

COMMITTEE AMENDMENT
HOUSE OF REPRESENTATIVES
State of Oklahoma

SPEAKER:

CHAIR:

I move to amend HB1890 _____
Of the printed Bill
Page _____ Section _____ Lines _____
Of the Engrossed Bill

By striking the Title, the Enacting Clause, the entire bill, and by inserting in lieu thereof the following language:

AMEND TITLE TO CONFORM TO AMENDMENTS

Adopted: _____

Amendment submitted by: Suzanne Schreiber

Reading Clerk

1 STATE OF OKLAHOMA

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

3 PROPOSED COMMITTEE
4 SUBSTITUTE
5 FOR
6 HOUSE BILL NO. 1890

By: Schreiber

7 PROPOSED 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 believes that a health care provider was not in
22 material compliance with state laws, on a date on or after the
23 effective date of this act, that items or services were purchased by
24 or provided to the patient, and the health care provider takes

1 collection action against the patient or patient guarantor, the
2 patient or patient guarantor may file suit to determine if the
3 health care provider was materially out of compliance with the
4 Transparency in Health Care Prices Act, Section 1-725.1 et seq. of
5 this title, on the date of service, and the noncompliance is related
6 to the items or services. The health care provider shall not take
7 collection action against the patient or patient guarantor while the
8 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 believes that a health care facility was not in
11 material compliance with federal laws, on or after the effective
12 date of this act, that items or services were purchased by or
13 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.

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

59-1-7700 TJ 02/27/23