

Senate Bill 539

Sponsored by Senator PATTERSON, Representatives MANNIX, BOWMAN; Senator GORSEK, Representatives SOSA, WALTERS (Pre-session filed.)

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**. The statement includes a measure digest written in compliance with applicable readability standards.

Digest: Makes a hospital or health system report to the OHA on facility fees that are charged or billed for certain patient visits. Requires that patients be given a notice on facility fees that may be charged or billed. (Flesch Readability Score: 62.8).

Requires a hospital or the hospital's health system to report annually to the Oregon Health Authority certain information regarding facility fees that are charged or billed for patient visits at the hospital's or health system's hospital-based facilities.

Requires a hospital or the hospital's health system that charges a facility fee for a patient visit to provide a person notice of the facility fee. Requires a billing statement that includes a facility fee to include certain information.

Permits a hospital or the hospital's health system to charge, bill or collect a facility fee only for services provided on campus or at a facility that includes an emergency department. Prohibits a hospital or the hospital's health system from charging, billing or collecting a facility fee for certain services. Punishes an action to collect or an attempt to collect a facility fee that is not permitted under the Act as an unlawful collection practice.

Permits the Oregon Health Authority to impose a civil penalty for certain violations of the Act.

A BILL FOR AN ACT

1
2 Relating to fees charged for services provided in hospital-based facilities; creating new provisions;
3 and amending ORS 442.015, 442.994 and 646.639.

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

5 **SECTION 1. Sections 2 to 4 of this 2025 Act are added to and made a part of ORS chapter**
6 **442.**

7 **SECTION 2. (1) A hospital licensed in this state or the hospital's health system shall re-**
8 **port annually to the Oregon Health Authority, in the form and manner prescribed by the**
9 **authority, the name and location of each hospital-based facility, or facility owned or operated**
10 **by the hospital or the hospital's health system, that provides services for which a facility fee**
11 **is charged or billed, and, for the prior calendar year, the following information:**

12 (a) **For each facility:**

13 (A) **The number of patient visits at the facility;**

14 (B) **The number, total amount and range of facility fees paid by Medicare, Medicaid and**
15 **insurers to the facility;**

16 (C) **The number, total amount and range of facility fees paid by patients who are insured**
17 **as cost-sharing obligations, and by patients who pay the facility fee out-of-pocket; and**

18 (D) **The amount of revenue from facility fees received by the hospital or the hospital's**
19 **health system from the facility; and**

20 (b) **For the hospital or the hospital's health system:**

21 (A) **The total amount of revenue from facility fees received by the hospital or the**
22 **hospital's health system;**

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 (B) A description of the 10 services performed or provided that generated the greatest
2 amount of revenue from facility fees and the total amount of facility fees received for each
3 of the services; and

4 (C) The top 10 services performed or provided, for which facility fees are charged, based
5 on patient volume.

6 (2) The authority shall post the information reported under subsection (1) of this section
7 on its website in a location that is easily accessible by the public.

8 **SECTION 3. (1) As used in this section and sections 2 and 4 of this 2025 Act:**

9 (a) "Campus" means:

10 (A) The physical area immediately adjacent to a hospital's main buildings and other areas
11 and structures that are not strictly contiguous to the main buildings but are located within
12 250 yards of the main buildings; or

13 (B) Any other area that has been determined on an individual case basis by the Centers
14 for Medicare and Medicaid Services to be part of a hospital's campus.

15 (b) "Facility fee" means any fee charged or billed by a hospital or the hospital's health
16 system for outpatient hospital services provided at a hospital-based facility that is:

17 (A) Intended to compensate the hospital or health system for the operational expenses
18 of the hospital or health system; and

19 (B) Separate and distinct from a professional fee.

20 (c) "Hospital-based facility" means a facility that is owned or operated, in whole or in
21 part, by a hospital or the hospital's health system and where hospital or health services are
22 provided.

23 (d) "Professional fee" means any fee charged or billed by a provider for health services
24 provided at a hospital-based facility.

25 (2) If a hospital licensed in this state or the hospital's health system charges a facility
26 fee for a patient visit at a hospital-based facility that is located on or off of the hospital's
27 campus, the hospital or health system shall provide notice of the facility fee:

28 (a) To a person at the time that the person schedules an appointment with the hospital-
29 based facility;

30 (b) In writing, to a person at the time that the person arrives at the hospital-based fa-
31 cility for an appointment; and

32 (c) In writing, to a person who receives emergency health services at the hospital-based
33 facility, as soon as practicable after the person is stabilized, or to a representative of the
34 person as soon as practicable after the person is stabilized if the person is unable to rea-
35 sonably read and understand the notice.

