

I Mina'Trentai Dos Na Liheslaturan Guahan
Bill Log Sheet

BILL NO.	SPONSOR	TITLE	DATE INTRODUCED	DATE REFERRED	CMTE REFERRED	PUBLIC HEARING DATE	DATE COMMITTEE REPORT FILED	FISCAL NOTES
94-32 (COR)	R.J. Respico, T.C. Ada, Judith T. Won Pat, Ed.D, T.R. Muna Barnes, Aline A. Yamashita, Ph.D., Michael F.Q. San Nicolas, Chris M. Duenas	AN ACT TO AMEND SECTIONS 9902(b), 9902(d), AND 9902(g) OF TITLE 10 GUAM CODE ANNOTATED RELATIVE TO PROMPT PAYMENT REQUIREMENTS FOR HEALTH CARE AND HEALTH INSURANCE BENEFITS. <input type="checkbox"/>	4/18/13 3:55pm	04/19/13	Committee on Health and Human Services, Health Insurance Reform, Economic Development and Senior Citizens	9/23/13 6:00pm	11/4/13 5:22 p.m. As Substituted by Committee on Health & Human Services, Health Ins. Reform, Economic Development, and Senior Citizens	Fiscal Notes Requested 4/22/13



SENATOR DENNIS G. RODRIGUEZ, JR.

November 4, 2013

Honorable Judith T. Won Pat, Ed.D.
Speaker
I Mina'Trentai Dos Na Liheslaturan Guåhan
155 Hesler Place
Hagåtña, Guam 96910

VIA: The Honorable Rory J. Respicio
Chairperson, Committee on Rules

RE: Committee Report – Bill No. 94-32 (COR), as substituted

Dear Speaker Won Pat:

- Transmitted herewith, for your consideration, is the **Committee Report on Bill No. 94-32 (COR) An Act to amend Sections 9902 (B), 9902 (D), and 9902 (G) of Title 10 Guam Code Annotated relative to prompt payment requirements for health care and health insurance requirements; Introduced by Senator Rory J. Respicio;** and referred to the Committee on Health & Human Services, Health Insurance Reform, Economic Development and Senior Citizens. Bill No. 94-32 (COR) was publicly heard on September 23, 2013.

Committee votes are as follows:

 3 TO PASS
 NOT TO PASS
 ABSTAIN
 5 TO REPORT OUT ONLY
 TO PLACE IN INACTIVE FILE

Senseramente,

Senator Dennis G. Rodriguez, Jr.
Chairman

2013 NOV 4 PM 5:22

Attachments



SENATOR DENNIS G. RODRIGUEZ, JR.

**COMMITTEE REPORT
ON**

BILL NO. 94-32 (COR), as substituted
Sponsored by Rory J. Respicio

**AN ACT TO AMEND SECTIONS
9902(b), 9902(d), AND 9902(g) OF TITLE
10 GUAM CODE ANNOTATED
RELATIVE TO PROMPT PAYMENT
REQUIREMENTS FOR HEALTH CARE
AND HEALTH INSURANCE
REQUIREMENTS.**




SENATOR DENNIS G. RODRIGUEZ, JR.

November 4, 2013

MEMORANDUM

To: **ALL MEMBERS**
Committee on Health & Human Services, Health Insurance Reform, Economic
Development and Senior Citizens.

From: **Senator Dennis G. Rodriguez, Jr.** 
Committee Chairperson

Subject: **Committee Report on Bill no. 94-32 (COR), as Substituted**

Transmitted herewith, for your consideration, is the **Committee Report on Bill 94-32 (COR), as Substituted- An act to amend Sections 9902(b), 9902(d), and 9902(g) of Title 10 Guam Code Annotated relative to prompt payment requirements for health care and health insurance benefits; introduced by Sen. Rory J. Respicio.**

This report includes the following:

- Committee Voting Sheet
- Committee Report Narrative/Digest
- Copy of Bill No. 94-32 (COR)
- Copy of Bill No. 94-32 (COR), as Substituted
- Public Hearing Sign-in Sheet
- Copies of Submitted Testimony and Supporting Documents
- Copy of COR Referral of Bill No. 94-32 (COR)
- Notices of Public Hearing (1st and 2nd)
- Copy of the Public Hearing Agenda
- Related News Articles (Public hearing publication of public notice)

Please take the appropriate action on the attached voting sheet. Your attention to this matter is greatly appreciated. Should you have any questions or concerns, please do not hesitate to contact me.

Si Yu'os Ma'åse'!



SENATOR DENNIS G. RODRIGUEZ, JR.

COMMITTEE VOTING SHEET

Bill No. 94-32 (COR) An Act to amend Sections 9902 (B), 9902 (D), and 9902 (G) of Title 10 Guam Code annotated relative to prompt payment requirements for health care and health insurance requirements. Introduced by Sen. Rory J. Respicio.

	SIGNATURE	TO PASS	NOT TO PASS	ABSTAIN	REPORT OUT ONLY	PLACE IN INACTIVE FILE
DENNIS G. RODRIGUEZ, Jr. Chairman		✓ 11/4				
V. ANTHONY ADA Vice Chairman						
JUDITH T. WON PAT, Ed.D. Speaker (Ex-officio)						
BENJAMIN J. F. CRUZ Vice-Speaker					✓	
TINA ROSE MUNA-BARNES Legislative Secretary					✓	
FRANK B. AGUON, Jr. 11/4/12		✓				
VICENTE C. PANGELINAN						
RORY J. RESPICIO		✓ 11/4/13				
ALINE A. YAMASHITA, Ph.D.						
THOMAS MORRISON					11/4/12	
MICHAEL LIMTIACO						
BRANT T. MCCREADIE		11-4-13			✓	
CHRISTOPHER M. DUENAS						



SENATOR DENNIS G. RODRIGUEZ, JR.

COMMITTEE REPORT DIGEST

Bill No. 94-32 (COR)

- I. OVERVIEW:** The Committee on Health & Human Services, Health Insurance Reform, Economic Development and Senior Citizens conducted a public hearing on **September 23, 2013**. The hearing convened at 6:00 p.m. in I Liheslatura's Public Hearing Room. Among the items on the agenda was the consideration of **Bill No. 94-32 (COR) An Act to amend Sections 9902 (B), 9902 (D), and 9902 (G) of Title 10 Guam Code Annotated relative to prompt payment requirements for health care and health insurance requirements; Introduced by Senator Rory J. Respicio**

II. Public Notice Requirements

Notices were disseminated via hand-delivery/fax and/or email to all senators and all main media broadcasting outlets on September 16, 2013 (5-day notice), and again on September 18, 2013 (48-hour notice).

Senators Present

Senator Dennis G. Rodriguez, Jr.	Chairman
Senator V. Anthony Ada	Vice-Chairman
Vice Speaker B.J. Cruz	Committee Member
Senator Rory J. Respicio	Committee Member
Senator Aline Yamashita, Ph.D.	Committee Member
Senator Thomas Morrison	Committee Member
Senator Christopher M. Duenas	Committee Member

The public hearing on agenda item Bill No. 94-32 (COR) was called to order at 6:00 P.M.

II. SUMMARY OF TESTIMONY & DISCUSSION.

Senator Respicio : Thank you very much Mr. Chairman. Mr. Chairman this next bill will save the Guam Memorial Hospital and really will not help just GMH but will also help the new hospital, as well as every single doctor on this island by reducing the prompt payment act from 45 days to 21 days on a clean claim any portion there off submitted by patient or health care provider and also increases the penalty from 4% to 16%. You know we just spent the last hour and a half discussing why we have to keep the QC for the health insurance providers, Mr. Chairman , now, I know we are going to spend some time discussing why they can't pay as soon as possible. Now, this sure premiums that individuals pay, this is coverage that are from people who have health insurance plan and what we're hearing off, Mr. Chairman, is that while most have been promptly paying the hospital and the health care provider, the Doctors and the clinics some had not for various reasons, and so if you look at Guam Memorial Hospital website they are required to post on a bi-monthly basis, who is



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owing the hospital down and even the Government of Guam is included there. I look forward to the discussion to Bill 94, again this is to pay on clean claims so it's not going to require this health insurance to process within 21 days. It's claims that are already been submitted and it's attempt to not help the hospital, the new hospital and also the Doctors so there are having to finance their receivables, so I look forward to the discussion, I thank you for hearing it, Mr. Chair.

Chairman Senator Rodriguez: Thank you very much Senator Respecio. I also like to call Mr. Jeffrey Larson from TakeCare, I'm sorry it's a written testimony. We have Senator Santos and Ray and Senator I'm going to ask you to read your testimony because I read it and I like it. I think everyone should hear it on the record.

