

Ohio Hospital Association  
Proponent Testimony  
House Bill 99  
Ohio House Insurance Committee  
May 10, 2023

Chairman Lampton, Vice Chairman Barhorst, Ranking Member Miranda and members of the House Insurance Committee, thank you for the opportunity to provide testimony on behalf of the Ohio Hospital Association in support of House Bill 99, which would regulate the practice of reducing health insurance benefits in emergency situations.

Established in 1915, OHA is the nation's first state-level hospital association. OHA exists to collaborate with member hospitals and health systems to ensure a healthy Ohio. OHA currently represents 247 hospitals and 15 health systems throughout Ohio. The association is governed by a 20-member Board of Trustees with representation from small and large hospitals, teaching facilities and health care systems with a committee and task force structure.

House Bill 99 does several important things to help protect patients and ensure access to care: it prohibits health insurers from denying claims for emergency services solely due to a final diagnosis that the medical condition was non-emergent in nature (you may also hear this referred to as strengthening the prudent layperson standard) and it requires insurers to conduct utilization review of claims for emergency services prior to denying or reducing payment.

The prudent layperson standard is incredibly important to making sure that patients can access emergency care and are not put in a position to make a clinical decision about their condition. Additionally, the emergency department sometimes is the only option available for immediate attention and evaluation of the patient's condition. For example, a member hospital shared a case where a three-year-old child presented at the emergency department at 1:32 am for a fever of 104.5°F, congestion, and cough. The child was seen by her primary care physician a day before the emergency department visit for similar symptoms experienced for the past four days with a maximum temperature of 103°F. The PCP diagnosed the child with a viral illness and the parents were advised to come to the emergency department if her fever does not subside the following day. The child was also eating less and refused to take fever reducing medication. Although the patient's parents followed the PCP's orders and the hospital provided the necessary care for this visit, the health insurer denied the claim deeming that the case was not emergent in nature and therefore the emergency department was an inappropriate site of service. To the prudent layperson, the child's condition required an emergency department-level of care, especially for the time of service.

Under the Emergency Medical Treatment and Labor Act, or EMTALA, hospitals are obligated to evaluate and stabilize, if necessary, any individual who requests a medical screening for their condition in the emergency department. Therefore, per federal regulation, hospitals cannot refuse care to individuals seeking emergency services.

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However, health insurers can reduce or refuse payment to hospitals who provide emergency services to their enrollees because the insurer determines that the claim's final diagnosis was not emergent in nature. Our member hospitals are doing their due diligence to ensure that any individual who seeks care at their facility receives the care necessary to stabilize their condition, regardless of their health insurer or ability to pay.

We are grateful to Representative Manchester for reintroducing this important legislation and appreciate the legislature's attention to this issue. Thank you for your time and consideration.