36 (3) A notice provided under subsection (2) of this section must include the following in-
37 formation, in plain language and in a manner that may be understood by a person who does
38 not possess special knowledge regarding hospital or health system facility fees:

39 (a) An explanation that the hospital-based facility charges a facility fee that is in addition
40 to and separate from the professional fee charged by providers at the hospital-based facility;

41 (b)(A) The amount of the person's potential financial liability for any facility fee likely
42 to be charged; or

43 (B) If the exact type and extent of the health services to be provided are not known or
44 the terms of a person's health insurance coverage are not known with reasonable certainty,
45 an estimate of the person's financial liability for any facility fee likely to be charged, based

1 on typical or average facility fees charged at the hospital-based facility;

2 (c) An explanation that the person may incur financial liability that is greater than the
 3 person would incur if the health services were provided at a facility that was not a
 4 hospital-based facility; and

5 (d) Notice of the person’s right to request a reduction in the facility fee and instructions
 6 for the person on how to request a reduction.

7 (4) A billing statement from a hospital, health system or hospital-based facility that in-
 8 cludes a charge for a facility fee must clearly identify and itemize the fee as a facility fee
 9 that is billed in addition to, or separately from, any professional fee that is billed.

10 **SECTION 4.** (1) A hospital or the hospital’s health system may not charge, bill or collect
 11 a facility fee except for health services that are provided:

12 (a) At a facility that is located on the hospital’s campus; or

13 (b) At a hospital-based facility of the hospital that includes an emergency department.

14 (2) Notwithstanding subsection (1) of this section, a hospital or the hospital’s health
 15 system may not charge, bill or collect a facility fee for services billed using a for services
 16 billed using the American Medical Association’s Current Procedural Terminology code for
 17 “evaluation and management” or “assessment and management” or a similar code.

18 (3) A person that collects or attempts to collect a facility fee that may not be charged,
 19 billed or collected under this section is subject to ORS 646.639.

20 **SECTION 5.** Notwithstanding section 4 of this 2025 Act, if a hospital or the hospital’s
 21 health system has a contract with an insurer that is in effect on the date this 2025 Act takes
 22 effect, and that requires reimbursement for facility fees prohibited by section 4 of this 2025
 23 Act, the hospital or the hospital’s health system may continue to collect reimbursement
 24 from the insurer for the facility fees until the expiration or renewal of the contract.

25 **SECTION 6.** ORS 442.015 is amended to read:

26 442.015. As used in ORS chapter 441 and this chapter, unless the context requires otherwise:

27 (1) “Acquire” or “acquisition” means obtaining equipment, supplies, components or facilities by
 28 any means, including purchase, capital or operating lease, rental or donation, for the purpose of
 29 using such equipment, supplies, components or facilities to provide health services in Oregon. When
 30 equipment or other materials are obtained outside of this state, acquisition is considered to occur
 31 when the equipment or other materials begin to be used in Oregon for the provision of health ser-
 32 vices or when such services are offered for use in Oregon.

33 (2) “Affected persons” has the same meaning as given to “party” in ORS 183.310.

34 (3)(a) “Ambulatory surgical center” means a facility or portion of a facility that operates ex-
 35 clusively for the purpose of providing surgical services to patients who do not require
 36 hospitalization and for whom the expected duration of services does not exceed 24 hours following
 37 admission.

38 (b) “Ambulatory surgical center” does not mean:

39 (A) Individual or group practice offices of private physicians or dentists that do not contain a
 40 distinct area used for outpatient surgical treatment on a regular and organized basis, or that only
 41 provide surgery routinely provided in a physician’s or dentist’s office using local anesthesia or
 42 conscious sedation; or

43 (B) A portion of a licensed hospital designated for outpatient surgical treatment.

44 (4) “Delegated credentialing agreement” means a written agreement between an originating-site
 45 hospital and a distant-site hospital that provides that the medical staff of the originating-site hospi-

1 tal will rely upon the credentialing and privileging decisions of the distant-site hospital in making
 2 recommendations to the governing body of the originating-site hospital as to whether to credential
 3 a telemedicine provider, practicing at the distant-site hospital either as an employee or under con-
 4 tract, to provide telemedicine services to patients in the originating-site hospital.