Former Senator Frank Santos: I respectfully pass, Ray's is long and mine is very short. Look I get to the point and hoping that, you know I always hear this argument that you don't always pay your claims on time. How do you survey that? Did anyone from your office bother to call what we are doing and what really is the practice of our operation? Because it bothers me, when I sat on your side. I don't like businesses. I don't think it fair for the Government to try to impose some of us if you're not even checking what we are even doing. It's not a good practice for us to really delay claims because the members are unhappy and they are calling provider, "Why are you not paying your claim? What is the reason? And for them, there is no valid reason because they pay their premium not knowing the benefits apply and so forth. You know, our discussion with the provider the other night kind of spoke for itself to what we are doing as an industry. And again it's always the insurance company is the bad guy. I never hear the Legislature say, "Well you know, how come MIP and Medicaid are not paying on time?" I mean are the providers out of the goodness of their heart floating out 120 days. That's not wrong it's unconscionable for the Government to do that but it's not stated on this Bill that MIP and Medicaid have to pay on time and 21 days for a claim bill. There going to suggest it, first of all the cash flow is not going to support that, we know that. Senator Cruz is up there when we heard GMH is going to collect 21 cents on a dollar. I wish our industry can pay 21 cents on a dollar. We can really and will pass on the 4%, we don't need that. Look I don't mean, you know, there is couple of providers out there, we support them. And I don't think we're going to argue out here about 45, 30, 21, is it really that bad out there? The doctors are complaining, I gave them a solution the other night at GMH, cut off that provider. If Staywell is such a bad payer, if Ray is such a bad payer? Cut him out. The only brave soul that was up there was Dr. Berg and the SDA Clinic. They made a business decision not to take a certain provider. That could have been Staywell that could have been Calvo's Insurance, that could have been NetCare but that's not our business practice. So why do you need the Government of Guam to tell me to pay our bill on time? We pay our bills on time, whether you define it clean bill, bad bill whatever, it is not the intent of the insurance company is not to want to pay claim. We look at every single claim adjudicated to the best as we can and we have issues, we agree with that. But it is not our common practice not to want to pay on time. We can live with the 45 days, I believe we pay ours at 30 days and do we get any credit for being 15 days early, zero. So to want the Government to try to regulate maybe regulate yourself first by requiring the MIP and Medicaid pay first or at least meet up to the 45 days like we do. Because I got news for you, that's a larger market, than what we have over at Staywell. It's larger than Gov. Guam; there are 33,000 members in Medicaid another 15,000 in MIP. Imagine if you pay those on time the service that this others providers out here then they want to take Medicaid and MIP and be a provider instead of saying, "I don't want you guys because you can pay me on time". This



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is not new news for us all of us that sat in this room before. Look it's simple, if you going to do this, that's fine, we're going to have to comply but I'm asking you, leave our business alone. If we're that bad? Target the other ones directly but put that in the hands of the business model we have. Let the doctors go up there and say, "You know what; I'm not going to take those guys anymore." That's a business decision; I think that there are brave businesses out there that are going to make that us we continue. Find out from their Doctor, most or I hope all of you have Doctors. Ask them, "Is the insurance company paying you guys on time? I want to know". Is simple as that, go to your Doctor, ask her, ask him, how they paying you. I'm really just you know, I watch this over a while , honestly I think our biggest concern as we seat here , I'm worried about our hospital . Because what good of a hospital if the Doctor can't even go there to treat our patient. But I don't think I'm hearing anything from you guys, sharing the same thing. You can't ask for the rate increase those guys are asking of that magnitude and expect the insurance guys to come forth because MIP, Medicaid and Medicare, your 3M's are going to pay you. Yet were burden with to having to pay that, I mean there's just no way. The balance it's so imbalanced at this point and asking us to abide now with 21 day requirement of 16%. I don't hear the Government being charged 16% for not paying on time. When the largest debtor to our hospital, if you listen to it what they are saying the other day, Senator Rodriguez and Vice Speaker Cruz, is the Government sponsored program. I don't like coming down here, Senator Respicio, and I guess the word you use my brother over there is winning. The simple solution that we have to this is simple leave our industry alone.

Senator Respicio: Well, maybe you can help me a little bit Frances, you keep saying, "Why isn't the Government paying on time with MIP ". You know the biggest problem with the hospital is the uninsured, indigent law and the self pay which becomes none pay. So I don't think it's fair to compare the Government and the MIP program the same way with the insurance company who have to make payments un claim which there is insurance that's being paid for and suppose to be provided for. So you know your comparing orange to apple and saying that," Why not MIP. Were MIP is historically been under funded, "You're correct". But what I'm saying is you have people who have health insurance plans they go to the hospital, they go to the doctor's clinic and the doctor's submits bill to your company, and it's a clean claim. You know why not pay that as soon as possible. Why not accelerate the payment schedule to 21 days instead of 45 days. And why not provide for penalty if there is none compliance?

Former Senator Frances Santos: So can we give us a 16 % discount for paying it 21 days, Senator Respicio?

Senator Respicio: Well the Government does give a discount to help insurance company when they pay on time.

Former Senator Frances Santos: 8% for GMH, Okay. You know, Senator Respicio what happened if we paid on 21 days and we wanted 16%, is there a harm to that one?

Senator Respicio: Well, you know we can regulate that will be up to you and the clinic you are asking a discount from.

Former Senator Frances Santos: You're asking us to pay 16%



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Senator Respicio: Well, were regulating this to make sure that you guys pay quicker this health care provider.

Former Senator Frances Santos: So what's the benefit in paying quicker Senator Respicio? That's my question then? Why can't you regulate that?

Senator Respicio: Well, what's the problem in paying immediately?

Mr. Ray Schnabel: Well, if I can answer Senator, it's a matter of cash flow. If you read my testimony, it's a little hypocritical because the Government is one third of the industries business now normally every other contract, every other group we have premium is due before the first of the month before coverage intercept. The Government in itself insurance plan uses it's clause uses it might and dictates when it's going to play and it says, " they are going to pay after the pay period ends on the 14th but it adds another 15 days to tally up all payroll deduction etc.etc and pay us". So they pay after the 29th or the 30th of the month at least that's what the contract reads but in practice they're another 10 to 15 days late. So what this bill is mandating us to do is to take claims which are receive on the 1st or the 2nd , on the 3rd and pay them by the 22nd , 23rd and 24th but yet the biggest customer out there which is, Government of Guam is not paying us until the 40th or the 45th . Now, how do we manage that kind of cash flow? Sure we can rely on commercial, again private sector company but they too are customer or vendor of Government of Guam or their main vendor is Government of Guam and so forth so they are paying us late. So how do we manage that kind of cash flow? If the Government wants everyone to pay sooner they should mandate it to pay its bills on time. I'll guarantee you everyone will be paid sooner.

Senator Respicio: Well, you just think it seems that it's bad to do business with the Government of Guam. But the Government is using its economist scale to negotiate this arrangement with the health care provider.

Mr. Ray Schnabel: But it also should see that it has a responsibility to the industry and basically the industry it affects. You're basically tapping everyone else's cash flow by paying late.

Senator Respicio: You're not asked to pay the Government debt to GMH but that's an isolated issue. That's between the Government and the GMH and the Government and these health care providers. So can keep pulling the Government into this side to say that , because you're forced to pay on time on those subscriber which have health insurance, the Government pays you on time in terms of the health care provider.

Mr. Ray Schnabel: No not really.

Senator Respicio: Really, the Government never advances any health care provider?

Mr. Ray Schnabel: No it's been the reverse.

Senator Respicio: Ok.



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Mr. Ray Schnabel: Currently the hospital is 8 to 10 periods behind its payment.

Senator Respicio: And you're current with your payment to GMH

Mr. Ray Schnabel: Yes, despite what their website may say, yes!

Senator Respicio: That's something that we can verify Mr. Chairman but I appreciate the information.

Chairman Senator Dennis Rodriguez, Jr: Thank you Senator Respicio.

Senator Duenas: I just have a very simple comment when I sign on to this bill over 5 ½ months ago, I thought it might have been a good idea but once again unanimous opposition to this bill. I since talked to a number of insurance companies individually, I now understand that the arrangement are sufficient. Thank you Mr. Chair for the opportunity because I did my due diligence to do my research, I appreciate the feedback.

Senator Respicio: And Mr. Chairman so did I, so did I, if you don't like the bill you can take your name out because you talked to the industry. I also did my due diligence, my own research, Mr.Chairman.

Chairman Senator Dennis Rodriguez, Jr: Thank you Senator Duenas.

Senator Duenas: Sorry for the exchange Mr.Chairman but I just really want to put that in the record.

Chairman Senator Dennis Rodriguez, Jr: Senator Yamashita, Senator Morrison?

Senator Morrison: Just real quick Mr. Chairman. Is the current 45 days is the industry practice?

Mr. Ray Schnabel: That was enacted in the law, I'm not sure when it was enacted but it was enacted law sometime in the last 10 years.

Senator Morrison: Okay, Thank you Mr. Chairman.

Chairman Senator Dennis Rodriguez, Jr: Vice Speaker, Senator San Nicolas?

Senator San Nicolas: Thank you Senator Rodriguez.

Senator San Nicolas: On the subject on the due diligence, I actually have, I look at this book very closely. Just one of the things that jump on me and I'm hoping you guys could help me to understand. The original law currently states that you guys were to remit the payment from the claims after 45 days. What jumped at me on that was having come from the private sector, I know that typically everything is broken down on the net 30 basis. And so for example if you buy



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medicine, if you buy supplies, the supplier typically will give you 30 days to make payment upon such time that if you do on the 30 days the terms are good. While after 30 days you be having higher cost for supplies or materials. That's my understanding on the supplier side but I'm not sure if it's consistent in the health industry. Is it the same as well were suppliers typically have net 30, net 60, net 90 were and cost go up as you break those different time segments.

Mr. Ray Schnabel: Are you speaking in terms of claims from providers or supplier like office supplies, computers or?

