



General Assembly

Amendment

January Session, 2021

LCO No. 8534



Offered by:

SEN. KELLY, 21st Dist.
SEN. HWANG, 28th Dist.
SEN. FORMICA, 20th Dist.

SEN. BERTHEL, 32nd Dist.
SEN. KISSEL, 7th Dist.
SEN. MINER, 30th Dist.

To: Senate Bill No. 1048

File No. 373

Cal. No. 240

"AN ACT CONCERNING REIMBURSEMENTS FOR CERTAIN COVERED HEALTH BENEFITS."

1 After the last section, add the following and renumber sections and
2 internal references accordingly:

3 "Sec. 501. (NEW) (*Effective July 1, 2022*) (a) As used in this section,
4 "third-party administrator" means any person who directly or indirectly
5 underwrites, collects premiums or charges from or adjusts or settles
6 claims on residents of this state in connection with health coverage
7 offered by the Comptroller to persons other than state employees or
8 retirees.

9 (b) Notwithstanding any provision of the general statutes, the
10 Comptroller, and any third-party administrator, that enters into, renews
11 or amends a contract with a health care provider on or after July 1, 2022,
12 to provide health benefits to persons other than state employees or
13 retirees shall include in such contract:

14 (1) A provision requiring the Comptroller or such third-party
15 administrator to:

16 (A) Reimburse the contracting health care provider for a covered
17 outpatient benefit that uses a current procedural terminology
18 evaluation and management (CPT E/M) code, current procedural
19 terminology assessment and management (CPT A/M) code or drug
20 infusion code in an amount that does not vary based on the facility
21 where the contracting health care provider provides such benefit; and

22 (B) Use equal reimbursement rates for all contracting health care
23 providers in the same geographic region, as determined by the
24 Comptroller and regardless of the employer or affiliation of any
25 contracting health care provider, for each covered outpatient benefit
26 described in subparagraph (A) of this subdivision if the reimbursement
27 for such covered outpatient benefit is made on a fee-for-benefit basis or
28 on the basis of bundled benefits per diagnosis, condition, procedure or
29 another standardized bundle of health care benefits; and

30 (2) A conspicuous statement that such contract complies with the
31 provisions of subdivision (1) of this subsection.

32 (b) The Comptroller shall adopt regulations, in accordance with the
33 provisions of chapter 54 of the general statutes, to implement the
34 provisions of this section."

This act shall take effect as follows and shall amend the following sections:		
Sec. 501	July 1, 2022	New section