5 (5) “Develop” means to undertake those activities that on their completion will result in the
 6 offer of a new institutional health service or the incurring of a financial obligation, as defined under
 7 applicable state law, in relation to the offering of such a health service.

8 (6) “Distant-site hospital” means the hospital where a telemedicine provider, at the time the
 9 telemedicine provider is providing telemedicine services, is practicing as an employee or under
 10 contract.

11 (7) “Expenditure” or “capital expenditure” means the actual expenditure, an obligation to an
 12 expenditure, lease or similar arrangement in lieu of an expenditure, and the reasonable value of a
 13 donation or grant in lieu of an expenditure but not including any interest thereon.

14 (8) “Extended stay center” means a facility licensed in accordance with ORS 441.026.

15 (9) “Freestanding birthing center” means a facility licensed for the primary purpose of per-
 16 forming low risk deliveries.

17 (10) “Governmental unit” means the state, or any county, municipality or other political subdi-
 18 vision, or any related department, division, board or other agency.

19 (11) “Gross revenue” means the sum of daily hospital service charges, ambulatory service
 20 charges, ancillary service charges and other operating revenue. “Gross revenue” does not include
 21 contributions, donations, legacies or bequests made to a hospital without restriction by the donors.

22 (12)(a) “Health care facility” means:

23 (A) A hospital;

24 (B) A long term care facility;

25 (C) An ambulatory surgical center;

26 (D) A freestanding birthing center;

27 (E) An outpatient renal dialysis facility; or

28 (F) An extended stay center.

29 (b) “Health care facility” does not mean:

30 (A) A residential facility licensed by the Department of Human Services or the Oregon Health
 31 Authority under ORS 443.415;

32 (B) An establishment furnishing primarily domiciliary care as described in ORS 443.205;

33 (C) A residential facility licensed or approved under the rules of the Department of Corrections;

34 (D) Facilities established by ORS 430.335 for treatment of substance abuse disorders; or

35 (E) Community mental health programs or community developmental disabilities programs es-
 36 tablished under ORS 430.620.

37 (13) “Health maintenance organization” or “HMO” means a public organization or a private
 38 organization organized under the laws of any state that:

39 (a) Is a qualified HMO under section 1310(d) of the U.S. Public Health Services Act; or

40 (b)(A) Provides or otherwise makes available to enrolled participants health care services, in-
 41 cluding at least the following basic health care services:

42 (i) Usual physician services;

43 (ii) Hospitalization;

44 (iii) Laboratory;

45 (iv) X-ray;

1 (v) Emergency and preventive services; and

2 (vi) Out-of-area coverage;

3 (B) Is compensated, except for copayments, for the provision of the basic health care services
4 listed in subparagraph (A) of this paragraph to enrolled participants on a predetermined periodic
5 rate basis; and

6 (C) Provides physicians' services primarily directly through physicians who are either employees
7 or partners of such organization, or through arrangements with individual physicians or one or more
8 groups of physicians organized on a group practice or individual practice basis.

9 (14) "Health services" means clinically related diagnostic, treatment or rehabilitative services,
10 and includes alcohol, drug or controlled substance abuse and mental health services that may be
11 provided either directly or indirectly on an inpatient or ambulatory patient basis.

12 **(15) "Health system" means:**

13 **(a) A parent corporation of one or more hospitals and any entity affiliated with the par-**
14 **ent corporation through ownership, governance, control or membership; or**

15 **(b) A hospital and any entity affiliated with the hospital through ownership, governance,**
16 **control or membership.**

17 [(15)] **(16)** "Hospital" means:

18 (a) A facility with an organized medical staff and a permanent building that is capable of pro-
19 viding 24-hour inpatient care to two or more individuals who have an illness or injury and that
20 provides at least the following health services:

21 (A) Medical;

22 (B) Nursing;

23 (C) Laboratory;

24 (D) Pharmacy; and

25 (E) Dietary; or

26 (b) A special inpatient care facility as that term is defined by the authority by rule.

27 [(16)] **(17)** "Institutional health services" means health services provided in or through health
28 care facilities and the entities in or through which such services are provided.