Senator San Nicolas: I'm speaking maybe because you're paying from the provider but let's say your doctor, and you need Tylenol for the office and you want to buy a big bulk order Tylenol. Do the suppliers typically allow you to do those bulks on net 45, net 90, net 135 or it is net 30, net 60, net 90. Because if 30, 60, 90 that's why I sign on to the bill because the sooner the Doctor can get his payment the sooner he can get his net 30, the lower the cost of the supplies and material. And that why when I look at this, the first question the thought on my head was why 45? The second one was why 21? Maybe there's a middle ground that we can find that everyone can agree with but if our Doctor, our clinic, our hospitals having to pay net 30 but their only going to get even a clean claim paid to them after 45 days and automatically were going to breach the 30 on the supplier. Automatically we can assume the best price which you would have gotten paying within 30 days of the table because you're not going to get a clean claim pay until 45 days later. I guess, if somebody can clarify that for me if the health industry different in terms of their time segment payment affects cost of goods.

Ms. Melissa Waibel : Hi I'm Melissa Waibel from Guam Surgery Center I can answer that question for you as somebody who has to purchase item for the facility. Many of our contract is net 30, some are net 15 so depending upon who are we dealing with supplies are actually bringing in; It can be less 30 days turn around. Obviously we have a difference in opinion; we obviously need the insurance company to be on island in order for us to do our job and to treat the patient that we bring in. Everybody has claims that go out, we might say it's claim they might say it's not claim. We have to negotiate those things as we go to the process. We got bills that on 120 plus day bucket for every carrier on island. That's for everybody so I'm not going to differentiate one between one insurance to another, it's part of doing business on Guam. It's a little different environment and stateside no; you get paid 30 days or less in the mainland.

Senator San Nicolas: Thank you very much for that and to follow up, if you're paying net 30, prices are lower than you're paying net 90 or at 60?

Ms. Melissa Waibel : Absolutely! It goes into bulk as well if we are purchasing larger supplies it certainly helps which means more patient volume if we purchase more items.

Senator San Nicolas: Added more patient volume or you're passing that cost into the patient for having to pay the increase cost of having to pay at net 60 versus having to pay at net 30?

Ms. Melissa Waibel : It's actually a little bit different at ambulatory surgery center we can't bill base on what it cost us for anything. The reimbursement is base on the code on what is the procedure



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the physician actually did. Our reimbursement is set at certain number and we have to operate under that number, and if we operate under that number then we make a lost for that case. And that's a bad investment for us and we have case that we do not only for the Government of Guam, MIP patient, Medicaid patients, Federal Government Medicare patient and we do cases that we take a lost for and we know that going in because we have to take care of the patient. There might not be another location on the island that can do that particular procedure and so we know that. It is helpful if we have cleaner claim and we get paid on a more rapid passion? Absolutely helps! But because our business model plan for being paid later, we tried to adjust and make sure we have enough revenue seating in the bank to be able to cover our loses and cover our expenses regardless if we get paid on time.

Senator San Nicolas: Okay so I have a question for you, if you did have access to that revenue that means you will be able to increase your service capacity to the people?

Ms. Melissa Waibel: Absolutely, if we are paid more efficiently, certainly. We could actually do more capital investing, bring more services to the island improve those things but by the same token, there's a whole other issue of how many are sent off island that they could received here. We lost business on our own backyard and we can't compete to places like the Philippines, pricing that they can provide there so it's a whole other separate issue.

Senator San Nicolas: I see, thank you very much. With respect to the insurance company, I guess it's very clear if we can work it out, we'll be able to get payment to the service provider within 30 days it's going to benefit the entire community. And I understand the strong case the Government has its issues and we have so many things that we have to pay. We just got to the budget cycle and you know that's something that we are always going to be struggling to it. I was laughing to myself maybe if we have extra 4% , we probably we're able to pay MIP and Medicare but seriously I think , what we need to do is we have to move closer to being able to match best price to best practices. And maybe 21 days is a little too tight but maybe 45 days is little to lose and maybe we can work together and the Chairman can probably coordinate we some additional dialogue to the insurance company on how can we find that middle ground. Because I think finding better prices by service provider is going to be a win, win across the board. The ability by them to be able to procure at lower prices but for them to be able to pass it on to the people that they serve. And maybe those saving will result on more people will be able to afford health insurance, more people insured. And that's the reason I signed into this bill and my do diligent I understood that the payment cycle in the private sector is 30, 60 90 days and were it is at 45 days maybe we can bring it down a little bit more, we might get a better prices for everyone else. I hope that we can all work together try to figure out away to do that and the Government stepping up more and making that payment on a more timely basis. That's something that I like to encourage our Governor to do. He manage the cash and so it his able to make the payment on a more timely basis so the insurance company will be able to get their money at front and more timely basis will be able to push back this 45 day timeline 30 God willing 15 that will be a really wonderful thing for our island. So I like to thank the author for his bravery and putting something like this , I know that every time we talk about making any kind of changes is difficult and I know that this also affect the cash position of the insurance company and I respect that . I also understand that the law the longer you have checks in float it's also more profitable for finance because your able to have instead of 21 days worth of deposit



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earning interest you have 45 days deposit earning interest. So we're talking this different finances the mechanism here but in the end the ultimate objective is for us to be able to get the supply that service providers to hopefully lower prices for our people but also working within the insurance industry that were not doing something that having more than an adverse effect than a help. Mr. Chairman I like to thank you for the opportunity and I hope we can be able to find something more tightly that everybody can benefit from.

Chairman Senator Dennis Rodriguez, Jr: Thank you Senator San Nicolas. If we have providers bill electronically perhaps you can pay them faster. And so I don't know that it's something that could be acceptable. And I don't know if our providers can, I'm sure that there's a few of them that can go on that direction. SDA is doing e-billing now, are you guys doing e-billing? Okay. And so that can be a compromise because the problem I'm hearing is that sometimes they are not clean, there are some things to be verified but if we do e-billing maybe we can get them paid like 10 days like Hawaii . Okay you know that's, you see Frances but I see Ray nodding his head. Maybe, maybe there's a way there.

Mr. Ray Schnabel: A lot of that is possible for quicker payment without a doubt but there are easier said and done. It's not like a light switch you turn on and there paid. A lot of work that needs to be done and a lot of work being done with regards to electronic billing to handle claims. No one once to review claims that's not very productive so we're always looking for ways to extreme line process.

Chairman Senator Dennis Rodriguez, Jr. : Yes, you're right and believe me , I for one want to make sure that the Government program and we will talk about this and it's also raise to high standard because it's not right to just throw it back to the private sector, it's not right. So you're starting to see that effort coming from the Legislature where we need to invest more in the Government program which we have, next Fiscal Year you will see that happening. And so we understand that, so when we approach this it has to be balance so okay will continue to have more discussion on this the public is still have opportunity to present testimony to the committee. We can have them drop off to my office; we have several doctors and physicians who walk in during the hearing. If you'd like to testify I invite you to come forward. Thank you. Just state your name Dr. Nguyen.

Dr. Nguyen: My name is Dr. Nguyen, I'm from American Medical Clinic and I just want to make a comment on the bill. It boils down to what you define a clean bill that we submit to the insurance company, for us we have electronic billing with Medicare. In Medicare we get paid 21 days. If we quote everything correctly, they pay 21 days. You know to get credit from insurance company; a lot of them do pay a lot faster than 45 days. We do a clean bill, we submit everything, your medical record the coding personnel will do the right thing; they do pay you on time. Like Frances said sometimes faster that 30 days if you do it correctly. If you put the bill on 21 days its kind of really short. Just like what Senator San Nicolas said, you got to come to a medium somewhere. I think 45 days is too long maybe you can come to middle. You have to commit that you have to submit the right thing but if you don't have EMR and you just have a lot of doctor's handwriting you can't read sometimes. You kind of wait for insurance company to decide of what to pay you and the services you do. So to me you got to be on both sides. The medical facility has to do their part, and the

Chairman, Committee on Health & Human Services, Health Insurance Reform, Economic Development, & Senior Citizens

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insurance have to do its own thing. I think we have a lot of thing to talk about this than to just put a cap on 21, 30 days. What we say it's a clean bill to the insurance company it might not be agree it's a clean bill. They may have to iron that flat form and say, "Hey, it's the rule you have to follow".

Chairman Senator Dennis Rodriguez, Jr. : Thank you, just a quick question, is that the practice now that coders are certified for insurance companies?

Dr. Nguyen: The coders are certified coders , it makes a lot of deference. What I told my folks and a lot of clinics is that , highest personnel that you have to pay for is coders and your billers. If you don't bill the right thing you don't get paid. It does not matter what kind of services you do. So you have to put investment in your coders and pay them to go get certified and they have to code correctly and send it before you can get paid, if you miss one little dot you won't get paid for it.

Chairman Senator Dennis Rodriguez, Jr. : Is it the standard now? I guess that's the question. Is it the standard that the coders are certified?

Dr. Nguyen: Our coders are certified I'm sure for Guam Surgery Center.

Ms. Melissa Waibel : That is the standard stateside as well that coders have to be certified. You have a coder working in your place that you send them to the right place and get certified or got that training on their own is part of that certification. To obtain that job is they have to be certified. The harder part for the coders on island is that there's not a lot of training for them here currently they have to go off island to receive that training, and that's expensive. But we do it, we send our coders off.

Chairman Senator Dennis Rodriguez, Jr.: There is an organization that provides that?

Ms. Melissa Waibel: Some but not it's not as multi focused.

