



## SUMMARY: 2024 State Legislative Session Wrap Up

Voters across party lines and demographics consistently rank the high cost of health care as one of their top issues with the health care system that they want lawmakers to address. Three-in-four voters rate the cost of health care in the United States as only “fair” or “poor.” Inflation and the affordability of health care are top of mind in the upcoming 2024 elections, with people seeking action from policymakers to lower out-of-pocket health care costs.

Throughout 2024 legislative sessions, state and federal policymakers and advocates pushed targeted reforms to lower health care costs by expanding affordability, increasing hospital accountability and price transparency in billing, and improving health care coverage.

### Key Trends from 2024 State Legislative Session Health Policy Reforms

1. States Are Advancing Policies to Promote Hospital Accountability
2. States Are Protecting and Expanding Access to Health Care Coverage
3. State Are Improving Health Care Affordability for People Through Innovation

Promoting Hospital Accountability	Regulating Facility Fees: <u>16 states</u> considered legislation to ban or limit facility fee charges by hospitals and health systems and protect people from unnecessary expenses.
	Hospital Consolidation: <u>11 states</u> advanced policies representing a wide range of approaches to address health system and hospital consolidation. Some states strengthened review and oversight authority of health care industry transactions as a means to protect people from the negative impacts of consolidation.
	Nonprofit Hospital Community Benefits: <u>10 states</u> considered legislation to address hospital community benefit spending, with solutions ranging from requiring hospitals to provide financial assistance provided to specific patient populations, to regulating the types of activities hospitals can count towards their community benefit activities.
	Medical Debt: <u>26 states</u> considered legislation relating to medical debt, including proposals to restrict wage garnishment for medical debts, cap medical debt payment plans, and ban medical debt from being included in credit reports.
Expanding Access to Coverage	Maternal Health Care: <u>22 states</u> sought to improve maternal health by passing policies that reduce racial disparities that disproportionately harm Black women and pregnant people. States also improved coverage stability for pregnant people through Medicaid postpartum coverage extension, leaving just one state having not adopted the extension.
	No-Cost Preventive Services Protections: <u>8 states</u> considered legislation to codify no-cost coverage of all or some USPSTF-recommended “A” and “B” rated services into state law. No-cost preventive services are one of the most popular aspects of health care coverage and are scientifically proven to improve health outcomes and lower costs.
	Health Coverage for Immigrant Populations: <u>5 states</u> considered programs to expand access to health care for immigrant populations such as creating state-funded public insurance “lookalike” programs or state-funded premium subsidy programs.

**State-Based Coverage Solutions:** 9 states pursued flexible policies like public options and Medicaid buy-ins to meet the coverage needs of their residents. These policies draw on the strength of a state's purchasing power to bring more dependable coverage to people by negotiating fair payment rates from insurance companies or providers, establishing better provider networks, addressing health equity, and/or using existing state infrastructure.

**Ground Ambulance Surprise Billing Protections:** 5 states considered legislation to regulate ground ambulance billing closing a major gap in surprise billing protections which leave many people on the hook for high balance bills not covered by their insurance.

**Cost Containment Solutions:** 9 states advanced policy solutions to contain health care costs, including implementing reference-based pricing for certain providers and setting or reviewing cost growth targets.

For a more in-depth summary of state action on each of these, refer to [Report Appendix A](#).

## Federal Policymakers Looking to Building on State Policy Successes in 2025

We expect state and federal elected officials to continue to escalate attention on hospitals and providers to take meaningful action on reforms that lower health care prices for all. In 2024, federal lawmakers supported reforms towards increased transparency and lowering health costs.

- ★ Congress has been considering bipartisan legislation, like H.R. 5378, the House-passed *Lower Costs, More Transparency Act*, legislation that would lower health care costs by enacting site-neutral payment reforms and establish new hospital billing transparency and accountability measures.
- ★ Through the Centers for Medicare & Medicaid Services (CMS), the Biden Administration has continued to build on hospital price transparency reforms to make data more accurate and readable so patients and providers are able to understand the true cost of services.

In 2025, we expect state and federal lawmakers to continue advancing policies that focus on affordability, accountability, coverage, and innovation, while also driving specific reform efforts by:

- ★ Improving Rural Health Care Access
- ★ Improving the Primary Care Delivery through Innovative Care and Payment Reform
- ★ Regulation Artificial Intelligence Across Sectors Including Health Care

**2025 Outlook:** We can expect that state and federal lawmakers in 2025 will work to implement people-centered reforms to build a better health care system and lower costs including by driving tougher hospital accountability measures and reforming dishonest hospital billing practices. As primary care workforce shortages continue to be a persistent problem across states, federal regulators will look to states to support federal initiatives around accountable care and innovative care models to increase investment in primary care while lowering health care costs for the system at large. As CMS continues to pilot new equity-focused and patient-first centered models, states will be responsible for enacting these reforms and ensuring people benefit from lower health care costs and more comprehensive care.

## About United States of Care

United States of Care (USofCare) is a non-partisan non-profit working to ensure everyone has access to quality, affordable health care regardless of health status, social need, or income. By putting the needs of people at the forefront of our research and policy solutions, we can create a health care system that works for people.