

HOUSE COMMITTEE OF REFERENCE REPORT

Chair of Committee

February 19, 2025
Date

Committee on Health & Human Services.

After consideration on the merits, the Committee recommends the following:

HB25-1151 be amended as follows, and as so amended, be referred to the Committee of the Whole with favorable recommendation:

- 1 Amend printed bill, page 2, line 5, after "**rules**" insert "**- report**".
- 2 Page 2, line 6, after "(15) (b)" insert "(I)".
- 3 Page 2, line 15, strike "PROCESS," and substitute "PROCESS FOR CLAIMS
4 MADE FOR OUT-OF-NETWORK EMERGENCY SERVICES PROVIDED TO A
5 COVERED PERSON,".
- 6 Page 2, line 22, after the period add "THE COMMISSIONER SHALL
7 ANNUALLY REPORT ON THE USAGE OF THE BATCHING PROCESS AS PART OF
8 THE DIVISION'S PRESENTATION TO ITS COMMITTEE OF REFERENCE AT A
9 HEARING HELD PURSUANT TO THE "STATE MEASUREMENT FOR
10 ACCOUNTABLE, RESPONSIVE, AND TRANSPARENT (SMART)
11 GOVERNMENT ACT" REQUIRED PURSUANT TO SECTION 2-7-203.".
- 12 Page 2, after line 23 insert:

13 "(II) (A) FOR CLAIMS THAT ALLEGE UNDERPAYMENT FOR A BILLED
14 CODE WHERE THERE IS A MANDATED OUT-OF-NETWORK REIMBURSEMENT
15 RATE PURSUANT TO THIS SECTION, A CLAIMANT MAY ONLY BATCH CLAIMS
16 IF THE CLAIMANT REQUESTS THAT THE DIVISION PROVIDE THE
17 REIMBURSEMENT RATES AS REQUIRED IN SUBSECTION (3)(d)(II) OF THIS
18 SECTION FOR THE DISPUTED CLAIMS, DETERMINES THAT THEY WERE
19 UNDERPAID, AND FILES A COMPLAINT WITH THE DIVISION AND THE
20 DIVISION DOES NOT ISSUE A FINAL DECISION WITHIN SIXTY DAYS AFTER
21 THE DATE THE COMPLAINT WAS FILED.
22 (B) FOR CLAIMS THAT WERE PAID FOR BY THE CARRIER FOR A
23 DIFFERENT BILLING CODE THAN THE BILLING CODE SUBMITTED BY THE

1 CLAIMANT RESULTING IN A LESSER PAYMENT TO THE CLAIMANT, THE
2 CLAIMANT MAY PROCEED DIRECTLY WITH THE ARBITRATION BATCHING
3 PROCESS TO DISPUTE THE CLAIMS."

4 Page 3, line 9, strike "(1)" and substitute "(15)(d)(III)".

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