Chairman Senator Dennis Rodriguez, Jr.: Because we know like coders at GMH are not certified, right? And so, we have been talking about this issue and so we need to, it's not mandated now but we know that we don't like hearing that we mandate so many things. But I think this is important. You know the bill I introduced last term on Bill 499, it's said that the hospital will be paid that at least 80% in 14 days , right ? And then you reconcile after but I said the only way the hospital can take advantage of that is if they out source their billing and collection. Because we knew that you guys weren't pleased with the claims you're getting, that's what the trigger was there. However, we got the same resistance here tonight and so you know but we got to do something. This bill tackles not just the hospital but tackles the private providers as well. We are going to move this discussion forward and see how we can make it work for everyone. Senator Respecio?

Senator Respecio: Just a final thought Mr. Chairman, I want to thank everybody for their participation tonight and maybe just as a point of reference that we focus on 30 days and not be scared off at number 21 , you heard from Dr.Shieh said that 30 days is somewhere in the middle. And maybe we can get to that point and provide some standard. You suggested to define what is a clean claim and in order for to get paid pursuant to this bill becomes law if we can agree to this



SENATOR DENNIS G. RODRIGUEZ, JR.

concept and maybe we can define what a clean claim is, and so if you meet those standard you can certainly have to be paid within 30 days or whatever the final of days. The community decide and the industry decide together with the Legislature because we don't want to impose any standard that are difficult to meet. We all live and Guam and we all want the same things and we also want to strike a win, win for all party involve. And so thank you Mr. Chairman and I look forward to evolution of this bill and I also like to thank my colleagues for their participation. Thank you.

Chairman Senator Dennis Rodriguez, Jr.: Thank you very much and thank you very much again and it's 8:07 pm and this hearing is adjourned.

III. FINDINGS AND RECOMMENDATIONS

The Committee on Health & Human Services, Health Insurance Reform, Economic Development and Senior Citizens, hereby **reports out Bill No. 94-32 (COR), as substituted** with the recommendation to REPORT OUT ONLY.

I MINA'TRENTAI DOS NA LIHESLATURAN GUÁHAN
2013 (FIRST) REGULAR SESSION

Bill No. 94-32 (COR)

Introduced by:

R.J. RESPICIO
T.C. Ada
Judith T. Won Pat, Ed.D.
T.R. Muña Barnes
Aline A. Yamashita, Ph.D.
Michael F. Q. San Nicolas
Chris M. Dueñas

AN ACT TO AMEND SECTIONS 9902(b),
9902(d), AND 9902(g) OF TITLE 10 GUAM
CODE ANNOTATED RELATIVE TO PROMPT
PAYMENT REQUIREMENTS FOR HEALTH
CARE AND HEALTH INSURANCE BENEFITS.

2013 APR 18 PM 3:55
3:55

1 BE IT ENACTED BY THE PEOPLE OF GUAM:

2 Section 1. § 9902(b) of Article 9 of Title 10 Guam Code Annotated,

3 "Prompt Payment for Health Care and Health Insurance Benefits," is

4 amended to read:

5 "(b) Health Plan Administrators shall reimburse a Clean Claim,

6 or any portion thereof, submitted by a patient or Health Care

7 Provider, that is eligible for payment and not contested or denied not

8 more than [~~forty-five (45)] twenty-one (21) calendar days after~~

9 receiving the Clean Claim filed in writing."

10 Section 2. § 9902(d) of Article 9 of Title 10 Guam Code Annotated,

1 "Prompt Payment for Health Care and Health Insurance Benefits," is
2 amended to read:

3 "(d) If information received pursuant to a request for additional
4 information is satisfactory to warrant paying the Clean Claim, the
5 Clean Claim shall be paid not more than [~~(45)~~] twenty-one (21)
6 calendar days after receiving the additional information in writing. "

7 Section 3. § 9902(g) of Article 9 of Title 10 of the Guam Code
8 Annotated, "Prompt Payment for Health Care and Health Insurance
9 Benefits," is amended to read:

10 "(g) Notwithstanding any provisions to the contrary, interest
11 shall be allowed to accrue at a rate of [~~(12%)~~] sixteen percent (16%)
12 per annum as damages for money owed by a Health Plan
13 Administrator for payment of a Clean Claim, or portion thereof, that
14 exceeds the applicable reimbursement time limitations under this
15 Section, including applicable costs for collecting past due payments
16 as provided in § 9905 of this Article, as follows:

17 (1) for an uncontested Clean Claim:

18 (i) filed in writing, interest from the first calendar
19 day after the ~~forty-five (45)~~ twenty-one (21) day period in

1 § 9902(b); or

2 (2) for a contested claim, or portion thereof, filed in
3 writing:

4 (i) for which notice was provided under § 9902(c),
5 interest from the first calendar day ~~forty-five (45)~~ twenty-
6 one (21) days after the date the additional information is
7 received; or

8 (ii) for which notice was provided, but not within
9 the time specified under § 9902(c), interest from the first
10 calendar day after the claim is received.”

-O-

I MINA' TRENTAI DOS NA LIHESLATURAN GUÅHAN
2013 (FIRST) Regular Session

Bill No. 94-32 (COR), as Substituted
Committee on Health & Human Services,
Health Insurance Reform, Economic
Development, and Senior Citizens

Introduced by:

R.J. Respicio
T.C. Ada
Judith T Won Pat, Ed.D.
T.R Muña-Barnes
Aline A. Yamashita, Ed.D.
Michael F.Q. San Nicolas
Chris M. Duenas

**AN ACT TO AMEND SECTIONS 9902(b), 9902(d),
AND 9902(g) OF TITLE 10 GUAM CODE
ANNOTATED RELATIVE TO PROMPT PAYMENT
REQUIREMENTS FOR HEALTH CARE AND
HEALTH INSURANCE REQUIREMENTS.**

1 **BE IT ENACTED BY THE PEOPLE OF GUAM:**

2 **Section 1.** §9902(b) of Article 9 of Title 10, Guam Code Annotated,
3 “Prompt Payment for Health Care and Health Insurance Benefits,” is amended to
4 read:

5 “(b) Health Plan Administrators shall reimburse a Clean Claim, or
6 any portion thereof, submitted by a patient or Health Care Provider, that is
7 eligible for payment and not contested or denied not more than (30) calendar
8 days ~~forty five (45) calendar days~~ after receiving the Clean Claim filed in
9 writing.”

1 **Section 2.** §9902(d) of Article 9 of Title 10, Guam Code Annotated,
2 “Prompt Payment for Health Care and Health Insurance Benefits,” is amended to
3 read:

4 “(d) If information received pursuant to a request for additional
5 information is satisfactory to warrant paying the Clean Claim, the Clean
6 Claim shall be paid not more than thirty (30) calendar days ~~forty-five (45)~~
7 ~~calendar days~~ after receiving the additional information in writing.”

8 **Section 3.** §9902(g) of Article 9 of Title 10, Guam Code Annotated,
9 “Prompt Payment for Health Care and Health Insurance Benefits,” is amended to
10 read:

11 “(g) Notwithstanding any provisions to the contrary, interest shall be
12 allowed to accrue at a rate of [~~12%~~] sixteen percent (16%) per annum as
13 damages for money owed by a Health Plan Administrator for payment of a
14 Clean Claim, or portion thereof, that exceeds the applicable reimbursement
15 time limitations under this Section, including applicable costs for collecting
16 past due payments as provided in § 9905 of this Article, as follows:

17 (1) for an uncontested Clean Claim:

18 (i) filed in writing, interest from the first calendar day after the
19 ~~forty-five (45) day period~~ thirty (30) day period in § 9902(b);

20 (2) for a contested claim, or portion thereof, filed in writing:

21 (i) for which notice was provided under § 9902(c), interest from
22 the first calendar day after the thirty (30) days ~~forty-five (45) days~~
23 after the date the additional information is received; or

1 (ii) for which notice was not provided, but not within the time
2 specified under § 9902(c), interest from the first calendar day after the
3 claim is received.”



SENATOR DENNIS G. RODRIGUEZ, Jr., Chairman
COMMITTEE ON HEALTH & HUMAN SERVICES, HEALTH INSURANCE REFORM,
ECONOMIC DEVELOPMENT AND SENIOR CITIZENS
Mina'trentai Dos Na Liheslaturan Guåhan • 32nd Guam Legislature

PUBLIC HEARING DATE / TIME: Monday, September 23, 2013 6pm

Bill No. 94-32 (COR), An act to amend sections 9902 (b), 9902 (d), and 9902 (g) of Title 10 Guam Code Annotated relative to prompt payment requirements for health care and health insurance benefits. Introduced R.J. Respicio/T.C. Ada/J.T. Won Pat, Ed.D.

PRINT NAME	SIGNATURE	AGENCY	ORAL TESTIMONY	WRITTEN TESTIMONY	IN FAVOR	OPPOSE	CONTACT NUMBERS	EMAIL ADDRESS
Melissa Wontal	<i>[Signature]</i>	GSC			no preference			m.wontal@guam.surgicentr.com
George Waibel	<i>[Signature]</i>	-			no preference			
Lhyza Pingo	<i>[Signature]</i>	SDA Clinic						
JENIFER AGUON	<i>[Signature]</i>	SDA CLINIC						
Teal Lewis	<i>[Signature]</i>	SDA						



P.O. Box 6578 Tamuning, Guam 96931
Telephone: (671) 646-6956 Fax (671) 647-3520

September 23, 2013

VIA EMAIL: senatordrodriguez@gmail.com

Senator Dennis G. Rodriguez, Jr.
CHAIRMAN, COMMITTEE ON HEALTH & HUMAN SERVICES,
HEALTH INSURANCE REFORM, ECONOMIC DEVELOPMENT
AND SENIOR CITIZENS
32nd GUAM LEGISLATURE
Suite 107, 176 Serenu Avenue
Tamuning, Guam 96931

Re: Written Testimony in Opposition to Bill No. 94-32

Dear Senator Rodriguez and Members of the Committee:

Thank you for the opportunity to submit written testimony on Bill No. 94-32 ("Bill No. 94"). I am the Health Plan Administrator at TakeCare Insurance Company, Inc. ("TakeCare") and provide these comments in that capacity. This letter supplements and updates TakeCare's June 11, 2013 written Testimony. Although TakeCare believes that health care providers are entitled to timely payment of claims for services rendered, TakeCare does not support Bill No. 94, which amends the Health Care Prompt Payment Act of 2000 (the "Prompt Payment Act"), for the reasons discussed below.

