

SENATE COMMITTEE OF REFERENCE AMENDMENT

Committee on Health & Human Services.

SB24-163 be amended as follows:

1 Amend printed bill, page 2, strike line 3 and substitute "(3)(d)(I),  
2 (3)(d)(II), (5.5)(b)(I), (15)(b), and (15)(d) as follows:".

3 Page 2, lines 5 and 6, strike "**definitions.** (15) (b)" and substitute  
4 "**definitions.** (3) (d) (I) If a covered person receives covered services at  
5 an in-network facility from an out-of-network provider, the carrier shall  
6 pay the out-of-network provider directly. ~~and in accordance with this~~  
7 ~~subsection (3)(d).~~ At the time of the disposition of the claim, the carrier  
8 shall advise the out-of-network provider and the covered person of any  
9 required coinsurance, deductible, or copayment.

10 (II) When the requirements of subsection (3)(b) of this section  
11 apply, the carrier shall reimburse the out-of-network provider directly in  
12 accordance with ~~section 10-16-106.5 the greater of:~~ 26 U.S.C. SEC. 9816  
13 (b)(1) AND THE IMPLEMENTING FEDERAL REGULATIONS.

14 ~~(A) One hundred ten percent of the carrier's median in-network~~  
15 ~~rate of reimbursement for that service in the same geographic area; or~~

16 ~~(B) The sixtieth percentile of the in-network rate of~~  
17 ~~reimbursement for the same service in the same geographic area for the~~  
18 ~~prior year based on commercial claims data from the all-payer health~~  
19 ~~claims database created in section 25.5-1-204.~~

20 (5.5) (b) (I) If a covered person receives emergency services at an  
21 out-of-network facility, other than any out-of-network facility operated  
22 by the Denver health and hospital authority pursuant to article 29 of title  
23 25, the carrier shall reimburse the out-of-network provider in accordance  
24 with ~~subsection (3)(d)(H) of this section and reimburse the~~  
25 ~~out-of-network facility directly in accordance with section 10-16-106.5~~  
26 ~~the greater of:~~ 26 U.S.C. SEC. 9816 (b)(1) AND THE IMPLEMENTING  
27 FEDERAL REGULATIONS.

28 ~~(A) One hundred five percent of the carrier's median in-network~~  
29 ~~rate of reimbursement for that service provided in a similar facility or~~  
30 ~~setting in the same geographic area; or~~

31 ~~(B) The median in-network rate of reimbursement for the same~~  
32 ~~service provided in a similar facility or setting in the same geographic~~  
33 ~~area for the prior year based on claims data from the Colorado all-payer~~  
34 ~~health claims database created in section 25.5-1-204.~~

35 (15) (b)".

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