

Subject: FW: AB 469 - Regulations

From: Chris Bosse <CBosse@renown.org>
Sent: Monday, January 27, 2020 11:04 AM
To: Carrie L. Embree <clembrree@adsd.nv.gov>
Cc: Bill Welch <bill@nvha.net>; James L. Wadhams - Fennemore Craig Jones Vargas (jlwadhams@blacklobello.law) <jlwadhams@blacklobello.law>
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Carrie

I very much appreciate the time you took to meet with me prior to the holiday to review my questions/concerns regarding LCB File R101-19. After reviewing the latest version dated January 6th, 2020, the following continue to be my concerns and/or recommendations for your consideration:

1. Section 2 subsection 2 e) 3): As we discussed during our meeting, requiring one party to provide payment data as part of the request for arbitration presents the following concerns
 - a. Patient care services are frequently quite individual (while they may have some similarities like the level of emergency room care provided – levels 1- 5). It may be difficult to find non-contracted emergency services (hopefully not a large volume) that are similar.
 - b. If payers and hospitals can continue our work to contract broadly – there shouldn't be many Nevada Payers that are non-contracted. There may not be examples other than with the payer the dispute is with.
 - c. Not sure why the arbitrator would benefit from payments made by non-contracted payers (since they often don't even pay what our contracted payer would pay – and a least the contracted discounted payments are in exchange for a volume of patient care they agree to purchase). Non-contracted patient care should be paid at a rate that is more than contracted rates.
 - d. There is concern about ensuring payment amounts remain confidential so any payment information provided should be provided directly to the arbitrator under an agreed upon confidential process.
2. Sections 2 and 3 outline a very detailed process with numerous deadlines. These deadlines will apply to each claim that is being disputed. I wonder if OCHA would consider a more simplified process. I am not suggesting that the claims themselves be considered together or batched. Please consider the following:
 - a. For the claims submitted to the State with a request for arbitration in the prior month, the State will
 - i. Provide notice of receipt by the 5th business day of the following month for all requests for arbitration received during the prior month
 - ii. On or before the 10th business day following the month of submission – the state will provide a request for additional information for any missing information related to all claims submitted in the prior month
 - iii. The provider will have 5 business days to provide any missing information.
 - iv. On or before the 17th business day, the state will confirm all valid claims and will provide a list of arbitrators to select from.
 - v. Etc.
 - b. Once the arbitrator has been assigned, each claim will be considered individually.
3. Section 5 outlines the process for opting in.
 - a. This election should be an annual election which should be received by the Department By December 1st each year. This will provide certainty for all parties (patients, providers and payers) and will provide time for the State to accurately reflect the intention of the electing third parties on the website.

- b. This election must include information that will allow providers to comply with the statute – email and phone information that will provide 24/7 access to the third party for notification purposes and will correspond to the time frames that the emergent non-contract care will be provided.

I appreciate the opportunity to provide feedback. Please let me know if you have questions or need additional information.

Thank you,
Chris

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