As Passed by the Senate

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Sub. S. B. No. 97

Senator Huffman, S.
Cosponsors: Senators Huffman, M., Schuring, Roegner, Gavarone, Maharath, Kunze, Antonio, Blessing, Brenner, Burke, Coley, Craig, Dolan, Eklund, Hackett, Hoagland, Hottinger, Johnson, Lehner, Manning, McColley, Obhof, O'Brien, Peterson, Rulli, Schaffer, Sykes, Thomas, Williams, Wilson, Yuko

A BILL
To amend sections 3727.44 and 3727.45, to enact sections 3727.40, 3727.41, and 3902.32, and to repeal section 5162.80 of the Revised Code regarding the provision of health care cost estimates.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:

Section 1. That sections 3727.44 and 3727.45 be amended and sections 3727.40, 3727.41, and 3902.32 of the Revised Code be enacted to read as follows:

Sec. 3727.40. (A) As used in this section, "health benefit plan" and "health plan issuer" have the same meanings as in section 3922.01 of the Revised Code.

(B) On and after January 1, 2021, and except as provided in division (D) of this section, a hospital shall, on the request of a patient or the patient's representative, provide to that individual a reasonable, good faith estimate of the cost for each health care service that a patient or the patient's
representative has scheduled at least seven days before the service is to be provided. The estimate may be given in writing or verbally. A written estimate may be given in electronic form.

(C)(1) Subject to divisions (C)(2) and (3) of this section, all of the following apply with respect to the components of the estimate required by division (B) of this section:

(a) The estimate shall specify the amount that the patient or party responsible for paying for the patient's care will be required to pay to the hospital for the service.

(b) If applicable, the estimate shall include a notice that the professional services of physicians or other health care providers will be billed separately.

(c) The estimate shall include a disclaimer that the information provided is only an estimate based on facts available at the time the estimate was prepared and that other required health care services could change the estimate.

(d) If known to the hospital at the time the estimate is provided and the patient is insured, the estimate shall include a notification that the hospital or a health care provider who will treat the patient is not included in the network of providers established for purposes of the patient's health benefit plan.

(e) The estimate shall identify the internet web site address where the hospital publishes the list of its standard charges, as required by section 3727.41 of the Revised Code.

(2) The estimate required by division (B) of this section shall be based on information available at the time the estimate is prepared and need not take into account any information that
subsequently arises, such as the provision of unexpected additional health care services.

(3) A hospital may state the estimate required by division (B) of this section as a range of estimated costs rather than a specific dollar amount.

(D) In the case of a patient who is insured, division (B) of this section does not apply if the hospital submits a request to the patient's health plan issuer for the information that is necessary for the hospital to prepare the estimate and the health plan issuer fails to provide that information during the period consisting of the forty-eight hours immediately after the request is submitted to the health plan issuer.

(E) Even if a patient or the patient's representative does not receive the cost estimate required by division (B) of this section before a service is provided, the patient or the party responsible for the cost of the patient's care remains responsible for the cost of the service that is provided.

Sec. 3727.41. A hospital shall publish on its internet web site the list of the hospital's standard charges for items and services provided by the hospital, as that list is established and updated in accordance with section 2718(e) of the "Public Health Service Act," 42 U.S.C. 300gg-18(e). The internet web site address where the list is published shall be made readily available for purposes of public access and inclusion on the cost estimates provided under section 3727.40 of the Revised Code.

Sec. 3727.44. The director of health may adopt rules to carry out the purposes of sections 3727.40, 3727.41, 3727.42, and 3727.43 of the Revised Code. All rules adopted pursuant to
this section shall be adopted in accordance with Chapter 119. of the Revised Code.

Sec. 3727.45. The director of health may apply to the court of common pleas of the county in which a hospital is located for a temporary or permanent injunction restraining the hospital from failure to comply with section 3727.40, 3727.41, or 3727.42 of the Revised Code.

Sec. 3902.32. (A) As used in this section, "health plan issuer" has the same meaning as in section 3922.01 of the Revised Code.

(B) A health plan issuer shall provide to its covered persons and their representatives estimates of the costs of health care services to at least the same extent that the health plan issuer is required to do so under federal law.

(C) The superintendent of insurance shall not take any disciplinary or other enforcement action against a health plan issuer for failure to comply with division (B) of this section.

Section 2. That existing sections 3727.44 and 3727.45 of the Revised Code are hereby repealed.

Section 3. That section 5162.80 of the Revised Code is hereby repealed.