29 [(17)] **(18)** "Intermediate care facility" means a facility that provides, on a regular basis,
30 health-related care and services to individuals who do not require the degree of care and treatment
31 that a hospital or skilled nursing facility is designed to provide, but who because of their mental
32 or physical condition require care and services above the level of room and board that can be made
33 available to them only through institutional facilities.

34 [(18)(a)] **(19)(a)** "Long term care facility" means a permanent facility with inpatient beds, pro-
35 viding:

36 (A) Medical services, including nursing services but excluding surgical procedures except as
37 may be permitted by the rules of the Director of Human Services; and

38 (B) Treatment for two or more unrelated patients.

39 (b) "Long term care facility" includes skilled nursing facilities and intermediate care facilities
40 but does not include facilities licensed and operated pursuant to ORS 443.400 to 443.455.

41 [(19)] **(20)** "New hospital" means:

42 (a) A facility that did not offer hospital services on a regular basis within its service area within
43 the prior 12-month period and is initiating or proposing to initiate such services; or

44 (b) Any replacement of an existing hospital that involves a substantial increase or change in the
45 services offered.

1 [(20)] (21) “New skilled nursing or intermediate care service or facility” means a service or fa-
 2 cility that did not offer long term care services on a regular basis by or through the facility within
 3 the prior 12-month period and is initiating or proposing to initiate such services. “New skilled
 4 nursing or intermediate care service or facility” also includes the rebuilding of a long term care
 5 facility, the relocation of buildings that are a part of a long term care facility, the relocation of long
 6 term care beds from one facility to another or an increase in the number of beds of more than 10
 7 or 10 percent of the bed capacity, whichever is the lesser, within a two-year period.

8 [(21)] (22) “Offer” means that the health care facility holds itself out as capable of providing,
 9 or as having the means for the provision of, specified health services.

10 [(22)] (23) “Originating-site hospital” means a hospital in which a patient is located while re-
 11 ceiving telemedicine services.

12 [(23)] (24) “Outpatient renal dialysis facility” means a facility that provides renal dialysis ser-
 13 vices directly to outpatients.

14 [(24)] (25) “Person” means an individual, a trust or estate, a partnership, a corporation (includ-
 15 ing associations, joint stock companies and insurance companies), a state, or a political subdivision
 16 or instrumentality, including a municipal corporation, of a state.

17 [(25)] (26) “Skilled nursing facility” means a facility or a distinct part of a facility, that is pri-
 18 marily engaged in providing to inpatients skilled nursing care and related services for patients who
 19 require medical or nursing care, or an institution that provides rehabilitation services for the re-
 20 habilitation of individuals who are injured or sick or who have disabilities.

21 [(26)] (27) “Telemedicine” means the provision of health services to patients by physicians and
 22 health care practitioners from a distance using electronic communications, including synchronous
 23 technologies to facilitate an exchange of information between a patient and physician or health care
 24 practitioner in real time or asynchronous technologies to facilitate an exchange of information be-
 25 tween a patient and a physician or health care practitioner in other than real time.

26 **SECTION 7.** ORS 442.994 is amended to read:

27 442.994. (1) Any health care facility **or health system** that fails to perform as required in ORS
 28 442.602 and 442.400 to 442.463 or 442.855 **or section 2 or 3 of this 2025 Act**[, and] **or** rules of the
 29 Oregon Health Authority may be subject to a civil penalty.

30 (2) The Oregon Health Authority shall adopt a schedule of penalties not to exceed \$500 per day
 31 of violation, determined by the severity of the violation.

32 (3) Civil penalties under this section shall be imposed as provided in ORS 183.745.

33 (4) Civil penalties imposed under this section may be remitted or mitigated upon such terms and
 34 conditions as the authority considers proper and consistent with the public health and safety.

35 (5) Civil penalties incurred under any law of this state are not allowable as costs for the purpose
 36 of rate determination or for reimbursement by a third-party payer.

37 **SECTION 8.** ORS 646.639, as amended by section 29, chapter 100, Oregon Laws 2024, is
 38 amended to read:

39 646.639. (1) As used in this section and ORS 646A.670:

40 (a) “Charged-off debt” means a debt that a creditor treats as a loss or expense and not as an
 41 asset.

42 (b) “Consumer” means a natural person who purchases or acquires property, services or credit
 43 for personal, family or household purposes.

44 (c) “Consumer transaction” means a transaction between a consumer and a person that sells,
 45 leases or provides property, services or credit to consumers.

