## STATE OF OKLAHOMA

2nd Session of the 57th Legislature (2020)

AS INTRODUCED

An Act relating to health insurance; prohibiting certain healthcare entities from reporting certain

debt to credit bureaus; providing exception to prohibition; specifying what is included in total

cost of healthcare services; requiring certain information on billing documents; establishing

defining term; providing for codification; and

violation of act as grounds for dismissal of and affirmative defense to certain legal proceedings;

SENATE BILL 1646 By: Daniels

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

providing an effective date.

SECTION 1. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 6980 of Title 36, unless there is created a duplication in numbering, reads as follows:

A. No medical service or care entity, nor their agent, shall report a healthcare expense debt to a credit bureau or pursue collection activities or any other adverse financial action, except if the entity or agent can demonstrate that the person liable for the medical debt was presented with and agreed to the total cost of all healthcare services to be provided prior to agreeing to receive the services.

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1 1. The total cost shall include all services performed by the

2 medical service or care entity and its staff, as well as any

3 authorized services provided by a contractor, affiliate or any other

4 third party who provided services in the facility, and the total

5 cost to be billed shall include out-of-network providers.

- 2. The total cost of service shall be presented to the patient separately from all other forms, information and paperwork. It shall be written in a readable font, plain language and shall be prominently and conspicuously displayed on the first page of the document in which it is contained.
- B. In no event shall any medical service or care entity, nor their agent, report a healthcare expense debt to a credit bureau or pursue collection activities or any other adverse financial action for healthcare services provided due to complications from the services originally intended or rendered.
- C. Failure to comply with the provisions of this act shall be grounds for dismissal of any collection suit or garnishment proceeding and may be asserted as an affirmative defense to any such action.
- D. For purposes of this section, "medical service or care entity" shall include, but not be limited to, a medical care corporation, health care corporation, hospital service association, medical service corporation, health care maintenance organization,

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1	not-for-profit hospital, insurer, insurance company or any other
2	third-party payer of medical expenses.
3	SECTION 2. This act shall become effective November 1, 2020.
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