.

Patients are always encouraged to contact their insurer to request an estimate of out-of-pocket costs based upon their specific health insurance plan.

If you have questions about the cost of your healthcare needs, we encourage you to please call the Holyoke Medical Center Patient Financial Obligation Inquiry Line at 413.534.2871.

Lahey Hospital and Medical Center (Burlington)

Beth Israel Lahey Health and Lahey Hospital & Medical Center (LHMC) are committed to price transparency as part of our mission to provide high-quality, affordable care while complying with Federal laws requiring clear and helpful price information be made available to the public.

When you know what you can expect to pay for common health services, you can manage your health care dollars more effectively. Beth Israel Lahey Health offers an interactive online treatment cost calculator that gives you estimates of your out-of-pocket costs for common exams, tests and procedures.

Variation in health insurance plans and other benefits make it difficult for hospitals to provide specific cost information about more complex care without access to detailed information about a patient's health insurance coverage.

Massachusetts General Hospital (Boston)

As required by the federal government (Centers for Medicare and Medicaid Services), we publish information (a comprehensive machine-readable file) about the rates negotiated with insurance companies for all services and items offered by our hospital. This file is listed below and available for download.

Please note: Because of the size of the file, you may need special computer software/ speed to open the file.

The price information contained in this large file is NOT an estimate of the costs that you are responsible for paying. This file is not intended for patients and does not reflect your out of-pocket costs. If you are a patient, you can request a cost estimate by contacting Patient Billing Solutions or using our online tool to view a cost estimate of common health care services ("shoppable items"). Read more about patient cost estimates.

MetroWest Medical Center (Framingham)

Guidelines established by the United States Department of Health and Human Services require hospitals to place a list of their standard charges on their website. This includes the hospital's standard charges for each diagnosis-related group (DRG). A DRG provides a way to categorize the type of patients a hospital treats and covers all charges associated with an inpatient stay from admission to discharge.

A comprehensive list of the hospital's standard charges for services and supplies may be accessed below. The standard charges reflected likely differ from the payment amounts that hospitals receive for patient care.

Morton Hospital and Medical Center (Taunton)

The Centers for Medicare and Medicaid Services (CMS) requires all hospitals to provide patients access to price information* for all items and services. Steward Health Care System has complied with this requirement to help you make better informed health care decisions. Click here to access a tool that allows you to create your own accurate bill estimate at your convenience. Please note, the information provided is only an estimate and actual charges may vary.

*Includes gross charges, self-pay cash prices and negotiated payor rates.

Mount Auburn Hospital (Cambridge)

Beth Israel Lahey Health and Mount Auburn Hospital are committed to price transparency as part of our mission to provide high-quality, affordable care while complying with Federal laws requiring clear and helpful price information be made available to the public.

When you know what you can expect to pay for common health services, you can manage your health care dollars more effectively. Beth Israel Lahey Health offers an interactive online treatment cost calculator that gives you estimates of your out-of-pocket costs for common exams, tests and procedures.

Variation in health insurance plans and other benefits make it difficult for hospitals to provide specific cost information about more complex care without access to detailed information about a patient's health insurance coverage.

New England Baptist Hospital (Boston)

Beth Israel Lahey Health and New England Baptist Hospital (NEBH) are committed to price transparency as part of our mission to provide high-quality, affordable care while complying with Federal laws requiring clear and helpful price information be made available to the public.

When you know what you can expect to pay for common health services, you can manage your health care dollars more effectively. Beth Israel Lahey Health offers an interactive online treatment cost calculator that gives you estimates of your out-of-pocket costs for common exams, tests and procedures.

Variation in health insurance plans and other benefits make it difficult for hospitals to provide specific cost information about more complex care without access to detailed information about a patient's health insurance coverage.

Newton-Wellesley Hospital (Newton)

As required by the federal government (Centers for Medicare and Medicaid Services), we publish information (a comprehensive machine-readable file) about the rates negotiated with insurance companies for all services and items offered by our hospital.

This zip file is listed below and available for download. Please note: Because of the size of the file, you may need special computer software/speed to open the file.

The price information contained in this large file is NOT an estimate of the costs that you are responsible for paying. This file is not intended for patients and does not reflect your out of-pocket costs. If you are a patient, you can request a cost estimate by contacting Patient Billing Solutions or using our online tool to view a cost estimate of common health care services ("shoppable items").

Saint Vincent Hospital (Worcester)

Guidelines established by the United States Department of Health and Human Services require hospitals to place a list of their standard charges on their website. This includes the hospital's standard charges for each diagnosis-related group (DRG). A DRG provides a way to categorize the type of patients a hospital treats and covers all charges associated with an inpatient stay from admission to discharge.

A comprehensive list of the hospital's standard charges for services and supplies may be accessed below. The standard charges reflected likely differ from the payment amounts that hospitals receive for patient care.

