House Bill 3344

Sponsored by Representative SOLLMAN; Representatives EVANS, GREENLICK, PRUSAK, SALINAS, SCHOUTEN, WILLIAMS, ZIKA (at the request of Kelly Prince)

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 as introduced.

Requires health care providers to include CPT codes in bills sent to consumers and insurers. Requires insurers to include CPT codes in explanation of benefit notices.

A BILL FOR AN ACT

Relating to health care provider billing; creating new provisions; and amending ORS 676.310 and 688.135.

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

SECTION 1. (1) As used in this section:

(a) “CPT code” means a Current Procedural Terminology code for a service or supply as published and maintained by the American Medical Association.

(b) “Health care facility” has the meaning given that term in ORS 442.015.

(c) “Health care professional” means a person licensed, certified or registered in this state to provide a service or supply that has an applicable CPT code.

(2) If a health care facility or other health care professional bills using a CPT code, the health care facility or health care professional shall itemize on a bill sent to an insurer or to a consumer the CPT codes that are billed.

(3) A consumer may file a complaint with the applicable licensing agency or board alleging a violation of this section.

SECTION 2. Section 3 of this 2019 Act is added to and made a part of the Insurance Code.

SECTION 3. (1) As used in this section:

(a) “CPT code” means a Current Procedural Terminology code for a service or supply as published and maintained by the American Medical Association.

(b) “Health benefit plan” has the meaning given that term in ORS 743B.005.

(c) “Health care facility” has the meaning given that term in ORS 442.015.

(d) “Health care professional” means a person licensed, certified or registered in this state to provide a service or supply that has an applicable CPT code.

(2) If a health care facility or other health care professional submits a claim for reimbursement of the cost of a service covered by a health benefit plan using a CPT code, the insurer shall include the CPT code in the explanation of benefits notice sent to the enrollee regarding the service.

SECTION 4. ORS 676.310 is amended to read:

676.310. (1) Any person authorized by law to order laboratory testing may charge a reasonable fee for all laboratory and other specialized testing performed by the practitioner or by a person in the practitioner’s employ. In addition, the practitioner is entitled to charge a reasonable fee for

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.

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collecting and preparing specimens to be sent to independent persons or laboratories for testing, and for the preparation of the billing to the patient for the test. However, a practitioner shall not mark up, or charge a commission or make a profit on services rendered by an independent person or laboratory.

(2)(a) A practitioner shall prepare an itemized billing, indicating the charges for each service rendered to the patient and the CPT code, if used for billing. Any services rendered to the patient that were performed by persons other than those in the direct employ of the practitioner and the charges therefor, and the CPT code, if used for billing shall be indicated separately on the patient’s bill.

(b) As used in this subsection, “CPT code” has the meaning given that term in section 1 of this 2019 Act.

(3) Failure to comply with the requirements of this section shall be considered to be unprofessional conduct and may be subject to disciplinary action by the appropriate licensing board.

(4) As used in this section, “practitioner” means a person licensed to practice medicine, dentistry, naturopathic medicine or chiropractic or to be a nurse practitioner.

SECTION 5. ORS 688.135 is amended to read:

688.135. (1) A physical therapist licensed under ORS 688.010 to 688.201 shall:

(a) Be responsible for managing all aspects of the physical therapy care of each patient.

(b) Ensure the qualifications of all physical therapist assistants and physical therapist aides working under the direction and supervision of the physical therapist.

(c) Provide for each patient the therapeutic intervention that requires the expertise of a physical therapist and determine and supervise the use of physical therapist assistants or physical therapist aides to provide care that is safe, effective and efficient.

(2) Responsibility for patient care management shall include accurate documentation and billing of the physical therapy services provided, including compliance with section 1 of this 2019 Act. Information relating to the physical therapist-patient relationship is confidential and a physical therapist shall comply with the laws and rules governing the use and disclosure of a patient’s protected health information as provided in ORS 192.553 to 192.581.

(3) Each physical therapist shall display a copy of the physical therapist’s license or current renewal verification in a location accessible to public view at the physical therapist’s place of practice or employment.

(4) A physical therapist may purchase, store and administer topical and aerosol medications as part of the practice of physical therapy as defined in ORS 688.010. A physical therapist shall comply with any rules adopted by the State Board of Pharmacy specifying protocols for storage of medications.

(5) A physical therapist shall adhere to the standards of ethics recognized by the physical therapy profession as further established by a nationally recognized professional organization of physical therapists and as further adopted by the board.

(6) A physical therapist shall disclose to a patient any direct financial interest in products that the physical therapist endorses and recommends to the patient at the time of such endorsement or recommendation. The disclosure shall be documented in the patient’s record.

(7) A physical therapist may provide compensable services to an injured worker only as authorized by ORS 656.250.

(8) Nothing in ORS 688.010 to 688.201 shall prohibit a physical therapist licensed under ORS 688.010 to 688.201 from accepting a referral from a veterinarian licensed under ORS chapter 686.
The referral must be in writing and specify the treatment or therapy to be provided, pursuant to ORS 686.040 (4). A physical therapist practicing under this subsection shall be held to the standard of care for veterinarians set forth in ORS chapter 686.

(9) Unless state or federal laws relating to confidentiality or the protection of health information prohibit disclosure, a physical therapist who has reasonable cause to believe that a licensee of another board has engaged in prohibited conduct as defined in ORS 676.150 shall report the prohibited conduct in the manner provided in ORS 676.150.