

**SENATE CHAMBER**  
**STATE OF OKLAHOMA**

DISPOSITION

FLOOR AMENDMENT

No. \_\_\_\_\_

\_\_\_\_\_

COMMITTEE AMENDMENT

\_\_\_\_\_

(Date)

Mr./Madame President:

I move to amend Senate Bill No. 548, by substituting the attached floor substitute for the title, enacting clause and entire body of the measure.

Submitted by:

\_\_\_\_\_  
Senator Daniels

Daniels-NP-FS-Req#1968  
3/9/2021 9:47 AM

(Floor Amendments Only) Date and Time Filed: \_\_\_\_\_

Untimely

Amendment Cycle Extended

Secondary Amendment

1 STATE OF OKLAHOMA

2 1st Session of the 58th Legislature (2021)

3 FLOOR SUBSTITUTE  
4 FOR

5 SENATE BILL NO. 548

By: Daniels, Newhouse, David,  
Bergstrom, Bullard, Jett  
and Hamilton of the Senate

6 and

7 Townley of the House

8  
9  
10 FLOOR SUBSTITUTE

11 [ healthcare expenses - debt to credit bureaus -  
12 codification - effective date ]

13  
14 BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

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

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

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.

6           2. The total cost of service shall be presented to the  
7 individual liable for the medical debt separately from all other  
8 forms, information and paperwork. It shall be written in a readable  
9 font, plain language and shall be prominently and conspicuously  
10 displayed on the first page of the document in which it is  
11 contained.

12           B. 1. In cases in which the patient must receive emergency  
13 care deemed necessary by the health care provider and the individual  
14 liable for the medical debt is not able to receive a good faith  
15 estimate of healthcare services before vital emergency medical  
16 services are rendered, no medical service or health care entity  
17 shall charge the person liable for the medical debt who is not a  
18 member of a health benefit plan offered by a health carrier, more  
19 than one hundred sixty-five percent (165%) of the Medicare rate.

20           2. In cases in which the patient must receive emergency care as  
21 deemed necessary by the health care provider and the individual who  
22 is liable for the medical debt is an enrollee of a health benefit  
23 plan offered by a health carrier, the medical service provider or  
24 health care entity providers shall not charge more than the

1 enrollee's health benefit plan's in-network rate for the emergency  
2 services rendered.

3 C. Failure to comply with the provisions of this act shall be  
4 grounds for dismissal of any collection suit or garnishment  
5 proceeding and may be asserted as an affirmative defense to any such  
6 action.

7 D. For purposes of this section, "medical service or care  
8 entity" shall include, but not be limited to, a medical care  
9 corporation, health care corporation, hospital service association,  
10 medical service corporation, health care maintenance organization,  
11 not-for-profit hospital, insurer, insurance company or any other  
12 third-party payer of medical expenses.

13 SECTION 2. This act shall become effective November 1, 2021.

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15 58-1-1968 NP 3/9/2021 9:47:34 AM

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