

Legislative History

- 2012 Chapter 869 (SB 1196, Hernandez) - Prohibits any health plan contract or health insurance policy issued, amended, or renewed on or after January 1, 2013, between a health plan and a provider, including a provider of supplies, from containing any provision that prohibit, condition, or in any way restrict the disclosure of claims data related to health care services provided to enrollees, insureds, or beneficiaries of any self-funded health coverage arrangement to a Centers for Medicare and Medicaid Services-qualified entities. *CalPERS Position: Support.*
- 2011 Chapter 244 (SB 751, Gaines) – Prohibits contracts between licensed health care facilities and health plans or insurers from including nondisclosure clauses that restrict the release of information on the cost of medical procedures and quality of care to members of the plan or insurer. The bill would require a plan or insurer to annually provide a hospital or facility the opportunity to review and validate data provided to subscribers or enrollees of the plan or to policyholders or insureds of the insurer. *CalPERS Position: Support.*
- 2009 SB 196 (Corbett) – Would have prohibited a contract between a health care provider and a health plan from containing a provision that restricts the ability of the health plan to furnish information on the cost of procedures or quality of care to plan enrollees. The bill was amended to address a different subject. *CalPERS Position: Support.*
- 2008 SB 1300 (Corbett) – Would have prohibited a contract between a health care provider and carriers from containing a provision that restricts the ability of the health carrier to disclose information on the cost of procedures or health care quality information to health carrier enrollees. The Senate failed to concur in Assembly amendments. *CalPERS Position: Support, if Amended.*