

A-Engrossed Senate Bill 1060

Ordered by the Senate April 16
Including Senate Amendments dated April 16

Sponsored by Senator CAMPOS, Representative CHOTZEN; Senators JAMA, PATTERSON

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

Digest: Makes a hospital make a public list of standard charges that lists the hospital's regular rates or prices. (Flesch Readability Score: 61.6).

Requires a hospital to establish, update and make public a list of standard charges that lists the regular rates or prices established by the hospital for items or services and shoppable services offered or provided by the hospital. Specifies the information that a list of standard charges must include. [*Requires a hospital to provide each newly created or updated list of standard charges to the Oregon Health Authority.*]

[*Directs the authority to create an electronic form for submitting complaints to the authority. Directs the authority to require a hospital to take immediate or corrective action to remedy any violations.*]

[*Provides for a private right of action if a hospital initiates or pursues a collection action for a debt owed on an item or service if the hospital is not in compliance.*]

[*Provides for civil penalties.*]

A BILL FOR AN ACT

Relating to standard charges established by a hospital.

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

SECTION 1. Definitions. As used in sections 1 to 4 of this 2025 Act:

(1) **"Chargemaster"** means a list maintained by a hospital that contains all items and services for which the hospital has established a standard charge.

(2) **"Deidentified maximum negotiated charge"** means the highest standard charge that a hospital has negotiated with all third-party payers for an item or service.

(3) **"Deidentified minimum negotiated charge"** means the lowest standard charge that a hospital has negotiated with all third-party payers for an item or service.

(4) **"Discounted cash price"** means a standard charge for an item or service that a hospital charges to an individual who pays out of pocket.

(5) **"Gross charge"** means a standard charge for an item or service listed in a hospital's chargemaster, absent any discounts.

(6) **"Item or service"** means an item or service offered or provided by a hospital to a patient in connection with an inpatient admission or outpatient visit.

(7) **"Machine-readable file"** means a digital representation of information in a file that can be easily imported or read into a computer system for further processing without any additional preparation.

(8) **"Payer-specific negotiated charge"** means a standard charge that a hospital has negotiated with a third-party payer for an item or service.

(9) **"Standard charge"** means a regular rate or price established by a hospital for an item

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.

or service provided by the hospital to a specific group of patients.

(10) “Third-party payer” means an entity that is, by statute, contract or agreement, legally responsible for payment of claim for an item or service.

SECTION 2. List of standard charges required. A hospital licensed in this state shall establish, update and make public a list of standard charges, as provided under sections 3 and 4 of this 2025 Act.

SECTION 3. List of standard charges; machine-readable file. (1)(a) A hospital licensed in this state shall establish, update and make public a machine-readable file that contains a list of all standard charges, expressed in dollar amounts, for items and services offered or provided by the hospital.

(b) If a hospital has a different set of standard charges for different locations operated by the hospital, the hospital shall make public a separate machine-readable file for each location that has a different set of standard charges.

(c) A list of standard charges must identify and distinguish between charges for inpatient and outpatient services, as applicable.

(2) A list of standard charges must include for each item and service the following information:

(a) A description of the item or service;

(b) The gross charge;

(c) The payer-specific negotiated charge for each third-party payer, type of payer and coverage plan;

(d) The deidentified minimum negotiated charge;

(e) The deidentified maximum negotiated charge;

(f) The discounted cash price; and

(g) All codes used by the hospital for purposes of accounting or billing for the item or service, including the current procedural terminology (CPT) code, healthcare common procedure coding system (HCPCS) code, diagnosis related group (DRG) code, national drug code (NDC) or other common identifier.

(3) A list of standard charges must contain the following general information:

(a) The hospital’s name;

(b) The hospital’s licensing number;

(c) Names and addresses of the hospital’s facilities for which the list of standard charges applies; and

(d) The date that the list of standard charges was made public or last updated.

(4)(a) A hospital shall make public a list of standard charges by publishing the list of standard charges in a single digital file to the hospital’s website or, if the hospital does not have a website, on a website for the purpose of making public the list of standard charges.

(b) The digital file must be in a machine-readable format and digitally searchable.

(c) The digital file must be accessible:

(A) Free of charge;

(B) Without requiring a person to establish a user account or password;

(C) Without requiring a person to submit personal identifying information; and

(D) To automated searches and direct file downloads.

SECTION 4. List of standard charges for shoppable services. (1) As used in this section:

(a) “Ancillary service” means an item or service that a hospital customarily provides as

1 part of or in conjunction with a shoppable service.

2 (b) "Shoppable service" means a service offered by a hospital that a person can schedule
3 in advance. A service may be an aggregation of items and services that are offered by a
4 hospital as a single service.

5 (2) A hospital licensed in this state shall establish, update and make public a list of
6 standard charges for shoppable services offered by the hospital as required under this sec-
7 tion.

8 (3) A list of standard charges for shoppable services must include at least 300 shoppable
9 services out of the shoppable services offered by the hospital. In choosing the shoppable
10 services to place on the list of standard charges, a hospital shall consider the frequency at
11 which the hospital provides a shoppable service. If a hospital does not offer 300 shoppable
12 services, the list of standard charges for shoppable services must include all shoppable ser-
13 vices offered by the hospital.

14 (4) A list of standard charges for shoppable services must include any shoppable service
15 offered by the hospital that is specified by the Centers for Medicare and Medicaid Services
16 pursuant to section 2718 of the federal Public Health Service Act, 42 U.S.C. 300gg-18. A
17 shoppable service described under this subsection that is on a list of standard charges shall
18 count towards the number of shoppable services required to be listed under subsection (3)
19 of this section.

20 (5) A list of standard charges for shoppable services offered by a hospital must include
21 for each shoppable service, and associated ancillary services as applicable, the following in-
22 formation:

23 (a) A plainly worded description of the shoppable service;

24 (b) If applicable, information that a shoppable service described under subsection (4) of
25 this section is not offered by the hospital;

26 (c) The names and addresses of the hospital's facilities where the shoppable service is
27 provided;

28 (d) The payer-specific negotiated charge for each third-party payer, type of payer and
29 coverage plan;

30 (e) The discounted cash price or gross charge if a hospital does not offer a discounted
31 cash price;

32 (f) The deidentified minimum negotiated charge;

33 (g) The deidentified maximum negotiated charge;

34 (h) Whether the standard charges for the shoppable service apply to an inpatient or
35 outpatient setting; and

36 (i) All codes used by the hospital for purposes of accounting or billing for the item or
37 service, including the current procedural terminology (CPT) code, healthcare common pro-
38 cedure coding system (HCPCS) code, diagnosis related group (DRG) code, national drug code
39 (NDC) or other common identifier.

40 (6) A hospital shall make public a list of standard charges for shoppable services by
41 publishing the list of standard charges to the hospital's website or, if the hospital does not
42 have a website, on a website for the purpose of making public the list of shoppable services.
43 The list of standard charges must be:

44 (a) Accessible:

45 (A) Free of charge;

- 1 **(B) Without requiring a person to establish a user account or password; and**
- 2 **(C) Without requiring a person to submit personal identifying information; and**
- 3 **(b) Searchable by service description, billing code and payer.**

4 **SECTION 5. Captions. The section captions used in this 2025 Act are provided only for**
5 **the convenience of the reader and do not become part of the statutory law of this state or**
6 **express any legislative intent in the enactment of this 2025 Act.**

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