I. By Reducing the Payment Timeframe, Guam Will Have One of the Strictest Payment Timeframes in the U.S.

Lowering the current payment timeframe in 10 G.C.A. § 9902(b) from 45 calendar days to 21 calendar days will put Guam in a very small minority of jurisdictions with payment timeframes of approximately 21 days to process a clean claim submitted in "paper" format. In fact, based on TakeCare's research regarding healthcare claims payment legislation in the United States, it appears that only North Dakota requires third party payers, such as health insurance companies, to pay clean paper claims within 15 *working* days.¹ It appears that for the payment of clean claims submitted in paper format, most states require payment in the range of 30 to 45 days. For instance, Nebraska requires the payment of a clean paper claim within 45 calendar

¹ N.D. Cent. Code § 26.1-36.-37.1. TakeCare has not conducted exhaustive research into the matter but researched the prompt payment laws of a number of jurisdictions.

days, while Georgia requires payment within 30 calendar days.² Based on these numbers, Guam's current Prompt Payment Act appears to be in accord with most jurisdictions in the United States.

Moreover, in jurisdictions with prompt payment laws that provide for shorter payment timeframes, in order to avail of the shortened timeframes, providers in these jurisdictions are required to submit their clean claims to payers in electronic format. For example, Hawaii requires the payment of a clean claim submitted in electronic format to be paid within 15 calendar days, while Georgia requires the payment of the same clean claim within 15 working days.³ Although Bill 94 proposes to significantly reduce the amount of time required to pay a clean claim, it does not contain the same requirement present in other jurisdictions with reduced payment timeframes that the clean claim be submitted *electronically*.

Section 9903(c) of the Prompt Payment Act makes it permissive, rather than mandatory, that clean claims be submitted electronically. For this reason, in Guam, almost all providers submit paper claims for payment processing. The processing of paper claims is more time-consuming and less efficient than if electronic claims are submitted. Thus, the timeframe in which to review such claims is greater and requires additional time to process. The electronic submission of claims would improve the efficiency of claims processing as errors are much easier to identify and correct. If errors are detected, corrections may be made sooner than if a paper error is involved, as the paper error would have to be re-sent by mail or hand delivered. Electronic submission of claims also reduces the amount of paper involved and provides an automated tracking system of claim submittals and aging.

Therefore, if the Legislature is going to require health insurers to pay claims within a shorter timeframe, as in other jurisdictions, it should take the corresponding action of requiring providers, through legislation, to provide claims electronically for processing. Otherwise, the Legislature should consider a more reasonable timeframe for the processing of paper claims, i.e., 30 to 45 days, which is the case in the majority of jurisdictions reviewed.⁴ However, merely shortening the timeframe in which a third

² Neb. Rev. St. § 44-8004; Ga. Code Ann. § 33-24-59.5(b)(1). See S.C. Code Ann. § 38-59-230(A) (South Carolina requires payment of a clean paper claim within 40 business days); Alaska Stat. § 21.36.495 (Alaska requires payment of a claim, submitted in other than electronic format, within 30 calendar days); and N.J. Stat. Ann. § 17:48H-33.1(d)(1) (New Jersey requires payment of a clean paper claim within 40 calendar days).

³ Haw. Rev. Stat. Ann. § 431:13-108(b); Ga. Code Ann. § 33-24-59.5(b)(1). See Tenn. Code Ann. § 56-7-109(b)(1)(B) (Tennessee requires the payment of electronically submitted clean claims within 21 calendar days); S.C. Code Ann. § 38-59-230(B) (South Carolina requires payment of a clean claim submitted in electronic format within 20 business days); and New Hampshire Rev. Stat. § 415:6-h(I)(a) (New Hampshire requires the payment of a claim electronic claim within 15 calendar days).

⁴ TakeCare notes that Bill 94 also proposes amending the timeframe in 10 G.C.A. § 9902(d) in which payers must make a payment after receiving information on a contested claim from 45 calendar days to 21 calendar days. TakeCare submits that the timeframe should be consistent with the timeframe established for the payment of the *initial* clean claim as it is in other jurisdictions. See, e.g., Haw. Rev.

party payer is required to pay a claim, whether submitted in paper or electronic format, without improving the claim submittal process, will not necessarily improve the number of claims processed or the timeframe in which claims are processed as discussed below.

II. Reducing the Payment Timeframe, Without More, Will Not Improve the Processing of Claims.

In order for a health insurer to timely, accurately and efficiently process provider medical claims, the provider must submit a “clean claim” as required by the Prompt Payment Act. At a minimum, the claim must be legible, contain accurate coding and include supporting documentation so that the claim can be processed and reimbursed the first time it is submitted. Instead, because of the continued failure of providers in Guam to provide “clean claims,” health insurers and providers must engage in a series of denials and reprocessing which not only delays payment but also is costly and time-consuming for both parties. Therefore, instead of just holding health insurers responsible for prompt payment by reducing the amount of time to process claims, providers should share in the responsibility of prompt payment by providing clean claims for payment.

The failure of providers to present proper and accurate information and documentation will continue to result in the denial of claims or requests for additional information, even in the event the timeframe to pay is reduced.

III. Increasing the Interest Rate Penalty Will Not Result in the Improved Processing of Claims.

Aside from amending payment timeframes, Bill 94 also proposes to amend 10 G.C.A. § 9902(g) in an effort to provide penalty incentives for health insurers to improve the processing of claims. Specifically, Bill 94 proposes to change the current maximum amount providers are allowed to charge for the late payment of clean claims from 12% per annum to 16% per annum. However, it is unlikely that raising the interest rate by 4% per annum will result in the improved processing of claims.

Although no insurer would want to be in the position of having to pay such a penalty, the reality is that the delay in the processing of claims is directly related to the submission of “unclean claims” by providers. Further, the submission of electronic, as opposed to paper, claims would also better facilitate the processing of clean claims. Rather than imposing a harsher penalty on payers, the Legislature may want to consider positive incentives for the processing of claims by passing legislation which encourages

Stat. Ann. § 431:13-108(e) (“If information received pursuant to a request for additional information is satisfactory to warrant paying the claim, the claim shall be paid not more than thirty calendar days after receiving the additional information in writing, or not more than fifteen calendar days after receiving the additional information filed electronically, as appropriate.”); Ga. Code Ann. § 33-24-59.5(b)(1) (“If all of the listed documents or other information needed to process the claim has been received by the insurer, the insurer shall then have 15 working days for electronic claims or 30 calendar days for paper claims within which to process and . . . mail payment for the claim . . .”).

Senator Dennis G. Rodriguez, Jr.
September 23, 2013
Page 4 of 4

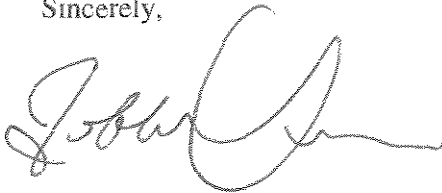
providers to give payers *reductions* in the event payers make payments in shorter periods of time. For the reasons noted, TakeCare disagrees with raising the maximum interest rate contained in the Prompt Payment Act.

CONCLUSION

For the reasons discussed above, TakeCare respectfully submits that Bill No. 94 should not be passed into law.

If you have any questions regarding these comments, you may contact us at the numbers listed below.

Sincerely,



Jeffrey P. Larsen
Chief Operations Officer
Email: jeffrey.larsen@takecareasia.com
Phone: 646-6956 x7107



Timothy J. Ogata
Health Plan Administrator
Email: timothy.ogata@takecareasia.com
Phone: 646-6956x7371



115 Chalan Santo Papa Hagåtña • P.O. Box FJ Hagåtña, Guam 96932 • Phone: (671) 477-9808 • Fax: (671) 477-4141

September 23, 2013

Senator Dennis G. Rodriguez, Jr.
Chairman: The Committee on Health and Human Services, Health Insurance Reform, Economic
Development and Senior Citizens
I Mina'trentai Dos Na Liheslaturan Guåhan
155 Hesler Place
Hagåtña, Guam 96910

Re: Bill No. 94-32

Dear Mr. Chairman:

My name is Raymond Schnabel. I am currently the Executive Manager for Calvo's SelectCare. I thank you for the opportunity to provide testimony on the above bill. I am here to provide testimony AGAINST Bill 94-32. This bill intends to reduce the current prompt payment timeline from 45 to 21 days. We believe the healthcare providers are well protected by the current law and most insurance companies are fairly compliant with the 45 day requirement to pay claims.

