

## S 764

Patients' Right to Know Act of 2013

**Congress:** 113 (2013–2015, Ended)

**Chamber:** Senate

**Policy Area:** Health

**Introduced:** Apr 18, 2013

**Current Status:** Read twice and referred to the Committee on Health, Education, Labor, and Pensions. (text of measure

**Latest Action:** Read twice and referred to the Committee on Health, Education, Labor, and Pensions. (text of measure as introduced: CR S2799-2800) (Apr 18, 2013)

**Official Text:** <https://www.congress.gov/bill/113th-congress/senate-bill/764>

### Sponsor

**Name:** Sen. Cornyn, John [R-TX]

**Party:** Republican • **State:** TX • **Chamber:** Senate

### Cosponsors (1 total)

Cosponsor	Party / State	Role	Date Joined
Sen. Coburn, Tom [R-OK]	R · OK		May 14, 2013

### Committee Activity

Committee	Chamber	Activity	Date
Health, Education, Labor, and Pensions Committee	Senate	Referred To	Apr 18, 2013

### Subjects & Policy Tags

#### Policy Area:

Health

### Related Bills

Bill	Relationship	Last Action
113 HR 1205	Related bill	<b>Mar 15, 2013:</b> Referred to the Subcommittee on Health.

Patients Right to Know Act of 2013 - Amends the Public Health Service Act to require health plans to disclose in writing to consumers: (1) the annual fee on health insurance providers under the Patient Protection and Affordable Care Act, (2) the annual fees imposed on health insurance policies, (3) required contributions by health plans to the reinsurance program, (4) user fees on health plans participating in health insurance exchanges, (5) payments by health plans whose costs are lower than the target amount (premiums collected minus administrative costs), and (6) charges assessed by states on health plans whose enrollees have a lower actuarial risk than the average actuarial risk of all enrollees in a state. Allows such costs to be calculated separately for individual, small group, or large group markets.

Requires the Comptroller General (GAO) to study the methods of calculating the impact on average premium costs associated with: (1) guaranteed issuance of coverage and community rated premiums, (2) limitations on age rating, (3) required coverage of preventive services, and (4) the requirement that plans cover at least 60% of the actuarial value of essential health benefits.

Requires Secretary of Health and Human Services (HHS) to make the disclosures under this Act and the GAO study available to the general public through an Internet website.

### **Actions Timeline**

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