Signature Healthcare Brockton Hospital (Brockton)

Hospitals are required by law to make available a list of standard charges, also known as the hospital chargemaster. It is a comprehensive list of charges for each billable inpatient and outpatient service or item provided by the hospital. Because hospitals operate 24 hours a day, seven days a week, a chargemaster can contain a large number of services and related charges.

The best way to get information about the estimated cost of your care and available financial assistance is to contact our Patient Financial Services department. Financial assistance is available for uninsured and underinsured individuals who are not eligible for public assistance and cannot afford to pay for their medical care. Contact our certified application counselors to apply, or for more information, at telephone # (508) 941-7919, between 8:00AM and 4:30PM, seven days a week.

The listed charges do not constitute a contract. Charges are effective as of 1/1/2019 and are subject to change. The chargemaster should not be used by patients to estimate what their health care services are going to cost them out of their own pocket. Please note, these charges do not include fees for any professional services, as physician services are billed separately from the Hospital.

South Shore Hospital The information provided in our Pricing Transparency Tool is a comprehensive list of (South Weymouth) standard charges for inpatient and outpatient service(s) or item(s) provided by South Shore Hospital, also known as a Chargemaster. Please note that the charges change frequently and what is listed may not represent your specific out of pocket cost. For more information about the cost of your care or financial assistance, please contact our patient financial services staff at 781-624-4329. If you wish to get an estimate on a specific procedure or service, please enter your information into our Request an Estimate tool. Please note that charges change frequently and what is listed may not represent your exact cost. **Tufts Medical Center** Costs for hospital services and procedures vary among healthcare providers based (Boston) in several factors, including whether they are an academic medical center, a teaching hospital, a community service provider and other factors. Tufts Medical Center and Tufts Children's Hospital provides specific cost estimates for patients. Contact the Financial Coordination office at 617-636-6013 or send a request via email to GM-Tufts MCP at ient Estimate Request @ tufts medical center.org with your question.**Self-Service Price Estimate Tool** This tool provides an estimate of your cost for 300 common hospital services and procedures based on insurance coverage or self-pay options. Please note: At this time a self-service estimate for Medicare is not available and not required under the Price Transparency rules. If you wish to obtain an estimate, please email GM-TuftsMCPatientEstimateRequest@tuftsmedicalcenter.org or call 617-636-6013. **UMass Memorial Medical Federal Price Transparency Requirements** Center (Worcester) For Patients: If you are looking for an estimate of costs of an item or service, please use our Price Estimator Tool or contact one of our Financial Counselors at 508-334-9300. The following information is provided as required by the federal Price Transparency Rule, but it should not be relied upon for purposes of predicting the actual cost of care for the reasons described below. The intent of price transparency is to provide information to help patients make decisions about the cost of their health care. Starting January 1, 2021, the federal government requires each hospital operating in the United States to provide clear, accessible pricing information online about the items and services they provide in two specific ways: 1. A list of shoppable services or a price estimator tool 2. A comprehensive, machine-readable file of all "Standard Charges" for items and services they provide, and the rates negotiated with every insurance company it contracts with and self-pay

Appendix B: Hospital Phone Numbers to Contact for Pricing Information

Please note that this table reflects information available online as of August 3, 2022.

HOSPITALS	Phone number to call for pricing info
Boston Children's Hospital (Boston)	617-355-7201
Brigham and Women's Hospital (Boston)	617-726-3884
Carney Hospital (Dorchester)	888-334-1771
Cooley Dickinson Hospital (Northampton)	617-726-3884
Emerson Hospital (Concord)	978-287-3432
Falmouth Hospital (Falmouth)	774-470-5436
Holyoke Medical Center (Holyoke)	413-534-2871
Lahey Hospital and Medical Center (Burlington)	781-744-8779
Massachusetts General Hospital (Boston)	617-726-3884
MetroWest Medical Center (Framingham)	833-850-5052
Morton Hospital and Medical Center (Taunton)	888-334-1771
Mount Auburn Hospital (Cambridge)	617-655-6849
New England Baptist Hospital (Boston)	617-754-5974
Newton-Wellesley Hospital (Newton)	617-726-3884
Saint Vincent Hospital (Worcester)	833-850-5052
Signature Healthcare Brockton Hospital (Brockton)	800-485-2539
South Shore Hospital (South Weymouth)	781-624-3424
Tufts Medical Center (Boston)	617-636-6013
UMass Memorial Medical Center (Worcester)	508-334-9300

