

SENATE COMMITTEE OF REFERENCE AMENDMENT

Committee on State, Veterans, & Military Affairs.

SB24-135 be amended as follows:

1 Amend printed bill, page 4, lines 2 and 3, strike "10-16-134, **amend** (2)"  
2 and substitute "**repeal** 10-16-134".

3 Page 4, strike lines 5 through 10 and substitute "- **definition.** (1) ~~On or~~  
4 ~~before March 1, 2009, and on or before March 1 each year thereafter,~~  
5 ~~each carrier shall submit to the division a list of the average~~  
6 ~~reimbursement rates, either statewide or by geographic area, as defined~~  
7 ~~by rule of the commissioner pursuant to section 10-16-104.9, for the~~  
8 ~~average inpatient day or the average reimbursement rate for the~~  
9 ~~twenty-five most common inpatient procedures based upon the most~~  
10 ~~commonly reported diagnostic-related groups.~~

11 (2) (a) ~~The commissioner shall post the information submitted~~  
12 ~~pursuant to subsection (1) of this section on the division's website.~~

13 (b) ~~The division shall ensure that the website and information is~~  
14 ~~easy to navigate, contains consumer-friendly language, and fulfills the~~  
15 ~~intent of this section.~~

16 (3) ~~For purposes of this section, "diagnostic-related group" means~~  
17 ~~the classification assigned to an inpatient hospital service claim based on~~  
18 ~~the patient's age and sex, the principal and secondary diagnoses, the~~  
19 ~~procedures performed, and the discharge status."~~

20 Page 4, line 11, after "**repeal**" insert "(14) and".

21 Page 4, line 14, after "**definitions.**" insert "(14) ~~On or before March 1 of~~  
22 ~~each year, each carrier shall submit information to the commissioner, in~~  
23 ~~a form and manner determined by the commissioner, concerning the use~~  
24 ~~of out-of-network providers and out-of-network facilities by covered~~  
25 ~~persons and the impact on premium affordability for consumers."~~

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