Amend the Health and Insurance Committee Report, dated March 6, 2019, page 1, line 6, strike "FORMAT" and substitute "MANNER".

Page 1 of the report, lines 12 and 13, strike "and (14)"." and substitute "(14), (15), and (16)".".

Page 2 of the report, line 1, strike ""FACILITY OTHER" and substitute ""FACILITY, OTHER".

Page 3 of the report, line 15, after "AND" insert "BE".

Page 3 of the report, line 36, strike "CONSUMERS."." and substitute "CONSUMERS.

(15) (a) (I) If a provider believes that a payment made pursuant to subsection (3) or (5.5) of this section or section 24-34-114 or a health care facility believes that a payment made pursuant to subsection (5.5) of this section or section 25-3-121(3) was not sufficient given the complexity and circumstances of the services provided, the provider or the health care facility may initiate arbitration by filing a request for arbitration with the commissioner and the carrier. The request must be filed within ninety days after the receipt of the payment.

(II) Prior to arbitration under subsection (15)(a)(I) of this section, the carrier and provider or health care facility may conduct an informal settlement teleconference within thirty days after the request for arbitration. The parties shall notify the commissioner of the results of the settlement conference.

(III) Upon receipt of notice that the settlement teleconference was unsuccessful, the commissioner shall appoint an arbitrator and notify the parties of the arbitration.

(b) The commissioner shall promulgate rules to implement an arbitration process that includes the selection of an arbitrator from a list of qualified arbitrators developed pursuant to the rules. Qualified arbitrators must be independent; not be affiliated with a carrier, health care facility, or provider, or any professional association of carriers, health care facilities, or providers; not have a personal, professional, or financial conflict with any parties to the arbitration; and have experience in health care billing and reimbursement rates.

(c) (I) The arbitrator shall perform the review of the
(II) If the arbitrator determines additional payment is warranted, then both parties shall submit, in writing, each party's final offer. The arbitrator shall pick one of the two amounts submitted by the parties as the arbitrator's final and binding decision. The decision must be in writing and made within forty-five days after the arbitrator's appointment. In making the decision, the arbitrator may consider the circumstances and complexity of the particular case, including the time and place of services, and availability of providers in the same geographic region.

(d) If the arbitrator's decision requires additional payment by the carrier above the amount paid, the carrier shall pay the provider in accordance with section 10-16-106.5.

(e) The arbitrator's expenses and fees shall be split equally among the parties.

(16) Notwithstanding section 24-1-136 (11)(a)(I), on or before July 1, 2020, and each July 1 thereafter, the commissioner shall provide a written report to the health and human services committee of the senate and the health and insurance committee of the house of representatives, or their successor committees, and shall post the report on the division's website summarizing:

(a) The information submitted to the commissioner in subsection (14) of this section; and

(b) The number of arbitrations filed; the number of arbitrations settled, arbitrated, and dismissed in the previous calendar year; and a summary of whether the arbitrations were in favor of the carrier or the out-of-network provider or health care facility. The list of arbitration decisions must not include any information that specifically identifies the provider, health care facility, carrier, or covered person involved in each arbitration decision.".".
"Page 18 of the bill, after line 19 insert:

"(4) An out-of-network facility may initiate arbitration pursuant to section 10-16-704 (15) if the facility believes the payment made pursuant to subsection (3) of this section is not sufficient.".".

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