



Rep. Bob Morgan

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10200HB4703ham001

LRB102 24386 BMS 36889 a

1 AMENDMENT TO HOUSE BILL 4703

2 AMENDMENT NO. _____. Amend House Bill 4703 on page 3, by
3 replacing lines 15 and 16 with the following:

4 "laboratory services, except for advanced diagnostic
5 laboratory tests identified on the most current list
6 published by the United States Secretary of Health and
7 Human Services under 42 U.S.C. 300gg-132(b) (3);

8 (4) items and services provided by other specialty
9 practitioners as the United States Secretary of Health and
10 Human Services specifies through rulemaking under 42
11 U.S.C. 300gg-132(b) (3); and

12 (5) items and services provided by a
13 nonparticipating"; and

14 on page 8, by replacing lines 9 through 13 with the following:

15 "Qualifying payment amount" has the meaning given to that
16 term in 42 U.S.C. 300gg-111(a) (3) (E) and the regulations
17 promulgated thereunder.

1 "Recognized amount" means the lesser of the amount
2 initially billed by the provider or the qualifying payment
3 amount."; and

4 on page 9, line 10, after "services.", by inserting "If the
5 cost sharing for the same item or service furnished by a
6 participating provider would have been a flat-dollar
7 copayment, that amount shall be the cost-sharing amount unless
8 the provider has billed a lesser total amount."; and

9 on page 10, line 13, after "services.", by inserting "If the
10 cost sharing for the same item or service furnished by a
11 participating provider would have been a flat-dollar
12 copayment, that amount shall be the cost-sharing amount unless
13 the provider has billed a lesser total amount."; and

14 on page 12, line 10, by replacing "The health insurance
15 issuer" with "Upon receipt of the provider's bill or
16 facility's bill, the health insurance issuer ~~the~~"; and

17 on page 14, line 15, after "parties.", by inserting "The
18 arbitrator shall not establish a rebuttable presumption that
19 the qualifying payment amount should be the total amount owed
20 to the provider or facility by the combination of the issuer
21 and the insured, beneficiary, or enrollee.".