Testimony of Jan Kief, MD, Immediate Past President

Colorado Medical Society

On

Proposed Regulation 4-2-48, Concerning Grace Periods for Policyholders Receiving Advance Tax Payments

Thursday May 1, 2014
Colorado Division of Insurance
1560 Broadway, Suite 850 Room B
Denver, CO 80202
Commissioner Salazar,

My name is Dr. Jan Kief and I appear before you today representing Colorado Medical Society as the Society’s immediate past-president. Thank you for proposing regulations addressing grace periods for policyholders receiving advance tax credits.


Speaking for Colorado Medical Society, we strongly supported the enabling legislation creating the Health Insurance Exchange and Connect for Health Colorado from its inception. This support was consistent with our long-sought goal of achieving coverage for all Coloradans and consequently expanding their access to care. Colorado’s rollout of the health insurance exchange market place was much more successful than the federal program or those in many other states. We are very proud of this accomplishment and I have personally given talks on Colorado’s successful rollout before several national medical audiences.

We wish also to stress that with the successful launching of the exchange came a number of uncertainties that were widely communicated. Even though Colorado had numerous qualified health plans participating on the exchange, because of these uncertainties – such as how many people would sign up, what would their utilization be, where would they be located, what would the premiums be – the health plans took some protective measures that tightened the network of participating providers and in some cases lowered the payments.

There was one issue that overshadowed these measures for all providers: the uncertainty surrounding eligibility for patients that fall into the 90-day grace period. This point is best illustrated by the diversity of the organizations that banded together to jointly submit our recommendations, including representatives of the practice administrators.
There has been much publicity about the possibility of providing care and then having the claim denied months later because of non-payment of premiums. Although this problem may not be unique to exchange products, it did gain national attention in part due to the potential for the problem to become more widespread.

We strongly support the Division’s efforts to add clarity to the 90-day grace period for policyholders receiving advance tax payments under the Affordable Care Act. The Division has the unique opportunity to not only address the consumer and health plan issues related to grace periods but also the concerns of those actually delivering the care to the policyholder. We believe that CRS 10-1-109 and 10-16-140 provide the authority, and we encourage you to include language in the regulations that will ensure providers receive eligibility information in a timely manner, and in a manner detailed enough so that they can anticipate any potential problems. These proactive measures will give our health care professionals the assurance they need to continue providing access to care for the Coloradans receiving advance tax payments through the purchase of exchange products.

Finally, and speaking just for CMS, I urge you to carefully review and accept the recommendations submitted separately by the Colorado Society of Anesthesiologist.

Thank you for your consideration and for your public service.