1 (d) "Credit" means a right that a creditor grants to a consumer to defer payment of a debt, to
2 incur a debt and defer payment of the debt, or to purchase or acquire property or services and defer
3 payment for the property or services.

4 (e) "Creditor" means a person that, in the ordinary course of the person's business, engages in
5 consumer transactions that result in a consumer owing a debt to the person.

6 (f) "Debt" means an obligation or alleged obligation that arises out of a consumer transaction.

7 (g)(A) "Debt buyer" means a person that regularly engages in the business of purchasing
8 charged-off debt for the purpose of collecting the charged-off debt or hiring another person to collect
9 or bring legal action to collect the charged-off debt.

10 (B) "Debt buyer" does not include a person that acquires charged-off debt as an incidental part
11 of acquiring a portfolio of debt that is predominantly not charged-off debt.

12 (h) "Debt collector" means a person that by direct or indirect action, conduct or practice col-
13 lects or attempts to collect a debt owed, or alleged to be owed, to a creditor or debt buyer.

14 (i) "Debtor" means a consumer who owes or allegedly owes a debt, including a consumer who
15 owes an amount that differs from the amount that a debt collector attempts to collect or that a debt
16 buyer purchased or attempts to collect.

17 (j) "Legal action" means a lawsuit, mediation, arbitration or any other proceeding in any court,
18 including a small claims court.

19 (k) "Original creditor" means the last entity that extended credit to a consumer to purchase
20 goods or services, to lease goods or as a loan of moneys.

21 (L) "Person" means an individual, corporation, trust, partnership, incorporated or
22 unincorporated association or any other legal entity.

23 (2) A debt collector engages in an unlawful collection practice if the debt collector, while col-
24 lecting or attempting to collect a debt, does any of the following:

25 (a) Uses or threatens to use force or violence to cause physical harm to a debtor or to the
26 debtor's family or property.

27 (b) Threatens arrest or criminal prosecution.

28 (c) Threatens to seize, attach or sell a debtor's property if doing so requires a court order and
29 the debt collector does not disclose that seizing, attaching or selling the debtor's property requires
30 prior court proceedings.

31 (d) Uses profane, obscene or abusive language in communicating with a debtor or the debtor's
32 family.

33 (e) Communicates with a debtor or any member of the debtor's family repeatedly or continuously
34 or at times known to be inconvenient to the debtor or any member of the debtor's family and with
35 intent to harass or annoy the debtor or any member of the debtor's family.

36 (f) Communicates or threatens to communicate with a debtor's employer concerning the nature
37 or existence of the debt.

38 (g) Communicates without a debtor's permission or threatens to communicate with the debtor
39 at the debtor's place of employment if the place of employment is other than the debtor's residence,
40 except that the debt collector may:

41 (A) Write to the debtor at the debtor's place of employment if a home address is not reasonably
42 available and if the envelope does not reveal that the communication is from a debt collector other
43 than the person that provided the goods, services or credit from which the debt arose.

44 (B) Telephone a debtor's place of employment without informing any other person of the nature
45 of the call or identifying the caller as a debt collector but only if the debt collector in good faith

1 has made an unsuccessful attempt to telephone the debtor at the debtor's residence during the day
2 or during the evening between the hours of 6 p.m. and 9 p.m. The debt collector may not contact
3 the debtor at the debtor's place of employment more frequently than once each business week and
4 may not telephone the debtor at the debtor's place of employment if the debtor notifies the debt
5 collector not to telephone at the debtor's place of employment or if the debt collector knows or has
6 reason to know that the debtor's employer prohibits the debtor from receiving such communication.
7 For the purposes of this subparagraph, any language in any agreement, contract or instrument that
8 creates or is evidence of the debt and that purports to authorize telephone calls at the debtor's place
9 of employment does not give permission to the debt collector to call the debtor at the debtor's place
10 of employment.

11 (h) Communicates with a debtor in writing without clearly identifying the name of the debt
12 collector, the name of the person, if any, for whom the debt collector is attempting to collect the
13 debt and the debt collector's business address, on all initial communications. In subsequent commu-
14 nications involving multiple accounts, the debt collector may eliminate the name of the person, if
15 any, for whom the debt collector is attempting to collect the debt and substitute the term
16 "various" in place of the person's name.

17 (i) Communicates with a debtor orally without disclosing to the debtor, within 30 seconds after
18 beginning the communication, the name of the individual who is initiating the communication and
19 the true purpose of the communication.