The introduction of this bill by this body at this time appears to be highly hypocritical and counter-productive. Let me explain. All health insurance contracts require that premium be paid prior to the commencement of coverage or prior to the 1st of the month. The Government of Guam (GovGuam) is roughly one thirds of the island's health insurance industry's premium. GovGuam uses its size and clout to re-write the payment provisions of its own health insurance contract. It stipulates that premium will be paid after a pay-period ends. In addition, it also allows itself another 15 days to tally everyone's payroll deductions before making its payment. Therefore, while all other customers are required to pay before the start of the month, one third of our customers, meaning GovGuam, allows itself to pay at the end of the month. To add insult to injury, GovGuam is normally another 10 days late from the date they are contractually obliged to pay. Some agencies are currently more than 8 pay-periods behind.

As we receive claims on the 1st, 2nd or 3rd of the month, this bill makes it extremely difficult to pay claims by the 22nd, 23rd and 24th of the same month when one third of our customers, meaning GovGuam, is not going to pay until the 40th day.

We will undoubtedly need to rely on the remaining private sector accounts to comply if this bill becomes law. However, not all private sector customers pay on time as either they are direct vendors of the government or their vendors are vendors of the government, they are not paid by GovGuam in a timely manner. To add to this bill's hypocrisy, health providers are also our customers as they provide health benefits for their employees. As a group, on average, they are 26 days late. This cash flow situation makes it very difficult to comply with a 21 day payment terms.

GovGuam did not get its notorious reputation for no reason. If this legislature wishes to have insurance companies and others pay sooner, then it should mandate that the government pay its own bills on time. I am almost certain that everyone on this island will be paid sooner.

Secondly, the bill fails to recognize that a short payment timeframe is based on highly electronic environments where paper claims hardly exist. Our island and its providers are still highly reliant on paper claims and the time allowed by this bill is not sufficient to process these claims.

In addition, if enacted, this bill will certainly have the effect of increasing paperwork between the health insurance industry, its providers, and our mutual customers. When cash flow gets tight and the industry is forced to tighten its receivables, it will undoubtedly have to suspend coverage on accounts for non-payment of premium. Providers routinely rely on the industry's confirmation that coverage exists prior to administering healthcare. What would providers do if we are unable to confirm coverage pending payment on most of our customers? I am unsure. However, I do know that this bill has the potential to create a significant amount of unproductive inconvenience for all involved.

Lastly, the bill also stipulates a much higher than normal interest rate penalty for these types of situations.

In summary, this bill is highly hypocritical; it will exacerbate the problems with claim payments; it will cause additional unproductive paperwork; in the end, it will cause more problems than it solves. We urge you not to pass this bill.

Thank you for the opportunity to testify against this bill.

Sincerely,

A handwritten signature in black ink, appearing to read "J. Schnabel". The signature is fluid and cursive, with a prominent initial "J" and a long, sweeping underline.

Executive Manager



September 23, 2013

Honorable Dennis G. Rodriguez, Jr.
Senator, 32nd Guam Legislature
Chairman, Committee on Health & Human Services, Health Insurance Reform,
Economic Development, & Senior Citizens
Hagatna, Guam

Re: Bill 94-32

Dear Senator Rodriguez:

Thank you for the opportunity to submit testimony of Bill 94-32 (COR) relative to prompt payment requirements for health care and health insurance benefits.

For the record, StayWell does not support this propose legislation.

If it is the desire of the 32nd Guam Legislature to pass this propose bill, StayWell is asking that this propose legislation be amended to read that StayWell is exempt from this act. I would strongly recommend that the other carriers, namely Calvos Selectcare and Netcare, both endorsed by the GMA be also included in this exemption.

As stated in the GMA news release, "Currently, Staywell, Calvo's Selectcare, and Netcare meet the standards of patient's choice of providers and credentialing; Prompt Payment of Claims; and Providers' Relations. Therefore, the **Guam Medical Association endorses Staywell, Calvo's Selectcare and Netcare Health Insurance** for your consideration as you discuss your choices with your family and your employers."

Thank you for your favorable consideration of our testimony.

Sincerely,

A handwritten signature in black ink, appearing to read "Francis E. Santos".

Francis E. Santos
Plan Administrator

Attachment-GMA Press Release

StayWell Guam, Inc.

430 W. Soledad Ave.
Hagatna, Guam 96910

T: (671) 477-5091 F: (671) 477-5096

Email: guammedicalassociation@gmail.com

Contact Erica Alford, MD

Ph: 647-8262

Press Release

Sept. 21, 2013

The Guam Medical Association Endorses

STAYWELL, CALVO'S SELECTCARE and NETCARE

Health Insurance

Tamuning – The Guam Medical Association is our island's largest health care provider network, with over 200 members and we serve as patient advocates. Patients rely on us for guidance and they often ask questions regarding their health insurance. The selection of an insurance plan is an important decision for every person, family and employer.

Our healthcare providers believe that health care plans should not only provide comprehensive coverage but also ensure patients have their choice of health care providers. Often the cheapest plan may not be the best plan for the money if your choices of providers and clinics are restricted. Additionally, the prompt payment of your medical claims is an important aspect to consider because you do not want to be responsible for claims which your insurance have failed to pay promptly. Lastly, relationship between your insurance company and your health care providers/clinics is another important factor. The patient-doctor-relationship is a bond to which there should be no interference by a third party.

Currently, Staywell, Calvo's Selectcare, and Netcare meet the standards of patient's choice of providers and credentialing; Prompt Payment of Claims; and Providers' Relations. Therefore, the **Guam Medical Association endorses Staywell, Calvo's Selectcare and Netcare Health Insurance** for your consideration as you discuss your choices with your family and your employers.

*GMA will re-evaluate this endorsement in the future and may add or remove plans.

RECEIPIENTS OF QUALIFYING CERTIFICATES
SINCE GEDA WAS CREATED BY P.L. 8-80
AS OF AUGUST 1989

<u>RECIPIENT</u>	<u>Q.C.</u> <u>NO.</u>	<u>DATE</u> <u>ISSUED</u>	<u>STATUS</u>
<u>1955</u> - NUMBER APPROVED: <u>1</u>			
1) Stratton Watch Corporation	101	11/24/65	11/23/75 (E)
<u>1956</u> - NUMBER APPROVED: <u>7</u>			
2) Phoenix Industries, Inc.	102	3/07/66	3/06/76 (E)
3) Westminster Time Corp.	103	3/07/66	3/06/76 (E)
4) S & G Tobacco Corp.	104	5/10/66	11/13/72 (S)
5) N & J Liquor Corp.	105	5/10/66	5/09/76 (E)
6) Hallmark Watch Factory, Inc.	106	5/16/66	5/15/76 (E)
7) Benson Rand Bracelet Corp.	107	4/22/66	8/21/76 (E)
8) Pacific Watch Corporation	108		6/23/66 (D)
9) Precision Instruments, Inc.	109		8/12/66 (D)
10) MARO Watch Company Inc.	110		8/02/66 (D)
11) Esgro Manufacturing Corp.	111	3/31/66	9/15/67 (S)
<u>1967</u> - NUMBER APPROVED: <u>6</u>			
12) Mobil Homes Inc.	112		1/06/67 (D)
13) Guam Candy Company. Inc.	113	1/20/67	6/06/73 (S)
14) Guam Diversified Indust., Inc.	114	1/20/67	12/05/67 (R)
15) Sheraton Time Corporation	115		2/28/67 (D)
16) Hunt & Behrens (Guam), Inc.	116	2/20/67	2/19/81 (E)
17) Guam Hardwoods, Inc.	117	5/26/67	9/25/76 (S)
18) Hotels of the Marianas, Inc. (Hilton)	118	7/01/67	Rescinded by Q. C. 169
19) Jadeite, Inc.	119	11/03/67	6/11/68 (S)
<u>1968</u> NUMBER APPROVED: <u>4</u>			
20) Flores Corporation	120		4/30/68 (D)
21) Guam Oil & Refining Co., Inc.	121	7/08/68	12/10/84 (S)
22) Chevron Oil Company of Guam	122	7/09/68	8/05/70 (S)
23) Pacific Treated Lumber Co., Inc.	123	12/04/68	5/17/74 (S)
24) Continental Agana Hotel Corp.	124	11/04/68	1/27/81 (S)
<u>1969</u> - NUMBER APPROVED: <u>3</u>			
25) Tumon beach Hotel Corp. (Fujita Hotel)	125	1/07/69	Rescinded by Q. C. 195
26) Tokyu Micronesia Dev. Corp.	126	5/27/69	12/03/79 (S)
27) MARO Watch Co., Inc.	127	8/27/69	7/27/77 (S)

1970 - NUMBER APPROVED: 3

28)	San Miguel Brewing Co., (Guam), Inc.	128	4/29/70	Ceased Operations
29)	Guam Resorts, Inc. (Okura Hotel)	129	5/21/70	Rescinded by Q. C. 179
30)	Guam Dai-Ichi Hotel, Inc.	130	8/25/70	Rescinded by Q. C. 190

1971 - NUMBER APPROVED: 3

31)	J & G Cliff Hotel, Inc.	131	2/10/71	Ceased Operations
32)	Service & Development Corp.	132	7/07/71	Ceased Operaitons
33)	Stan Foam, Inc.	133	11/18/71	Ceased Operations

