CHILDREN'S HOSPITAL ASSOCIATION

June 9, 2026

Children's Hospital Association Statement for the Record U.S. House Energy and Commerce Subcommittee on Health: "Lowering Health Care Costs for All Americans: Examining Policies to Increase Health Care Transparency"

The Children's Hospital Association (CHA) is the nation's leading advocate for children's health, uniting children's hospitals to improve care and amplify impact. On behalf of the more than 200 children's hospitals and the millions of children and families we serve, we appreciate the Committee's focus on policies to increase health care transparency. Children's hospitals support efforts to help families better understand their expected health care costs, as well as policies that reflect the unique realities of pediatric care and provide families with information that is clear, accurate, and truly actionable.

When it comes to health care, children are not little adults. As the Committee considers a range of transparency proposals, we urge members to ensure these policies work for children and families and do not inadvertently undermine access to specialized pediatric care. We encourage the Committee to focus on the following principles:

- Transparency requirements should provide meaningful and understandable information for patients and families.
- New federal requirements should align with existing federal and state transparency frameworks.
- Transparency policies should avoid unnecessary administrative and financial burden and avoid diverting resources from pediatric patient care.

Price Transparency Policies Must Work for Pediatric Patients and Families

Children's hospitals support efforts to give families better information about the cost of care, but those policies must provide information that is understandable, relevant, and useful in real-world decision-making. Families are often best served by patient-specific price estimator tools that reflect insurance coverage, benefits, and eligibility for financial assistance, rather than by machine-readable files, negotiated rate data, or standardized pricing spreadsheets. That is especially true in pediatrics, where children may be covered by Medicaid or the Children's Health Insurance Program (CHIP), have multiple forms of coverage, or experience retroactive eligibility changes that affect final financial responsibility. Publicly posted rates often do not reflect what families will ultimately owe, and many pediatric services are too specialized, low-volume, or clinically variable to fit neatly within standardized shoppable service lists designed for adult care. **Children's hospitals have invested significant resources in developing consumer-friendly tools that provide families with more meaningful information about expected out-of-pocket costs, and policymakers should preserve flexibility for hospitals to continue using approaches that reflect the highly specialized, multidisciplinary, and variable nature of pediatric care.**

Children's hospitals also have concerns about transparency proposals that include new billing and disclosure timelines without accounting for how pediatric coverage and financial responsibility are often determined after services are delivered. In pediatric care, retroactive Medicaid eligibility, charity care determinations, and changes in coverage status can all affect what a family ultimately owes. Requirements to provide detailed bills or cost information within fixed timeframes could increase the risk that families receive incomplete or misleading information unless the policy is carefully tailored to these realities.

Transparency Policies Should Safeguard Resources for Patient Care

Children's hospitals have made substantial efforts to implement and comply with existing state and federal transparency requirements, adapt to evolving Centers for Medicare & Medicaid Services

regulations, and build consumer-facing tools to help families better understand their costs. As Congress considers additional proposals, it should ensure that new requirements add meaningful value for patients and families and are designed to work alongside existing transparency efforts.

CHA is particularly concerned about more prescriptive transparency proposals, including the *Patients Deserve Price Tags Act* and the *Lower Costs, More Transparency Act*, which would impose new reporting, disclosure, and attestation requirements on hospitals. We oppose provisions that would require monthly reporting updates and additional administrative requirements, such as executive attestations and rigid reporting standards, that will impose significant administrative and staffing burden on children's hospitals without providing meaningful value to patients and families. Finance experts at children's hospitals report that monthly updates would be particularly burdensome given the complexity of hospital pricing data, the need for extensive validation and quality assurance processes, and the coordination required across internal systems and third-party vendors. Existing transparency requirements already require significant staff time, technical resources, clinical validation, and vendor support. Requiring hospitals to update and revalidate large volumes of pricing information every month would divert scarce resources away from patient care while providing limited additional benefit to families seeking to understand their expected out-of-pocket costs. CHA is also concerned that executive attestation requirements and rigid compliance standards could limit flexibility for tools that are frequently used by families, such as cost estimator tools. In addition, proposals requiring hospitals to physically post lists of shoppable services and discounted cash prices will be difficult to maintain and could create confusion for patients and families navigating care. Furthermore, CHA is concerned that federal and state transparency requirements are not always aligned, creating overlapping or inconsistent expectations for hospitals. As policymakers consider additional legislation, they should prioritize a cohesive framework that enables hospitals to focus resources on helping families understand their costs, not navigating unnecessary administrative complexity.

While this hearing is focused on health care transparency, CHA also encourages the Committee to consider these proposals in the broader context of the financial and operational pressures facing children's hospitals. Children's hospitals continue to face significant workforce shortages, growing demand for highly specialized pediatric services, and reductions in Medicaid funding, which remains the largest payer of pediatric care. At the same time, Congress continues to consider policies affecting hospital outpatient departments (HOPDs) and provider-based care. Children's hospitals strongly support preserving appropriate reimbursement for HOPDs, which play a critical role in delivering specialized pediatric services in communities and expanding access to care for children with complex medical needs. Pediatric HOPDs provide unique and comprehensive services that are often unavailable in independent physician offices or standalone primary care clinics, including access to pediatric subspecialists, multidisciplinary care teams, and specialized pediatric equipment and services such as diagnostics and onsite pharmacies. Policymakers should carefully evaluate proposals that could undermine these sites of care or reduce resources available to support pediatric patients and their families.

As Congress evaluates strategies to promote affordability in health care, including transparency proposals and other policy changes, we encourage the Committee to carefully consider the cumulative impact of these policies on children's hospitals' ability to sustain access to specialized pediatric care and continue serving children and families in their communities.