Endnotes

- 1 For example, see Maine Statute, Title 22, §1718-B Consumer information regarding health care entity prices (2013). Code of Virginia, § 32.1-137.05 (effective until July 1, 2023) Information regarding standard charges; advance estimate of patient payment amount for elective procedure, test, or service (2016). New Hampshire Statutes, Ch. 420-G Portability, Availability and Renewability of Health Coverage, Section 420-G: 11 Disclosure (2010).
- 2 Ch. 224 of the Acts of 2012, An Act Improving the Quality of Health Care and Reducing Costs Through Increased Transparency, Efficiency and Innovation, Commonwealth of Massachusetts.
- 3 Ibid., Section 36.
- 4 Ibid., Section 155.
- 5 See https://pioneerinstitute.org/news/survey-consumers-want-healthcare-price-information-but-few-realize-its-available/
 (2020), https://pioneerinstitute.org/pioneer-research/health-care/wildly-varying-mri-prices-at-massachusetts-hospitals-why-we-need-access-to-healthcare-prices-at-all-levels/ (2019), https://pioneerinstitute.org/featured/ma-health-insurers-have-made-good-progress-in-price-transparency-but-significant-work-remains/
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 (2015).
- 6 https://pioneerinstitute.org/pioneer-research/health-care/massachusetts-consumer-healthcare-price-transparency-survey/(p. 10, 2019).
- 7 Ibid., p. 6.
- 8 "Transparency in health care prices calls for state action," opinion by Barbara Anthony and Sarah Idelson, Massachusetts Lawyers Weekly, December 14, 2015.
- 9 H.R. 3029, 117th Cong. (2021) (enacted).
- 10 H.R. 3590, 111th Cong. (2010) (enacted).
- 11 H.R. 3463, 116th Congress (2019) (enacted).
- 12 45 C.F.R. (2021) (enacted).
- 13 45 C.F.R. §180.60 (2021) (enacted).
- 14 45 C.F.R. §180.50 (2021) (enacted).

- 15 45 C.F.R. Subpart C (2021) (enacted).
- 16 "Only 14% of Hospitals Met Transparency Rule Compliance," Victoria Bailey, RevCycleIntelligence, February 14, 2022. See also "INVESTIGATION: Hospitals Ignoring Price Transparency Rule Rack Up Billion-Dollar Profits," Adam Andrzejewski, OpenTheBooks Substack, April 28, 2022.
- 17 "INVESTIGATION: Hospitals Ignoring Price Transparency Rule Rack Up Billion-Dollar Profits," Adam Andrzejewski, OpenTheBooks Substack, April 28, 2022.
- 18 "CMS Fines Two Hospitals for Price Transparency Noncompliance; Warnings Went Unheeded," Nina Youngstorm, COSMOS, June 13, 2022.
- 19 "Hospitals Must Now Post Prices. But It May Take a Brain Surgeon to Decipher Them," New York Times, Robert Pear, January 13, 2019.
- 20 Center for Health Information and Analysis. Massachusetts Acute Hospital Profiles, Center for Health Information and Analysis, accessed July 20, 2022. Web.
- 21 See Appendix A: Language Presenting Pricing Information on Hospital Website.
- 22 See Appendix B: Hospital Phone Numbers to Contact for Pricing Information.
- 23 The CMS Frequently Asked Questions webpage (page 16) defines the chargemaster as "a list of itemized items and services," a comprehensive list of items related to patient care that could produce a charge (procedures, services, drugs, supplies/devices/products).
- 24 The CMS law (45 CFR 180.20) defines a machine-readable format as "a digital representation of data or information in a file that can be imported or read into a computer system for further processing. Examples of machine-readable formats include, but are not limited to, .XML, .JSON and .CSV formats."
- 25 The "standard charges" describe specifically the 5 types of charges enumerated in provision 2 of the 2021 CMS regulations. These 5 standard charges should be displayed for each shoppable service and each item within the chargemaster.
- 26 "MRFs, what are they good for? Why the transparency picture remains opaque," *Advisory Board*, Audrey Glover and Lauren Robinson, August 18, 2021.

About the Authors

Barbara Anthony, lawyer, economist, and public policy expert, is a Senior Fellow in Healthcare at the Pioneer Institute. Since 2016, Ms. Anthony has overseen several Pioneer Institute projects and reports documenting the status of healthcare price transparency in Massachusetts and the nation. She is a former Senior Fellow and Associate at the Harvard Kennedy School's Center for Business and Government where she authored "Beyond Obamacare: Lessons from Massachusetts," Suffolk University Law School, Journal of Health & Biomedical Law, 2018. She has served as Massachusetts Undersecretary of Consumer Affairs and Business Regulation, Director of the Northeast Regional Office of the Federal Trade Commission, and as a top deputy in the Massachusetts Attorney General's Office. Ms. Anthony began her career as an Antitrust Trial Attorney at the U.S. Department of Justice. She is a well-known consumer advocate and media commentator on consumer protection and business regulation issues.

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Pioneer Institute develops and communicates dynamic ideas that advance prosperity and a vibrant civic life in Massachusetts and beyond.

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Success for Pioneer is when the citizens of our state and nation prosper and our society thrives because we enjoy world-class options in education, healthcare, transportation and economic opportunity, and when our government is limited, accountable and transparent.

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