1972 - NUMBER APPROVEED: 10

34)	Guam Kakuei Co., Ltd. (Kakuei Hotel)	134	6/21/72	9/07/84 (E)
35)	Chamorro-American Manufacturing and Export Inc.	135	5/31/72	2/09/77 (E)
36)	Aguilar Enterprises, Inc.	136	7/06/72	10/06/76 (S)
37)	Town Knits, Inc.	137	6/06/72	12/26/73 (S)
38)	Marianas Modulares, Inc.	138	9/04/72	2/06/73 (S)
39)	Corn Garment Mfg., Corp.	139	6/22/72	Ceased Operations
40)	Sunrise Carpet Co., Inc.	140	8/31/72	12/27/74 (S)
41)	Towa Reef Hotel, Inc.	141	9/07/72	9/06/84 (E)
42)	Guamerica Inc.	142	9/07/72	8/15/78 (S)
43)	Airport Plaza Hotel Development Ventures, Inc.	143	10/16/72	9/14/76 (E)

1973 - NUMBER APPROVED: 9

44)	Ida International Guam Inc	144	1/26/73	Never Operational
45)	Hafa Adai Textiles Inc.	145	3/28/73	Ceased Operations
46)	Dasyn International, Inc.	146	3/28/73	Ceased Operations
47)	Guam Amusement Park, Inc.	147	5/31/73	12/13/79 (S)
48)	Guam Daikyo Co., Ltd.	148	7/23/73	11/18/74 (S)
49)	James Lee & Co. (Guam) Ltd. (Tumon Royal)	149		Withdrawn by Corporation
50)	Mandarin Hotel	150	10/24/73	Never Operational
51)	Castle International Hotel	151	7/18/73	Never Operational
52)	Perez Towers Inc.	152		Withdrawn by Corporation
53)	Jay Gilbert Co., Inc.	153	10/15/73	Ceased Operations
54)	Guam Textile Corporation	154	11/01/73	9/10/76 (S)

1974 - NUMBER APPROVED: 0

1975 - NUMBER APPROVED: 0

1976 - NUMBER APPROVED: 4

55)	Guam Mfg., & Textile Corp.	155	1/16/76	Ceased Operations
56)	Modern Textile, Inc.	156	1/16/76	Ceased Operations
57)	GRC Enterprises, Inc.	157	1/16/76	4/24/78 (S)
58)	Textiles of Guam, Inc.	158	5/27/76	Ceased Operations

1977 - NUMBER APPROVED: 1

59)	Guam Marine Products, Inc.	159	1/19/77	11/14/85 (S)
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1978 - NUMBER APPROVED: 1

60)	Guam Plastics Corporation	160	6/29/78	5/11/82 (S)
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1979 - NUMBER APPROVED: 2

61)	Guam Micronesian Cultural Center	161	8/21/79	Never Operational
62)	General Atlantic Development Corp. dba PIC & PIH	162	11/26/79	Rescinded by Q. C. 192
63)	Bel Air Development, Inc.	163		Denied by Board

1980 - NUMBER APPROVED: 0

1981 - NUMBER APPROVED: 4

64)	Pacific Color Press, Inc.	164	2/12/81	8/11/83 (S)
65)	Cocos Lagoon Development Corp.	165	7/25/81	In Operation
66)	Sigallo Pac Limited	166	9/01/81	In Operation
67)	Timewise Limited	167	12/09/81	4/21/88 (S)

1982 - NUMBER APPROVED: 11

68)	Cliff Hotel, Inc.	168	7/22/82	7/21/88 (S)
69)	Hotels of the Marianas, Inc. (Hilton Hotel)	169	4/30/82	In Operation
70)	Aqua Technical Lab., Inc.	170	5/07/82	12/29/87 (S)
71)	Big Eye Helicopters	171	4/02/82	In Operation
72)	Eagle Enterprises, Inc.	172		Denied by Board
73)	City Hill Co., (Guam) Ltd.	173	8/18/82	In Operation
74)	Guamsons Industries, Inc.	174		Denied by Board
75)	Guam Fresh, Inc.	175	9/07/82	In Operation
76)	Western Frontier Village, Inc.	176	9/27/82	11/19/86 (S)
77)	Tokyu Micronesian Development Corporation	177		Denied by Board
78)	System Homes International	178	11/26/82	Ceased Operations
79)	Guam Resorts, Inc. (Okura)	179	12/17/82	In Operation
80)	Republic of Nauru (Guam), Inc. (Pacific Star Hotel)	180	9/23/82	In Operation
81)	Pacific Telecommunications	181	12/30/82	Ceased Operations

1983 - NUMBER APPROVED: 1

82)	OHMS Corporation	182	10/29/83	11/07/83 (S)
83)	Goodwind Development Corp.	183		Withdrawn by Corporation
84)	Pacific Guam Food, Inc.	184		Withdrawn by Corporation

1984 - NUMBER APPROVED: 4

85)	Six D Enterprises, Inc.	185	11/14/84	Under Construction
86)	Cobblestone Square, Inc.	186	10/16/84	7/03/88 (S)
87)	I T & E Overseas, Inc.	187	11/24/84	In Operation
88)	Caravelle Pour Homes (Guam), Inc.	188	12/19/84	6/05/85 (R)

1985 - NUMBER APPROVED: 4

89)	Jones Beach Resort, Inc.	189	2/22/85	In Operation
90)	Guam Dai-Ichi Hotel, Inc.	190	6/25/85	In Operation
91)	Guam Technology, Inc.	191	5/27/85	9/14/88 (R)
92)	GA-Pacific Development Corp.	192	7/25/85	In Operation
93)	Rainmaker Development Inc.	193		Withdrawn by Corporation
94)	American Textile Corp.	194		3/30/86 (D)

1986 - NUMBER APPROVED: 2

95)	Tumon Beach Hotel Corp. (Fujita Hotel)	195	2/21/86	9/11/87 (S)
96)	Tumon Hillside Corporation	196	6/06/86	In Operation

1987 - NUMBER APPROVED: 0

97)	American Sotetsu Corporation	197		Denied by Board
98)	World Bell, Inc.	198		Withdrawn by Corporation

1988 - NUMBER APPROVED: 0

1989 - NUMBER APPROVED: 5

99)	Guam Palace Corporation	199	5/31/89	Under Construction
100)	Atlantis-Guam, Inc.	200		Pending Board Action
101)	Y Guahan Airways Inc.	201	7/27/89	In Operation
102)	TNN Guam, Inc.	202	6/07/89	Under Construction

103)	Sandcastle, Inc.	203		Pending Gov's Action
104)	Towa Reef Hotel, Inc.	204	5/22/89	In Operation
105)	Z's Stars & Stripes Inc.	205		Denied by Board
106)	World Bell, Inc.	206	1/13/89	Under Construction
107)	Dial Household Rentals (Guam) Corp.	207		Denied by Board

(D) Disapproved by Governor
(E) Expired
(R) Revoked
(S) Surrendered

NOTE: Active Recipients in Bold Printing.



COMMITTEE ON RULES

I Mina'trentai Dos na Liheslaturan Guåhan • The 32nd Guam Legislature

155 Hesler Place, Hagåtña, Guam 96910 • www.guamlegislature.com

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Senator
Rory J. Respicio
CHAIRPERSON
MAJORITY LEADER

Senator
Thomas C. Ada
VICE CHAIRPERSON
ASSISTANT MAJORITY LEADER

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MINORITY LEADER

Senator
Aline Yamashita
Member


Certification of Waiver of

Fiscal Note Requirement


This is to certify that the Committee on Rules submitted to the Bureau of Budget and Management Research (BBMR) a request for a fiscal note, or applicable waiver, on **BILL NO. 94-32 (COR)** – “AN ACT TO AMEND SECTIONS 9902(b), 9902(d), AND 9902(g) OF TITLE 10 GUAM CODE ANNOTATED RELATIVE TO PROMPT PAYMENT REQUIREMENTS FOR HEALTH CARE AND HEALTH INSURANCE BENEFITS.” – on November 4, 2013. COR hereby certifies that BBMR confirmed receipt of this request on April 22, 2013 at 8:22 A.M.

COR further certifies that a response to this request was not received. **Therefore, pursuant to 2 GCA §9105, the requirement for a fiscal note, or waiver thereof, on Bill 94-32 (COR) to be included in the committee report on said bill, is hereby waived.**

Certified by:



Senator Rory J. Respicio
Chairperson, Committee on Rules



Date



COMMITTEE ON RULES

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Member
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Member

April 22, 2013

VIA FACSIMILE
(671) 472-2825

John A. Rios
Director
Bureau of Budget & Management Research
P.O. Box 2950
Hagåtña, Guam 96910

RE: Request for Fiscal Note – Bill Nos. 90-32(COR), 91-32 (COR), 92-32 (COR), 93-32(COR), 94-32(COR), and 95-32(COR)

Håfa Adai Mr. Rios:

Transmitted herewith is a listing of *I Mina'trentai Dos na Liheslaturan Guåhan's* most recently introduced bill. Pursuant to 2 GCA §9103, I respectfully request the preparation of fiscal notes for the referenced bill.

Si Yu'os ma'åse' for your attention to this matter.

