

Oklahoma Strategies to Prevent Medical Debt

Balance Billing and Short-Term Insurance

The federal No Surprises Act (NSA) protects patients from surprise medical bills (also referred to as “balance bills”), which are unexpected costs from out-of-network providers. Under the federal legislation, patients receiving emergency care or who are unknowingly treated by out-of-network providers during an in-network procedure are only required to pay the in-network cost-sharing amount for services provided. Effective January 1, 2022, the No Surprises Act applies to most health plans but not all care sites and services. States can legislate additional protections for balance bills not covered under the NSA, such as for ground ambulances, or limit the number of short-term, limited duration health plans available in the state, which traditionally cover fewer services putting enrollees at greater risk of incurring balance bills. Strategies examine in this section include:

- Prohibitions on Balance Billing for Ground Ambulance Services

- Prohibitions on Short-Term, Limited Duration Health Plans

Charity Care and Community Benefit Requirements

This section reviews state laws aimed at preventing medical debt, including mandates for hospitals and health care providers to offer financial assistance policies, screen patients for insurance and charity care eligibility, and inform patients of charity care policies before collecting payment. Strategies examined in this section include:

- Mandated Hospital Charity Care

- Hospital Charity Care Screening Requirements

- Hospital Charity Care Notification Requirements

- Hospital Community Benefit Reporting Requirements

Reducing Financial Consequences

This section examines how a state regulates providers’ ability to collect medical debt once it has been incurred. States can mitigate the financial harm of medical debt by regulating how and when providers and collection agencies pursue repayment or by limited aggressive collection actions. Strategies examined in this section include:

- Mandated Waiting Period Prior to Sending a Bill to Collections

- Limits on Liens or Foreclosures due to Medical Debt

- Limits on Wage Garnishment due to Medical Debt

- Limits on the Amount of Interest Charged to Medical Debt



Medical Debt Prevention

Balance Billing and Short-Term Insurance

Policy	Status as of June 2025	Summary
Prohibits Balance Billing for Ground Ambulance Services	Prohibits balance billing for out-of-network ground ambulance services	Oklahoma has established balance bill protections that extend to both public and private ground ambulance services and cover both emergency and non-emergency transport.
Prohibits Short-Term, Limited Duration Health Plans	Short-term, limited duration health plans are not prohibited or eliminated	



State Has Active Policy or Program



Policy or Program Partially Implemented



State Does Not Have an Active Policy or Program



No Source, or Limited Information Found

Medical Debt Prevention

Charity Care and Community Benefit

Policy	Status as of June 2025	Summary
Mandated Hospital Charity Care	 State law requires hospitals to provide free or discounted care to low-income patients and sets standards for eligibility (see notes)	Oklahoma requires certain hospitals, including those run by the University Hospital Authority, to provide a baseline level of charity care. This minimum amount is based on the hospital's reported Medicare costs.
Hospital Charity Care Screening Requirements	 State does not require health care providers to screen patients for Medicaid, Marketplace, or charity care eligibility before collecting payment	
Hospital Charity Care Notification Requirement	 State does not require health care providers to notify patients of charity care options before collecting payment	
Hospital Community Benefit Reporting Requirement	 State law does not require hospitals to annually report the amount of charity care provided	Oklahoma requires hospitals reimbursed by the Trauma Care Assistance Revolving Fund to submit semiannual reports detailing the amount of trauma charity care provided, cost-to-charge ratios, and other financial information using state-designated forms. However, this reporting requirement applies specifically to trauma-related services and does not cover general hospital charity care.



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No Source, or Limited Information Found

Medical Debt Prevention

Reducing Financial Consequences

Policy	Status as of June 2025	Summary
Mandates Waiting Prior to Collections	State law does not require a waiting period before sending medical debts to collections	
Limits on Liens or Foreclosures due to Medical Debt	State law does not prohibit initiating a lien or foreclosure to collect medical debt	Oklahoma has an unlimited homestead exemption, which protects residents from losing their homes due to debt.
Limits Wage Garnishment due to Medical Debt	State law exceeds federal wage garnishment protections for residents with medical debt	
Limits on the Amount of Interest Charged to Medical Debt	The state has not enacted a law to limit interest rates for medical debt	

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