20 (j) Conceals the true purpose of the communication so as to cause any expense to a debtor in
21 the form of long distance telephone calls, telegram fees, additional charges for wireless communi-
22 cation or other charges the debtor might incur by using a medium of communication.

23 (k) Attempts or threatens to enforce a right or remedy while knowing or having reason to know
24 that the right or remedy does not exist, or threatens to take any action that the debt collector in
25 the regular course of business does not take.

26 (L) Uses any form of communication that simulates legal or judicial process or that appears to
27 be authorized, issued or approved by a governmental agency, governmental official or an attorney
28 at law if the corresponding governmental agency, governmental official or attorney at law has not
29 in fact authorized or approved the communication.

30 (m) Represents that an existing debt may be increased by the addition of attorney fees, investi-
31 gation fees or any other fees or charges if the fees or charges may not legally be added to the ex-
32 isting debt.

33 (n) Collects or attempts to collect, by any means, including through legal action, interest or
34 other charges or fees that exceed the actual debt unless the agreement, contract or instrument that
35 creates the debt expressly authorizes, or a law expressly allows, the interest or other charges or
36 fees. A debt collector may not be held liable in any action brought under this paragraph if the debt
37 collector shows by a preponderance of evidence that the violation was not intentional and resulted
38 from a bona fide error notwithstanding the maintenance of procedures reasonably adapted to avoid
39 any such error. The fact that the debt collector obtains a judgment for less than the amount sought
40 in the complaint, or fails to obtain a judgment at all, does not by itself constitute evidence of a vi-
41 olation of this paragraph.

42 (o) Threatens to assign or sell a debtor's account and misrepresents or implies that the debtor
43 would lose any defense to the debt or would be subjected to harsh, vindictive or abusive collection
44 tactics.

45 (p) Uses the seal or letterhead of a public official or a public agency, as those terms are defined

1 in ORS 171.725.

2 (q) Collects or attempts to collect any debt that the debt collector knows, or after exercising
 3 reasonable diligence would know, arises from medical expenses that qualify for reimbursement under
 4 the Oregon Health Plan or under Medicaid, except that:

5 (A) The debt collector does not engage in an unlawful collection practice if the debt collector
 6 can produce an affidavit or certificate from the original creditor that shows that the original cred-
 7 itor complied with Oregon Health Authority rules barring payments for services that Medicaid fee-
 8 for-service plans or contracted health care plans cover; and

9 (B) For purposes of this paragraph, a prepaid managed care health services organization, a co-
 10 ordinated care organization or a public body, as defined in ORS 174.109, or an agent or assignee of
 11 the organization or public body, is not a debt collector if the organization or public body seeks to
 12 collect a debt that arises under ORS 416.540.

13 **(r) Collects or attempts to collect a debt that the debt collector knows, or after exercis-**
 14 **ing reasonable diligence would know, arises from a facility fee that may not be charged, billed**
 15 **or collected under section 4 of this 2025 Act.**

16 [(r)] (s) Files a legal action to collect or files a legal action to attempt to collect a debt if the
 17 debt collector knows, or after exercising reasonable diligence would know, that an applicable statute
 18 of limitations bars the collection or the collection attempt.

19 [(s)] (t) Collects or attempts to collect or threatens to collect a debt by any means, including
 20 through legal action, if the debt collector knows, or through the exercise of reasonable care should
 21 know, that the debt does not exist or is not owed by the debtor. A debt collector may not be held
 22 liable in any action brought under this paragraph if the debt collector shows by a preponderance
 23 of evidence that the violation was not intentional and resulted from a bona fide error
 24 notwithstanding the maintenance of procedures reasonably adapted to avoid any such error. The fact
 25 that the debt collector obtains a judgment for less than the amount sought in the complaint or fails
 26 to obtain a judgment at all does not by itself establish a violation of this paragraph.

27 [(t)] (u) Collects or attempts to collect a debt if the debt collector is a debt buyer, or is acting
 28 on a debt buyer’s behalf, and collects or attempts to collect purchased debt before providing to a
 29 debtor, within 30 days after the date of the debtor’s request, all of the documents listed in subsection
 30 (4)(b) of this section.

31 [(u)] (v) Collects or attempts to collect a debt without complying with the requirements of ORS
 32 646A.677.

