

STATE OF OKLAHOMA

2nd Session of the 54th Legislature (2014)

HOUSE BILL 3045

By: Roberts (Sean)

AS INTRODUCED

An Act relating to public health and safety; creating the Health Care Price Disclosure Act; defining terms; requiring health care professional and health care facility to make available certain pricing information to the public; providing health care facility is not required to report prices to nor receive approval from the State Department of Health; providing for codification; and providing an effective date.

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

SECTION 1. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 1-725 of Title 63, unless there is created a duplication in numbering, reads as follows:

This act shall be known and may be cited as the "Health Care Price Disclosure Act".

SECTION 2. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 1-725.1 of Title 63, unless there is created a duplication in numbering, reads as follows:

As used in the Health Care Price Disclosure Act:

1. "Direct-pay price" means the price that will be charged for a lawful health care service if the service is paid without a public or private third party, not including an employer, paying for any portion of the service;

2. "Health care professional" means a physician licensed by the State Board of Medical Licensure and Supervision; and

3. "Health care facility" means an entity licensed pursuant to Section 1-702 of Title 63 of the Oklahoma Statutes.

SECTION 3. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 1-725.2 of Title 63, unless there is created a duplication in numbering, reads as follows:

A. A health care professional shall make available to the public on request in a single document the direct-pay price for at least the twenty-five most common services for the health care professional. The services may be identified by a common procedural terminology code or by a plain English description. The document must be updated at least annually. The direct-pay price is for the standard diagnosis for the service and does not include any complications or exceptional treatment.

B. A health care facility shall make available to the public on request in a single document the direct-pay price for at least the fifty most used diagnosis-related group codes, if applicable, for the facility and at least the fifty most used outpatient service codes, if applicable, for the facility. The document must be

updated at least annually. The direct-pay price is for the standard diagnosis for the service and does not include any complications or exceptional treatment.

C. A health care facility is not required to report the direct-pay prices to the State Department of Health for review or filing as a prerequisite to operation. This section does not authorize the Department to approve, disapprove, or limit a health care facility's direct-pay price for services.

SECTION 4. This act shall become effective November 1, 2014.

54-2-9326            AM            01/06/14