



**Dave Dillahunt, MPA, CAE**  
**Ohio Hematology Oncology Society**  
**House Bill 691 Proponent Statement**  
**House Insurance Committee**  
**November 17, 2020**

Chairman Brinkman, Vice Chair Antani, Ranking Minority Member Boggs, and Members of the House Insurance Committee, thank you for the opportunity to provide written testimony in support of House Bill 691 regarding Medicaid managed care organizations complying with current prompt pay laws. The Ohio Hematology Oncology Society represents nearly 200 oncologists and hematologists in Ohio who treat cancer patients in the private office (community) setting.

Community oncology practices treat the majority of patients facing cancer. Our members are located in rural, suburban and urban settings. Practices range in size from 1 to 35 physicians, with most being in the 3-4 physician range.

Prompt payment issues have long been a problem for our practices and providers. During the pandemic, these issues have become more pronounced as practices, like other businesses, struggle to keep their doors open. Insurers utilize payment delays with ongoing requests for additional information. House Bill 691 will standardize the documentation claims process, establish standards on the review process, incentivize compliance, and incorporate Managed Care Organizations into the revised code.

House Bill 691 deals with timeline and supporting documentation reform. These reforms will help practices obtain timely payments for services rendered. These reforms do not impact the ability of insurers to obtain necessary information to adjudicate the claim.

The bill would reform the timeline for claims that the third party payers (TPP) requested additional information. This bill would require the payer to request additional documentation within ten days of receiving the claim.

We appreciate Representatives Manchester and Plummer for addressing this important issue and urge your support for House Bill 691.

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