33 (3) A debt collector engages in an unlawful collection practice if the debt collector, by use of
 34 any direct or indirect action, conduct or practice, enforces or attempts to enforce an obligation
 35 made void and unenforceable by the provisions of ORS 759.720 (3) to (5).

36 (4) A debt buyer or debt collector acting on behalf of a debt buyer engages in an unlawful col-
 37 lection practice if the debt buyer or debt collector:

38 (a) Files legal action against a debtor or files legal action to attempt to collect a debt if the debt
 39 buyer or debt collector knows or after exercising reasonable diligence would know that an applica-
 40 ble statute of limitations bars the legal action to collect or the legal action to attempt to collect the
 41 debt;

42 (b) Brings a legal action against a debtor or otherwise brings a legal action to attempt to collect
 43 a debt without possessing business records that satisfy the requirements of ORS 40.460 (6), or of ORS
 44 24.115, if the record is a foreign judgment, that establish the nature and the amount of the debt and
 45 that include:

- 1 (A) The original creditor's name, written as the original creditor used the name in dealings with
2 the debtor;
- 3 (B) The name and address of the debtor;
- 4 (C) The name, address and telephone number of the person that owns the debt and a statement
5 as to whether the person is a debt buyer;
- 6 (D) The last four digits of the original creditor's account number for the debt, if the original
7 creditor's account number for the debt had four or more digits;
- 8 (E) A detailed and itemized statement of:
- 9 (i) The amount the debtor last paid on the debt, if the debtor made a payment, and the date of
10 the payment;
- 11 (ii) The amount and date of the debtor's last payment on the debt before the debtor defaulted
12 or before the debt became charged-off debt;
- 13 (iii) The balance due on the debt on the date on which the debt became charged-off debt;
- 14 (iv) The amount and rate of interest, any fees and any charges that the original creditor im-
15 posed, if the debt buyer or debt collector knows the amount, rate, fee or charge;
- 16 (v) The amount and rate of interest, any fees and any charges that the debt buyer or any pre-
17 vious owner of the debt imposed, if the debt buyer or debt collector knows the amount, rate, fee or
18 charge;
- 19 (vi) The attorney fees the debt buyer or debt collector seeks, if the debt buyer or debt collector
20 expects to recover attorney fees; and
- 21 (vii) Any other fee, cost or charge the debt buyer seeks to recover;
- 22 (F) Evidence that the debt buyer and only the debt buyer owns the debt;
- 23 (G) The date on which the debt buyer purchased the debt; and
- 24 (H) A copy of the agreement between the original creditor and the debtor that is either:
- 25 (i) The contract or other writing the debtor signed that created and is evidence of the original
26 debt; or
- 27 (ii) A copy of the most recent monthly statement that shows a purchase transaction or balance
28 transfer or the debtor's last payment, if the debtor made a payment, if the debt is a credit card debt
29 or other debt for which a contract or other writing that is evidence of the debt does not exist;
- 30 (c) Fails to provide to a debtor, after the debt buyer or debt collector receives payment in cash
31 or the debtor requests the receipt, a receipt that:
- 32 (A) Shows the name of the creditor or creditors for whom the debt buyer or debt collector re-
33 ceived the payment and, if the creditor is not the original creditor, the account number that the
34 original creditor assigned; and
- 35 (B) States clearly whether the debt buyer or debt collector accepts the payment as payment in
36 full or as a full and final compromise of the debt and, if not, the balance remaining on the debt after
37 the payment;
- 38 (d) Collects or attempts to collect a debt before providing, in response to a debtor's request, the
39 documents required under paragraph (b) of this subsection. A debt buyer or a debt collector that
40 acts on the debt buyer's behalf does not engage in an unlawful collection practice under this para-
41 graph if the debt buyer or debt collector collects or attempts to collect a debt after providing the
42 required documents to the debtor; or
- 43 (e) Uses any direct or indirect action, conduct or practice to violate a provision of this section
44 or ORS 646A.670.
- 45 (5) A debt collector is not acting on a debt buyer's behalf, and is not subject to the duties to

1 which a debt buyer is subject under this section and ORS 646A.670, if the debt collector collects or
2 attempts to collect a debt on behalf of an owner that retains a direct interest in the debt or if the
3 debt is not a debt that a debt buyer purchased.

4 **SECTION 9. Sections 3 and 4 of this 2025 Act apply to services provided at a hospital-**
5 **based facility on or after the effective date of this 2025 Act.**

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