



March 28, 2024

Colorado State Senate
Health & Human Services Committee
SCR 357

RE: Support for SB 24-163 – batching requirements for out-of-network health insurance claims

Dear Chair Fields and Members of the Colorado Health and Human Services Committee,

On behalf of the Emergency Department Practice Management Association (EDPMA), I am writing to express our strong support for Senate Bill 24-163, which aims to improve the arbitration process for out-of-network health insurance claims by introducing a batching process. This process allows multiple claims to be considered jointly under the same arbitration fee, streamlining the payment determination, and aligning with federal law and the practices of various states under the No Surprises Act.

EDPMA's membership includes emergency medicine physician groups of all ownership models and sizes, as well as billing, coding, and other professional support organizations that assist healthcare providers in our nation's emergency departments. Together, EDPMA's members deliver or directly support health care for about half of the 146 million patients that visit U.S. emergency departments each year.

Including a batching process in the arbitration requirements brings several significant benefits that enhance workflow efficiency, save time, and reduce costs for both insurance carriers and healthcare providers. By allowing multiple claims to be bundled together, the arbitration process becomes more efficient and straightforward. This consolidation of claims not only simplifies the administrative burden on both parties but also ensures a more cohesive and transparent resolution process.

The establishment of clear rules by the commissioner of insurance, specifying the information insurance carriers must provide to healthcare providers with the initial payment of a claim, fosters a more structured and accountable payment system. This transparency contributes to trust-building between insurance carriers and healthcare providers, ensuring that both parties are adequately informed and prepared for the arbitration process.

Moreover, adopting the batching process is not a novel concept. The federal No Surprises Act and numerous other states have recognized the advantages of batched claims in arbitration for

surprise billing scenarios. Such a system has proven to be effective in standardizing procedures, reducing disputes, and promoting fair and timely settlements.

I firmly believe that incorporating a batching process into the arbitration requirements, as outlined in SB 24-163, is a crucial step towards fostering a more efficient, cost-effective, and harmonious resolution of out-of-network health insurance claims, allowing physicians to spend more time caring for their patients rather than excess time fighting with insurers over proper payment.

I urge the Colorado Health and Human Services Committee to support this bill and advance its enactment for the benefits it offers to both insurance carriers and healthcare providers.

Thank you for your consideration.

Respectfully,

A handwritten signature in black ink that reads "Andrea Brault". The signature is written in a cursive, flowing style.

Andrea Brault, MD, MMM, FACEP
Chair
Emergency Department Practice Management Association