

Amendment No. 1

COMMITTEE/SUBCOMMITTEE ACTION

ADOPTED	<u> </u>	(Y/N)
ADOPTED AS AMENDED	<u> </u>	(Y/N)
ADOPTED W/O OBJECTION	<u> </u>	(Y/N)
FAILED TO ADOPT	<u> </u>	(Y/N)
WITHDRAWN	<u> </u>	(Y/N)
OTHER	<u> </u>	

1 Committee/Subcommittee hearing bill: Civil Justice Subcommittee
 2 Representative Metz offered the following:

Amendment

5 Remove lines 30-63 and insert:

6 the maximum amount recoverable. Any difference between the
 7 amount originally billed by a health care provider who has
 8 provided medical or health care services to the claimant and the
 9 actual amount remitted to the provider is not recoverable or
 10 admissible into evidence.

11 2. For such medical or health care services provided by a
 12 particular health care provider to the claimant which are paid
 13 for by a governmental or commercial insurance payor and for
 14 which an outstanding balance is not due the provider, other than
 15 a copay or deductible owed by the claimant, the actual amount
 16 remitted to the provider by the governmental or commercial
 17 insurance payor and a copay or deductible owed by the claimant

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18 is the maximum amount recoverable. Any difference between the
19 amount originally billed by a health care provider who has
20 provided medical or health care services to the claimant and the
21 actual amount remitted to the provider is not recoverable or
22 admissible into evidence.

23 3. For such medical or health care services provided to
24 the claimant for which an outstanding balance is claimed to be
25 due the provider, the parties may introduce into evidence:

26 a. Amounts the provider routinely accepts as payment from
27 governmental or commercial insurance payors for identical or
28 substantially similar medical or health care services.

29 b. Amounts billed by the provider for the services
30 provided to the claimant, including those amounts billed under
31 an agreement between the provider and the claimant or the
32 claimant's representative.

33 c. Amounts the provider received in compensation, if any,
34 for the sale of the agreement between the provider and the
35 claimant or the claimant's representative under which the
36 medical or health care services were provided to the claimant.

37 (b) In an action in which there is more than one health
38 care provider who has provided medical or health care services
39 to the claimant, the evidence admissible under this subsection
40 as to a provider with no outstanding balance due may not be used
41 as evidence regarding the reasonableness of the amounts billed
42 by any of the other health care providers who have an
43 outstanding balance due.