



CIG

Consultants in  
Gastroenterology<sup>pc</sup>

**To:** House Insurance Committee  
**From:** Camille Harvison  
Patient Account Representative BO Supervisor  
**Date:** February 15, 2012  
**Subject:** HB 2565; concerning Health Care Predetermination Requests

Consultants In Gastroenterology, P.C. appreciates the opportunity to submit the following comments in support of HB 2565, which would require health insurance issuers to provide accurate and binding expected amounts of benefits for non-emergent procedures and services received from a physician.

When a patient has a non-emergent medical procedure or service, whether it is deemed necessary or elective, the patient has the right to know the amount that will be submitted to their health care issuer, what the health care issuer will reimburse the physician for the service, and what they, the patient will be responsible for. While the patient may understand the concept of a copayment, coinsurance or high deductible they do not know how it will specifically apply to a particular procedure or service. Currently there is no effective or efficient method to provide the patient with accurate and binding financial information regarding their service.

The online tools provided by insurance companies do not have the capability for a provider to adjudicate a claim for the purpose of physician reimbursement and patient liability. They provide generic information which is not specific enough to the physician's contract, procedure code and diagnosis of the impending claim. Frequently the insurance websites experience technical difficulties that make using it for any purpose impossible.

The call centers are very time consuming. The average time for a call for one patient can be 15-20 minutes. The representatives in the call centers can only provide the basic information of the patient's benefits. They can not take into consideration specifics of the physician's contract, procedure codes and diagnosis. The call centers are not

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always available. They close for holidays that physician's practices are not, they close for staff in-service training sessions and daily lunch hours. Their system can fail at any given time and then they are unable to provide you with any information after you have been on hold to speak to a representative.

We recently had a situation with a patient where the health care issuer call center told the patient she would not have a balance for her procedure but due to the diagnosis they did require a \$200 co-payment. Each month the patient received a bill from us she would call to object. Even though we provided her with the Explanation of Benefits from her health care issuer she would contact the call center and they would tell her not to pay. They were basing their response on her basic benefits information and not taking her diagnosis into consideration. After two conference calls between the patient, the health care issuer and our practice the patient was finally told by her insurance that she owed the amount she was being billed for. Between the research and phone calls this situation took more than 4 hours to reconcile. The patient was extremely frustrated and felt like she had been lied to and misled by both parties. If the patient had been given the correct information from the call center initially this could have been avoided.

We feel that providing accurate and binding financial information would be beneficial to the health care issuers as well as the physicians. If the same information was available to the health care issuer call center staff and the staff from the physician's office the patient would receive the same information therefore cutting down on time spent resolving discrepancy in information the patient is given.

It is our sincere hope to be able to provide our patients with accurate and binding information regarding the cost of any non-emergent procedure or service that they have in a timely and professional manner. We feel that having the information provided real time by EDI is the best way to accomplish this. We urge your favorable support of HB 2565. Thank you for the opportunity to provide these comments.