## Second Regular Session Seventy-second General Assembly STATE OF COLORADO

## REREVISED

This Version Includes All Amendments Adopted in the Second House SENATE BILL 20-043

LLS NO. 20-0124.01 Kristen Forrestal x4217

#### SENATE SPONSORSHIP

Tate, Moreno, Woodward, Zenzinger, Gardner

#### **HOUSE SPONSORSHIP**

Valdez D., Arndt, McKean, Van Winkle, Buentello, Esgar, Melton, Michaelson Jenet, Titone



House Committees Health & Insurance

# A BILL FOR AN ACT

101	CONCERNING A CORRECTION TO THE RATE OF REIMBURSEMENT THAT
102	AN OUT-OF-NETWORK HEALTH CARE PROVIDER IS ENTITLED TO
103	<b>RECEIVE FROM A HEALTH INSURANCE CARRIER FOR SERVICES</b>
104	PROVIDED TO A COVERED PERSON AT AN IN-NETWORK FACILITY
105	WHEN THE HEALTH CARE PROVIDER SUBMITS A CLAIM TO THE
106	CARRIER WITHIN THE SPECIFIED TIME PERIOD TO CONFORM
107	WITH EXISTING LAW.

### **Bill Summary**

(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at <u>http://leg.colorado.gov/</u>.)



HOUSE 3rd Reading Unamended February 27, 2020



**Statutory Revision Committee.** House Bill 19-1174, enacted January 1, 2020, requires a health insurance carrier to reimburse an out-of-network health care provider who provides emergency services or covered nonemergency services to a covered person at an in-network facility the greater of:

- ! 110% of the carrier's median in-network rate of reimbursement; or
- ! The sixtieth percentile of the in-network rate of reimbursement for the same service in the same geographic area for the prior year based on claims from the all-payer claims database.

The bill corrects a conforming amendment that was made in House Bill 19-1174 that inaccurately stated the reimbursement rate.

1 Be it enacted by the General Assembly of the State of Colorado:

2

3

4

5

6

7

**SECTION 1. Legislative declaration.** The general assembly declares that the purpose of this act is to correct errors in a statutory provision relating to the Colorado division of insurance in the department of regulatory agencies. The general assembly further declares that amending these statutory provisions does not alter the scope or applicability of the remaining statutes.

8 SECTION 2. In Colorado Revised Statutes, 12-30-113, amend
9 (4)(a) as follows:

10 12-30-113. Out-of-network health care providers out-of-network services - billing - payment. (4) (a) An out-of-network
health care provider must send a claim for a covered service to the carrier
within one hundred eighty days after the receipt of insurance information
in order to receive reimbursement as specified in this subsection (4)(a).
The reimbursement rate is the greater of:

16 (I) One hundred five TEN percent of the carrier's median 17 in-network rate of reimbursement for that service provided in the same 1 geographic area; or

(II) The median SIXTIETH PERCENTILE OF THE in-network rate of
reimbursement for the same service in the same geographic area for the
prior year based on claims data from the all-payer health claims database
<del>created</del> DESCRIBED in section 25.5-1-204.

6 SECTION 3. Safety clause. The general assembly hereby finds,
7 determines, and declares that this act is necessary for the immediate
8 preservation of the public peace, health, or safety.