

1 STATE OF OKLAHOMA

2 1st Session of the 59th Legislature (2023)

3 COMMITTEE SUBSTITUTE

4 FOR

5 HOUSE BILL NO. 1890

By: Schreiber

6  
7 COMMITTEE SUBSTITUTE

8 An Act relating to medical price transparency;  
9 amending 63 O.S. 2021, Section 1-725.3, which relates  
10 to health care provider price transparency; creating  
11 penalties; providing for the allocation of penalties;  
12 amending 63 O.S. 2021, Section 1-725.4, which relates  
13 to health care facility price transparency; creating  
14 penalties; providing for the allocation of penalties;  
15 and providing an effective date.

16 BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

17 SECTION 1. AMENDATORY 63 O.S. 2021, Section 1-725.3, is  
18 amended to read as follows:

19 Section 1-725.3 A. A health care provider shall make available  
20 to the public, in a single document, either electronically or by  
21 posting conspicuously on the provider's website if one exists, the  
22 health care prices for at least the twenty most common health care  
23 services the health care provider provides. If the health care  
24 provider, in the normal course of his or her practice, regularly  
provides fewer than twenty health care services, the health care

1 provider shall make available the health care prices for the health  
2 care services the provider most commonly provides.

3 B. The health care provider shall identify the services by:

4 1. A Current Procedural Terminology code or other coding system  
5 commonly used by the health care provider and accepted as a national  
6 standard for billing; and

7 2. A plain English description.

8 C. The health care provider shall update the document as  
9 frequently as the health care provider deems appropriate, but at  
10 least annually.

11 D. On or after the effective date of this act, a health care  
12 provider who is not in material compliance with Section 2718(e) of  
13 the Public Health Service Act, P.L. 78-410, as amended, and rules  
14 adopted by the United States Department of Health and Human Services  
15 implementing Section 2718(e), with respect to "items of services" or  
16 "items or services" as defined in 45 CFR 180.20, on the date that  
17 items or services are purchased from or provided to a patient by the  
18 health care provider, shall not initiate or pursue a collection  
19 action against the patient or patient guarantor for a debt owed for  
20 the items or services.

21 E. If a patient can demonstrate that a health care provider was  
22 not in material compliance with state laws, on a date on or after  
23 the effective date of this act, that items or services were  
24 purchased by or provided to the patient, and the health care

1 provider takes collection action against the patient or patient  
2 guarantor, the patient or patient guarantor may file suit to  
3 determine if the health care provider was materially out of  
4 compliance with the Transparency in Health Care Prices Act, Section  
5 1-725.1 et seq. of this title, on the date of service, and the  
6 noncompliance is related to the items or services. The health care  
7 provider shall not take collection action against the patient or  
8 patient guarantor while the lawsuit is pending.

9 F. A health care provider who has been found by a judge or  
10 jury, considering compliance standards issued by the Centers for  
11 Medicare and Medicaid Services, to be materially out of compliance  
12 with the Transparency in Health Care Prices Act, Section 1-725.1 et  
13 seq. of this title:

14 1. Shall refund the payer any amount of the debt the payer has  
15 paid and shall pay a penalty to the patient or patient guarantor in  
16 an amount equal to the total amount of the debt;

17 2. Shall dismiss or cause to be dismissed any court action with  
18 prejudice and pay any attorney fees and costs incurred by the  
19 patient or patient guarantor relating to the action; and

20 3. Shall remove or cause to be removed from the patient's or  
21 patient guarantor's credit report any report made to a consumer  
22 reporting agency relating to the debt.

23 G. Nothing in this section shall:  
24

1        1. Prohibit a health care provider from billing a patient,  
2 patient guarantor, or third-party payer, including a health insurer,  
3 for items or services provided to the patient; and

4        2. Require a health care provider to refund any payment made to  
5 the health care provider for items or services provided to the  
6 patient, so long as no collection action is taken in violation of  
7 this section.

8        SECTION 2.        AMENDATORY        63 O.S. 2021, Section 1-725.4, is  
9 amended to read as follows:

10        Section 1-725.4 A. A health care facility shall make available  
11 to the public, in a single document, either electronically or by  
12 posting conspicuously on its website if one exists, the health care  
13 prices for at least:

14        1. The twenty most used diagnosis-related group codes or other  
15 codes for inpatient health care services per specialty service line  
16 used by the health care facility for billing; and

17        2. The twenty most used outpatient CPT codes or health care  
18 services procedure codes per specialty service line used for  
19 billing.

20        B. A health care facility shall include with the health care  
21 prices provided pursuant to subsection A of this section a plain  
22 English description of the services for which the health care prices  
23 are provided.

24

1 C. The health care facility shall update the document as  
2 frequently as it deems appropriate, but at least annually.

3 D. On or after the effective date of this act, a health care  
4 facility that is not in material compliance with the Transparency in  
5 Health Care Prices Act, Section 1-725.1 et seq. of this title, on  
6 the date that items or services are purchased by or provided to a  
7 patient by the health care facility, shall not initiate or pursue a  
8 collection action against the patient or patient guarantor for a  
9 debt owed for the items or services.

10 E. If a patient can demonstrate that a health care facility was  
11 not in material compliance with federal laws, on or after the  
12 effective date of this act, that items or services were purchased by  
13 or provided to the patient, and the health care facility takes  
14 collection action against the patient or patient guarantor, the  
15 patient or patient guarantor may file suit to determine if the  
16 health care facility was materially out of compliance with Section  
17 2718(e) of the Public Health Service Act, P.L. 78-410, as amended,  
18 and rules adopted by the United States Department of Health and  
19 Human Services implementing Section 2718(e), with respect to "items  
20 of services" or "items or services" as defined in 45 CFR 180.20, on  
21 the date of service, and the noncompliance is related to the items  
22 or services. The health care facility shall not take collection  
23 action against the patient or patient guarantor while the lawsuit is  
24 pending.

1 F. A health care facility that has been found by a judge or  
2 jury, considering compliance standards issued by the Centers for  
3 Medicare and Medicaid Services, to be materially out of compliance  
4 with the Transparency in Health Care Prices Act, Section 1-725.1 et  
5 seq. of this title:

6 1. Shall refund the payer any amount of the debt the payer has  
7 paid and shall pay a penalty to the patient or patient guarantor in  
8 an amount equal to the total amount of the debt;

9 2. Shall dismiss or cause to be dismissed any court action with  
10 prejudice and pay any attorney fees and costs incurred by the  
11 patient or patient guarantor relating to the action; and

12 3. Shall remove or cause to be removed from the patient's or  
13 patient guarantor's credit report any report made to a consumer  
14 reporting agency relating to the debt.

15 G. Nothing in this section shall:

16 1. Prohibit a health care facility from billing a patient,  
17 patient guarantor, or third-party payer, including a health insurer,  
18 for items or services provided to the patient; and

19 2. Require a health care facility to refund any payment made to  
20 the health care facility for items or services provided to the  
21 patient, so long as no collection action is taken in violation of  
22 this section.

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24

SECTION 3. This act shall become effective November 1, 2023.

59-1-7897 TJ 03/02/23