

Hospital pricing, prior authorization bills gain momentum

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Senators on Thursday signaled there's movement on a bipartisan hospital price transparency bill as momentum builds around a priority of both Congress and the White House.

Sens. Roger Marshall, R-Kan., and John Hickenlooper, D-Colo., asked that their bill (S 2355) be brought before the Senate Health, Education, Labor and Pensions Committee. It would require hospitals and insurers to be up-front with patients about the costs they're responsible for.

"Stakeholders have been heard, the text is ready, and I ask this committee to make this a priority," Marshall said at a hearing of the committee.

Their bill, dubbed the "Patients Deserve Price Tags Act," mandates that machine-readable files of rates and cash prices negotiated between plans and providers be used in making prices public. It would also require hospitals to post prices for a slate of 300 services and provide patients explanation of benefits statements.

The senators say that the bill will make it easier for Americans to make health care decisions and could lead to savings for Medicare and Medicaid if it spurs providers to lower costs.

HELP Chairman Bill Cassidy, R-La., said committee staff is still coordinating with the agencies involved in the bill, but added that "there's a lot of support for this."

The comments came during the HELP panel's "Member Day" hearing, which allows any senator the opportunity to pitch priorities to the committee.

The hearing offered clues into Republican legislative priorities for health care ahead of the midterm elections as they try to maintain their "trifecta" control of the House, Senate and the White House.

'Like a duck'

Price transparency is a part of President Donald Trump's health care plan, a set of goals that includes requiring health insurers to publish rate and coverage comparisons up front, and for providers who accept Medicaid or Medicare to post their prices and fees.

In a hallway interview last week, Hickenlooper said he was hopeful that White House backing on the issue could spur more bipartisan support and talked up the potential effects.

“That bill’s a little bit like a duck,” Hickenlooper said. “You don’t see its legs moving, but under the surface the legs are paddling away.”

At the hearing, Marshall spoke separately about a bill he sponsors (S 1816) that seeks to reform the prior authorization process in Medicare Advantage, the private alternative to traditional Medicare coverage. He said that the bill has enough votes to pass and that he may seek unanimous consent for a vote on the floor.

Prior authorization requires health care providers to get approval from health plans before they can provide care under the plan’s coverage. The process is meant to control costs and keep plans from paying for medically unnecessary treatments.

But there are concerns that the process is too burdensome and keeps patients from accessing the care they need when they need it.

Marshall’s bill would establish an electronic prior authorization system for Medicare Advantage to streamline the process. It would clarify the Health and Human Services Department’s authority to establish time frames for the electronic prior authorization requests. And it would require HHS to report to Congress on what efforts could further improve the process.