

INSIGHTS

Summary of Select
Health Care Bills
from House
Energy and
Commerce
Committee Markup

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On July 20-21, 2026, the House Energy and Commerce Committee [held](#) a markup that included several pieces of legislation related to Medicare Advantage, health care price transparency, and illicit drugs. The Improving Seniors' Timely Access to Care Act, along with several other bills, were incorporated by an amendment into the larger Lower Costs, More Transparency Act. All the bills passed unanimously, except for the Prices on the Wall Act. Democratic members of the Committee opposed this bill because of concerns that the bill's requirements would cause confusion for patients and deter them from seeking care. You can see a list of select bills included in the markup below, along with any notable discussion and the vote tallies.

OPENING STATEMENTS

- [Chairman Brett Guthrie \(R-KY-2\)](#)
- [Ranking Member Frank Pallone \(D-NJ-6\)](#)

SELECT LEGISLATION INCLUDED IN THE MARKUP

[H.R. 2004](#), Tyler's Law (Reps. Ted Lieu (D-CA-36) and Robert Latta (R-OH-5)), to direct the Secretary of Health and Human Services to issue guidance on whether hospital emergency departments should implement fentanyl testing as a routine procedure for patients experiencing an overdose.

- The bill passed out of Committee by a vote of 46-0

[H.R. 9390](#), the Prices on the Wall Act (Rep. Mariannette Miller-Meeks (R-IA-2)), to require hospitals, ambulatory surgical centers, and labs to post the discounted cash price in dollar amount on the wall for each service they provide.

- Ranking Member Pallone stated that while he supports price transparency, he has strong concerns that implementation of the bill will be impractical, will cause more confusion for patients, and will deter patients from seeking care. Ranking Member Pallone highlighted H.R. 9393, the Lower Costs, More Transparency Act, as a more useful approach to price transparency.
- The bill passed out of Committee by a vote of 24-21, along party lines, with Republicans voting for the bill and Democrats voting against it.

[H.R. 9393](#), the Lower Costs, More Transparency Act of 2026 (Reps. Guthrie (R-KY-2) and Pallone (D-NJ-6)), to require hospitals, surgical centers, labs, and imaging providers to post prices and require health plans to disclose negotiated rates, cost-sharing estimates, and pharmacy benefit manager (PBM) spread pricing.

- Chairman Guthrie offered an [amendment](#), which was adopted by voice vote, to include the following legislation as part of this bill:
 - [H.R. 9397](#), the Premium Transparency Act (Reps. August Pfluger (R-TX-11) and Nathaniel Moran (R-TX-1)), to ensure health insurer accountability through publishing of overhead costs and claim payments.
 - [H.R. 9396](#), the Prior Authorization Accountability Act (Rep. Craig Goldman (R-TX-12)), to require insurers to display which services were subject to prior authorization, the percentage of requests approved or denied, and the average amount of time between the request submission and determination.
 - [H.R. 3514](#), Improving Seniors' Timely Access to Care Act of 2025 (Reps. Mike Kelly (R-PA-16) and Suzan DelBene (D-WA-1)), to require plans to establish, and evaluate the implementation of, an electronic prior authorization.
 - [H.R. 9392](#), the Medicare Advantage Cost Transparency Act (Reps. Diana DeGette (D-CO-1) and John Joyce (R-PA-13)), to require the inclusion of certain information in Medicare Advantage encounter data.
 - [H.R. 5243](#), to require each Medicare Advantage plan to submit eligibility for supplemental benefits, types of benefit categories offered, and data on utilization of and payments for such benefits (Rep. Jennifer McClellan (D-VA-4)).
- The amendment pushed back dates for certain provisions within these bills. For example, the amendment changed the Improving Seniors' Timely Access to Care Act so the prior authorization requirements would be in effect for any applicable item or service during a plan year beginning on or after January 1, 2029, instead of January 1, 2028, for the electronic prior authorization program and January 1, 2027, for the transparency requirements.
- Rep. Jake Auchincloss (D-MA-4) spoke of the amendment but requested that the Committee consider more pharmacy benefit manager (PBM) reforms.
- Rep. John James (R-MI-10) offered an amendment to include [H.R. 5582](#), the Patients Deserve Price Tags Act, as he believes that would improve price transparency for consumers more than H.R. 9393. However, the amendment was withdrawn.
- The Lower Costs, More Transparency Act, as amended by Chairman Guthrie, was passed out of Committee by a vote of 45-0.

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