

**As Introduced**

**136th General Assembly**

**Regular Session**

**2025-2026**

**H. B. No. 429**

**Representative Hoops**

---

To amend section 3901.385 of the Revised Code to  
prohibit third-party payers from reducing  
reimbursement to health care providers based on  
certain factors.

1  
2  
3  
4

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

**Section 1.** That section 3901.385 of the Revised Code be  
amended to read as follows:

5  
6

**Sec. 3901.385.** A third-party payer shall not do ~~either~~any  
of the following:

7  
8

(A) Engage in any business practice that unfairly or  
unnecessarily delays the processing of a claim or the payment of  
any amount due for health care services rendered by a provider  
to a beneficiary;

9  
10  
11  
12

(B) Refuse to process or pay within the time periods  
specified in section 3901.381 of the Revised Code a claim  
submitted by a provider on the grounds the beneficiary has not  
been discharged from the hospital or the treatment has not been  
completed, if the submitted claim covers services actually  
rendered and charges actually incurred over at least a thirty-  
day period;

13  
14  
15  
16  
17  
18  
19

(C) Reduce the reimbursement made to a provider for the

20

provision of a covered health care service based on any of the 21  
following: 22

(1) The third-party payer's own description of what is 23  
included in that service outside of the most current CPT code in 24  
effect, as published by the American medical association, the 25  
most current ICD-10 code in effect, as published by the United 26  
States department of health and human services, the most current 27  
CDT code in effect, as published by the American dental 28  
association, or the most current HCPCS code in effect, as 29  
published by the United States centers for medicare and medicaid 30  
services; 31

(2) The third-party payer's own description of what is 32  
included in the diagnosis code submitted on the claim outside of 33  
guidelines established by entities responsible for the code set, 34  
including the centers for disease control and prevention's 35  
national center for health statistics; 36

(3) That the provider billed for additional health 37  
services, including outpatient surgery, on the same date as the 38  
covered service. 39

**Section 2.** That existing section 3901.385 of the Revised 40  
Code is hereby repealed. 41