

**A-Engrossed**  
**House Bill 3088**

Ordered by the House May 8  
Including House Amendments dated May 8

Sponsored by COMMITTEE ON HEALTH CARE

**SUMMARY**

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure.

Prohibits hospitals from billing to or attempting to collect from uninsured patients charges that exceed either Medicare rate or rate paid by hospital's highest volume commercial insurer. Allows patient to claim treble damages and attorney fees if hospital bills or attempts to collect charges in violation of Act.

*[Requires Office for Oregon Health Policy and Research to establish standards for hospital cost efficiency and performance. Requires office to set total margin based upon standards. Imposes annual charge upon hospital in amount that earnings exceed allowable margin.]*

*[Establishes Excess Revenue Fund. Continuously appropriates moneys in fund to Office for Oregon Health Policy and Research and Department of Human Services for purposes of Act and of providing Oregon Health Plan standard medical assistance.]*

Takes effect on 91st day following adjournment sine die.

**A BILL FOR AN ACT**

1  
2 Relating to hospitals; creating new provisions; amending ORS 442.400, 442.405 and 442.460; and pre-  
3 scribing an effective date.

4 **Be It Enacted by the People of the State of Oregon:**

5 **SECTION 1. Sections 2 to 5 of this 2007 Act are added to and made a part of ORS chapter**  
6 **441.**

7 **SECTION 2. As used in sections 2, 3, 4 and 5 of this 2007 Act:**

8 (1) "Health benefit plan" has the meaning given that term in ORS 743.730.

9 (2) "Hospital" has the meaning given that term in ORS 442.015, exclusive of special in-  
10 patient care and inpatient psychiatric facilities operated by the state.

11 (3) "Uninsured" means not enrolled in any public or private health benefit plan.

12 **SECTION 3. A hospital may not charge to or attempt to collect from an uninsured pa-**  
13 **tient an amount for a service in excess of the amount paid to the hospital for the same**  
14 **service by Medicare or the hospital's highest volume insurer. A hospital must choose one**  
15 **payor scale for charges to all uninsured patients.**

16 **SECTION 4. (1) A hospital shall provide patients with a written notice explaining the**  
17 **hospital's policy for charges to uninsured patients and providing contact information for a**  
18 **hospital employee or office from which a person may obtain a copy of and further informa-**  
19 **tion about the policy. The hospital also shall provide notice to patients who receive emer-**  
20 **gency or outpatient care and who may be billed for that care, but who were not admitted to**  
21 **the hospital. The notice shall be provided in English and in languages other than English as**  
22 **required by state and federal law.**

23 (2) The hospital shall post notices of the hospital's policy on charges to uninsured pa-

**NOTE:** Matter in **boldfaced** type in an amended section is new; matter *[italic and bracketed]* is existing law to be omitted.  
New sections are in **boldfaced** type.

1 **tients in conspicuous locations that are visible to the public including, but not limited to:**

- 2 **(a) Emergency departments;**
- 3 **(b) Billing offices;**
- 4 **(c) Admitting offices; and**
- 5 **(d) Patient waiting areas in outpatient care settings.**

6 **SECTION 5. (1) If a hospital initiates an action for collection in violation of section 3 of**  
7 **this 2007 Act, the patient or the patient’s representative or estate may maintain an action**  
8 **in any court of general equitable jurisdiction of this state, to prevent, restrain or enjoin the**  
9 **violation or threatened violation. If in such action, a violation or threatened violation of**  
10 **section 3 of this 2007 Act is established, the court shall enjoin and restrain or otherwise**  
11 **prohibit such violation or threatened violation, and the plaintiff in the action is entitled to**  
12 **recover treble the amount of damages that the patient incurred. Damages shall be the**  
13 **amount by which the hospital charge exceeded the amount allowed under section 3 of this**  
14 **2007 Act. The court may award reasonable attorney fees to the prevailing plaintiff in an**  
15 **action under this section.**

16 **(2) Actions brought under this section shall be commenced within four years from the**  
17 **date of the first billing.**

18 **SECTION 6. ORS 442.400 is amended to read:**

19 442.400. As used in ORS 442.400 to 442.463, unless the context requires otherwise[,]:

20 **(1) “Health care facility” or “facility” means [such] a health care facility as defined by ORS**  
21 **442.015, exclusive of a long term care facility, and includes all publicly and privately owned and**  
22 **operated health care facilities, but does not include facilities described in ORS 441.065.**

23 **(2) “Hospital” has the meaning given that term in ORS 442.015, exclusive of special in-**  
24 **patient care and inpatient psychiatric facilities operated by the state.**

25 **SECTION 7. ORS 442.405 is amended to read:**

26 442.405. The Legislative Assembly finds that rising costs and charges of health care facilities  
27 are a matter of vital concern to the people of this state. The Legislative Assembly finds and declares  
28 that it is the policy of this state:

29 **(1) To require health care facilities to file for public disclosure reports that will enable both**  
30 **private and public purchasers of services from such facilities to make informed decisions in pur-**  
31 **chasing such services; [and]**

32 **(2) To encourage development of programs of research and innovation in the methods of delivery**  
33 **of institutional health care services of high quality with costs and charges reasonably related to the**  
34 **nature and quality of the services rendered[.]; and**

35 **(3) To endeavor to improve access to health care for all Oregonians and ensure that**  
36 **health care resources are equitably distributed among all populations.**

37 **SECTION 8. ORS 442.460 is amended to read:**

38 442.460. In order to obtain regional or statewide data about the utilization and cost of health  
39 care services, the Office for Oregon Health Policy and Research may accept information relating to  
40 the **quality**, utilization, [and] cost **and cost efficiency** of health care services identified by the  
41 Administrator of the Office for Oregon Health Policy and Research from physicians, insurers or  
42 other third-party payers or employers or other purchasers of health care.

43 **SECTION 9. This 2007 Act takes effect on the 91st day after the date on which the reg-**  
44 **ular session of the Seventy-fourth Legislative Assembly adjourns sine die.**