

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 before March 1, 2009, and on or before March 1 each year thereafter, each carrier shall submit to the division a list of the average reimbursement rates, either statewide or by geographic area, as defined by rule of the commissioner pursuant to section 10-16-104.9, for the average inpatient day or the average reimbursement rate for the twenty-five most common inpatient procedures based upon the most commonly reported diagnostic-related groups.~~

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

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

16 (3) ~~For purposes of this section, "diagnostic-related group" means the classification assigned to an inpatient hospital service claim based on the patient's age and sex, the principal and secondary diagnoses, the 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 each year, each carrier shall submit information to the commissioner, in a form and manner determined by the commissioner, concerning the use of out-of-network providers and out-of-network facilities by covered persons and the impact on premium affordability for consumers.~~".

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