



SENATE JOINT RESOLUTION 16-029

BY SENATOR(S) Tate and Kefalas, Baumgardner, Cooke, Crowder, Donovan, Guzman, Heath, Hodge, Holbert, Jahn, Johnston, Lundberg, Marble, Martinez Humenik, Neville T., Newell, Roberts, Scheffel, Sonnenberg, Steadman, Todd, Woods, Cadman;
 also REPRESENTATIVE(S) Arndt and Nordberg, Becker J., Becker K., Brown, Buck, Buckner, Carver, Conti, Coram, Court, Danielson, DelGrosso, Dore, Duran, Esgar, Everett, Fields, Foote, Garnett, Ginal, Hamner, Humphrey, Joshi, Kagan, Klingenschmitt, Kraft-Tharp, Landgraf, Lawrence, Lebsock, Lee, Leonard, Lontine, Lundeen, McCann, Melton, Mitsch Bush, Moreno, Navarro, Neville P., Pabon, Pettersen, Primavera, Priola, Rankin, Ransom, Rosenthal, Roupe, Ryden, Saine, Salazar, Sias, Singer, Thurlow, Tyler, Van Winkle, Vigil, Willett, Williams, Wilson, Windholz, Winter, Wist, Young, Hullinghorst.

CONCERNING THE RECOMMENDATIONS OF THE COLORADO "MEDICAL CLEAN CLAIMS TRANSPARENCY AND UNIFORMITY ACT" TASK FORCE AND, IN CONNECTION THEREWITH, RECOGNIZING ITS WORK.

WHEREAS, Medical providers deal with thousands of codes used to bill payers for patient health care services; and

WHEREAS, Each payer applies its own set of edits when processing payments, resulting in tens of thousands of edits a provider's staff must track and adopt; and

WHEREAS, Administering this process costs providers, payers, and ultimately the people of Colorado hundreds of millions of dollars annually; and

WHEREAS, The Colorado general assembly enacted the "Medical Clean Claims Transparency and Uniformity Act" Task Force (task force)

in 2010 as part of the state's effort to streamline administration within the health care system; and

WHEREAS, The task force's goals were to develop uniform, standardized payment rules and claim edits and guide the establishment and operation of a central repository for accessing the edits and rules; and

WHEREAS, A group of about 25 experts, including national representatives from health plans, software vendors, and health care providers, deliberated in a fully transparent process for five years, sought input from stakeholders, and worked by consensus to develop a set of recommendations; and

WHEREAS, The task force created four committees to undertake its work, resulting in recommendations that achieve major accomplishments for Colorado and that reach consensus on the descriptions of diverse types of edits and payment; and

WHEREAS, The task force has demonstrated that payers and providers can work together to develop a transparent and collaborative process to simplify professional edits for medical claims; and

WHEREAS, The task force has moved the process as far as a single state can in light of the limitations imposed by the national governance of Medicare, Medicaid, and the "Employee Retirement Income Security Act of 1974" ("ERISA"); and

WHEREAS, The task force was able to finalize a document that describes the governance and dispute resolution process, providing a detailed description of the transparent and inclusive process for developing rules to arrive at a final edit set; and

WHEREAS, In spite of these accomplishments, the task force hit several roadblocks, which it could not remove or circumvent; and

WHEREAS, The task force was unable to obtain a commercial edit set for inclusion in the common edit set because no permanent entity could satisfy intellectual property protection concerns of vendors; and

WHEREAS, The task force was unable to find a sustainable funding

source to implement the common edit set once its work was completed; and

WHEREAS, Health plan providers have expressed a strong desire to create a template that could be implemented at a national level; and

WHEREAS, Many national provider organizations are choosing not to support the task force without the ability to review the full commercial edit set and without a common solution to be used by all states; and

WHEREAS, The task force was directed to submit a final report and a set of recommendations to the Colorado general assembly and the Colorado commissioner of insurance no later than January 31, 2016, which deadline was met with a written final report delivered to members of the House Business Affairs and Labor Committee, the Senate Business, Labor and Technology Committee, and the commissioner of insurance in early January, 2016; and

Be It Resolved by the Senate of the Seventieth General Assembly of the State of Colorado, the House of Representatives concurring herein:

That we, the members of the Colorado general assembly:

(1) Recognize the substantial accomplishments of the task force and commend its nonprofit and private-sector participants, who donated thousands of hours of volunteer time over a five-year period;

(2) Recommend that the federal department of health and human services (DHHS) accept the work product of the task force, adopt its rules as the basis for the development of a common edit set for professional claims, make this edit set available for adoption in all states, and assume the oversight and funding of the process for development of a common set of edits for professional claims;

(3) Recommend that, as part of its work, DHHS adopt the collaborative and transparent process for the identification and challenge of problematic or clinically incorrect edits as developed by the task force;

(4) Recommend that DHHS make available the resulting edit set or partial set to affected parties in a format that is downloadable and usable

in current and common claims edit programs; and

(5) Recommend that DHHS, after a state-specific pilot program or under a national pilot program, support the adoption of the process, rules, and edits for use in all states.

Be It Further Resolved, That copies of this Joint Resolution be sent to: The Honorable Sylvia Mathews Burwell, Secretary of the U.S. Department of Health and Human Services; Mr. Andy Slavitt, Acting Administrator, Centers for Medicare and Medicaid Services; Mr. Jeffrey Hinson, Regional Administrator, Centers for Medicare and Medicaid Services; Walter Suarez, MD, Chair, Standards Subcommittee, National Committee on Vital and Health Statistics; The Colorado Congressional Delegation; Colorado Governor John Hickenlooper; Susan E. Birch, Executive Director, Health Care Policy and Financing; Marguerite Salazar, Insurance Commissioner, Colorado Department of Regulatory Agencies; Alfred Gilchrist, CEO, Colorado Medical Society; Sarah Guillaume, Director, Grantmaking Operations, The Colorado Health Foundation; Laurel Petralia, Program Officer, The Colorado Trust; Wade Buchanan, The Bell Policy Center; Michael Campo, Colorado Medical

Society Foundation; Amy Downs, Sr. Director, Colorado Health Institute; James Madara, MD, CEO, American Medical Association; Michael Donofrio, JD, General Counsel, Green Mountain Care Board; CAQH CORE; and Barry Keene, President of Keene Research and Development.



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Effie Ameen
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Marilyn Eddins
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