

COMMITTEE REPORT

MADAM PRESIDENT:

The Senate Committee on Health and Provider Services, to which was referred House Bill No. 1300, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill be AMENDED as follows:

- 1 Delete the title and insert the following:
2 A BILL FOR AN ACT to amend the Indiana Code concerning
3 insurance.
4 Page 1, between the enacting clause and line 1, begin a new
5 paragraph and insert:
6 "SECTION 1. IC 27-1-3-31 IS ADDED TO THE INDIANA CODE
7 AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE
8 UPON PASSAGE]: **Sec. 31. (a) Not later than July 1, 2009, each**
9 **insurer that issues accident and sickness insurance policies (as**
10 **defined in IC 27-8-14.2-1) and each health maintenance**
11 **organization shall provide the commissioner with the following**
12 **information concerning the savings and costs of implementing**
13 **direct reimbursement for a health care service provider that is**
14 **out-of-network and that provides services to an insured or**
15 **enrollee:**
16 (1) **The costs incurred or savings experienced by the insurer**
17 **or health maintenance organization in implementing direct**
18 **reimbursement for providers described in this section.**
19 (2) **Operational costs incurred or savings experienced in**
20 **implementing direct reimbursement for the providers**
21 **described in this section.**

1 **(3) The number of additional health care service providers, by**
 2 **specialty, that would be reimbursed by the insurer or health**
 3 **maintenance organization after the insurer or health**
 4 **maintenance organization implemented direct**
 5 **reimbursement.**

6 **(4) Any other costs or savings that the insurer, health**
 7 **maintenance organization, or commissioner determines to be**
 8 **relevant to direct reimbursement.**

9 **(b) This section expires December 31, 2009."**

10 Page 2, line 18, after "(c)" insert "**The health finance commission**
 11 **shall, during the 2009 interim, study whether an insurer should be**
 12 **required to directly reimburse a provider that is out-of-network**
 13 **for services provided to an insured or enrollee. In consideration of**
 14 **this issue, the commissioner of the department of insurance shall**
 15 **provide the health commission with the actuarial information**
 16 **collected under IC 27-1-3-31, as added by this act.**

17 **(d)".**

18 Renumber all SECTIONS consecutively.

(Reference is to HB 1300 as printed February 20, 2009.)

and when so amended that said bill do pass .

Committee Vote: Yeas 9, Nays 0.

Senator Miller, Chairperson