1	STATE OF OKLAHOMA
2	1st Session of the 58th Legislature (2021)
3	COMMITTEE SUBSTITUTE
4	FOR SENATE BILL 548 By: Daniels
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7	COMMITTEE SUBSTITUTE
8	An Act relating to healthcare expenses; prohibiting
9	certain healthcare entities from reporting certain debt to credit bureaus; providing exception to
LO	prohibition; specifying what is included in total cost of healthcare services; requiring certain
L1	information on billing documents; setting maximum limit on certain charges under certain condition;
L2	establishing violation of act as grounds for dismissal of and affirmative defense to certain legal
L3	proceedings; defining term; providing for codification; and providing an effective date.
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L 5	
L 6	BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:
L 7	SECTION 1. NEW LAW A new section of law to be codified
L 8	in the Oklahoma Statutes as Section 6980 of Title 36, unless there
L 9	is created a duplication in numbering, reads as follows:
20	A. No medical service or care entity, nor their agent, shall
21	report a healthcare expense debt to a credit bureau or pursue
22	collection activities or any other adverse financial action, except
23	if the entity or agent can demonstrate that the person liable for

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the medical debt was presented with and agreed to a good faith

estimate of the total cost of all healthcare services to be provided prior to agreeing to receive the services.

- 1. The total cost shall include all services performed by the medical service or care entity and its staff, as well as any authorized services provided by a contractor, affiliate or any other third party who provided services in the facility, and the total 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 cases in which the patient must receive emergency care and is not able to receive a good faith estimate of healthcare services before vital emergency medical services are rendered, no medical service or health care entity shall charge the person liable for the medical debt more than one hundred fifty percent (150%) of the Medicare rates for the emergency services 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

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corporation, health care corporation, hospital service association,
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    medical service corporation, health care maintenance organization,
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    not-for-profit hospital, insurer, insurance company or any other
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    third-party payer of medical expenses.
        SECTION 2. This act shall become effective November 1, 2021.
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