Very Truly Yours,

Senator Rory J. Respicio
Chairperson, Committee on Rules

Attachments

Cc: Clerk of the Legislature

2013 APR 22 AM 8:32

Bill Nos.	Sponsor	Title
90-32 (COR)	T. R. Muna Barnes	AN ACT TO AMEND §§18102, 18103, 18105, 18105.1, 18106, 18108, 18112, 18113, 18114, 18121, 18125, 18126, 18128.4, 18128.5, 18128.7, 18128.8, 18129, 18131, AND 18133 OF DIVISION 1 OF CHAPTER 18 OF TITLE 10 GUAM CODE ANNOTATED, RELATIVE TO THE BARBERING AND COSMETOLOGY ACT OF 2010
91-32 (COR)	Rory J. Respicio	AN ACT TO EARMARK ALL TAX REVENUE DERIVED FROM THE OPERATION OF ANY NEW ACUTE CARE HOSPITAL FACILITY, AND TO APPROPRIATE SUCH EARMARKED REVENUE TO THE GUAM MEMORIAL HOSPITAL AUTHORITY TO SUPPLEMENT PHARMACEUTICAL AND RELATED SUPPLIES.
92-32 (COR)	Michael T. Limtiaco, T.R. Muña Barnes	AN ACT TO ADD A NEW SUB-ITEM (1) TO 21 GCA § 61103(q), RELATIVE TO DEFINING A BED AND BREAKFAST; TO AMEND 21 GCA § 61305, 21 GCA § 61306, AND 21 GCA §61307, RELATIVE TO ADDING A BED AND BREAKFAST TO THE LIST OF USES PERMITTED AND CONDITIONAL USES ALLOWED IN AN R1, R2 AND COMMERCIAL ZONE.
93-32 (COR)	T. R. Muna Barnes	AN ACT TO AMEND §12015.5, CHAPTER 12, TITLE 12, GUAM CODE ANNOTATED, RELATIVE TO THE WATER AND SEWER SYSTEM DEVELOPMENT CHARGE.
94-32 (COR)	R.J. Respico, T.C. Ada, Judith T. Won Pat, Ed.D, T.R. Muna Barnes, Aline A. Yamashita, Ph.D., Michael F.Q. San Nicolas, Chris M. Duenas	AN ACT TO AMEND SECTIONS 9902(b), 9902(d), AND 9902(g) OF TITLE 10 GUAM CODE ANNOTATED RELATIVE TO PROMPT PAYMENT REQUIREMENTS FOR HEALTH CARE AND HEALTH INSURANCE BENEFITS.
95-32 (COR)	Judith T. Won Pat, Ed.D, T.R. Muna Barnes, R.J. Respicio,	AN ACT TO APPROPRIATE THE SUM OF THREE MILLION ONE HUNDRED THOUSAND DOLLARS (\$3,100,000.00) ESCHEATED TO THE GENERAL FUND, PURSUANT TO §21116 OF CHAPTER 21, DIVISION 2, TITLE 5, GUAM CODE ANNOTATED, FOR THE PURPOSE OF SUPPORTING UNFUNDED GOVERNMENT OF GUAM OBLIGATIONS



COMMITTEE ON RULES

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MINORITY LEADER

Senator
Aline Yamashita
Member

April 19, 2013

MEMORANDUM

To: **Rennae Meno**
Clerk of the Legislature

Attorney Therese M. Terlaje
Legislative Legal Counsel

From: **Senator Rory J. Respicio**
Majority Leader & Rules Chair

Subject: **Referral of Bill No. 94-32(COR)**

As the Chairperson of the Committee on Rules, I am forwarding my re referral of Bill No. **94-32(COR)**.

Please ensure that the subject bill is referred, in my name, to the respective committee, as shown on the attachment. I also request that the same be forwarded to all members of *I Mina'trentai Dos na Liheslaturan Guåhan*.

Should you have any questions, please feel free to contact our office at 472-7679.

Si Yu'os Ma'åse!

Attachment

I Mina'Trentai Dos Na Liheslaturan Guahan
Bill Log Sheet

BILL NO.	SPONSOR	TITLE	DATE INTRODUCED	DATE REFERRE D	CMTE REFERRED	PUBLIC HEARING DATE	DATE COMMITTEE REPORT FILED	FISCAL NOTES
94-32 (COR)	R.J. Respico, T.C. Ada, Judith T. Won Pat, Ed.D, T.R. Muna Barnes, Aline A. Yamashita, Ph.D., Michael F.Q. San Nicolas, Chris M. Duenas	AN ACT TO AMEND SECTIONS 9902(b), 9902(d), AND 9902(g) OF TITLE 10 GUAM CODE ANNOTATED RELATIVE TO PROMPT PAYMENT REQUIREMENTS FOR HEALTH CARE AND HEALTH INSURANCE BENEFITS.	4/18/13 3:55pm	4/19/13	Committee on Health and Human Services, Health Insurance Reform, Economic Development and Senior Citizens			



FIRST NOTICE OF PUBLIC HEARING-September 23, 2013

Joseph Anthony Mesngon <jmesngon.senatorrodriguez@gmail.com>
To: Joseph Anthony Mesngon <jmesngon.senatorrodriguez@gmail.com>
Cc: phnotice@guamlegislature.org

Wed, Sep 18, 2013 at 9:01 AM

September 18, 2013

MEMORANDUM

TO: ALL SENATORS, STAKEHOLDERS and MEDIA
FROM: Senator Dennis G. Rodriguez, Jr.
SUBJECT: SECOND NOTICE OF PUBLIC HEARING-September 23, 2013

Buenas yan Hafa Adai!

The Committee on Health and Human Services, Health Insurance Reform, Economic Development and Senior Citizens has scheduled a public hearing for **Monday, September 23, 2013 in the Legislature's Public Hearing Room**. The items on the agenda are as follows:

6:00 p.m.

Bill No. 167-32 (COR), An act to repeal § 23113 of Chapter 23, Title 22 of the Guam Code Annotated to remove the current tax exemption on premiums collected by insurance companies as part of the QC program. Introduced R.J. Respicio.

Bill No. 94-32 (COR), An act to amend sections 9902 (b), 9902 (d), and 9902 (g) of Title 10 Guam Code Annotated relative to prompt payment requirements for health care and health insurance benefits. Introduced R.J. Respicio/T.C. Ada/J.T. Won Pat, Ed.D.

I look forward to your presence and participation.

*This notice is issued in compliance with the Open Government Law. Additionally, the committee complies with the Americans With Disabilities Act. Individuals requiring assistance or aides for the public hearing are asked to contact the Office of Senator Rodriguez at 649-8638 no later than 48 hours prior to the scheduled hearing.

*Written testimonies may be addressed to Chairman, Committee on Health and Human Services, Health Insurance Reform, Economic Development and Senior Citizens and sent to 176 Serenu Ave. Suite 107 Tamuning, Guam 96931, emailed to senatorrodriguez@gmail.com, or to the Legislature Mailroom at 155 Hesler Place Hagatna, Guam 96910.

Joseph A. Q. Mesngon
C. Jice of Senator Dennis G. Roaiguez, Jr.
I Mina'trentai Dos Na Liheslaturan Guahan
32nd Guam Legislature
176 Serenu Avenue Suite 107
Tamuning, Guam 96913
Tel: 671.649.8638/0511

Fax: 671-649-0520
Please visit us at:
www.toduguam.com

On Mon, Sep 16, 2013 at 10:47 PM, Amanda Shelton <amanda@toduguam.com> wrote:
[Quoted text hidden]



FIRST NOTICE OF PUBLIC HEARING-September 23, 2013

<mailto:amanda@toduguam.com>

Amanda Shelton <amanda@toduguam.com>

Mon, Sep 16, 2013 at 10:47 PM

To: phnotice@guamlegislature.org

MEMORANDUM

TO: ALL SENATORS

FROM: Senator Dennis G. Rodriguez, Jr.

SUBJECT: FIRST NOTICE OF PUBLIC HEARING-September 23, 2013

Buenas yan Hafa Adai!

The Committee on Health and Human Services, Health Insurance Reform, Economic Development and Senior Citizens has scheduled a public hearing for **Monday, September 23, 2013** The items on the agenda are as follows:

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I look forward to your presence and participation.

—
Si Yu'os Ma'åse'!
Amanda L. Shelton
Chief of Staff
Office of Senator Rodriguez

649-8638
www.toduguam.com

 **Public Hearing Notice-September 23, 2013.pdf**
225K

Adam Bearce <adam@guamlegislature.org>

Tue, Sep 17, 2013 at 7:54 AM

To: Amanda Shelton <amanda@toduguam.com>, Yong Pak <yong@guamlegislature.org>

Thanks. This is now posted.

[Quoted text hidden]

Amanda Shelton <amanda@toduguam.com>
To: Adam Bearce <adam@guamlegislature.org>

Tue, Sep 17, 2013 at 8:47 AM

Thanks Adam!

[Quoted text hidden]

Joseph Anthony Mesngon <jmesngon.senatorrodriguez@gmail.com>
To: Joseph Anthony Mesngon <jmesngon.senatorrodriguez@gmail.com>
Cc: phnotice@guamlegislature.org

Wed, Sep 18, 2013 at 9:01 AM

September 18, 2013

MEMORANDUM

TO: ALL SENATORS, STAKEHOLDERS and MEDIA
FROM: Senator Dennis G. Rodriguez, Jr.
SUBJECT: SECOND NOTICE OF PUBLIC HEARING-September 23, 2013

Buenas yan Hafa Adai!

The Committee on Health and Human Services, Health Insurance Reform, Economic Development and Senior Citizens has scheduled a public hearing for **Monday, September 23, 2013 in the Legislature's Public Hearing Room**. The items on the agenda are as follows:

6:00 p.m.

Bill No. 167-32 (COR), An act to repeal § 23113 of Chapter 23, Title 22 of the Guam Code Annotated to remove the current tax exemption on premiums collected by insurance companies as part of the QC program. Introduced R.J. Respicio.

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I look forward to your presence and participation.

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*Written testimonies may be addressed to Chairman, Committee on Health and Human Services, Health Insurance Reform, Economic Development and Senior Citizens and sent to 176 Serenu Ave. Suite 107 Tamuning, Guam 96931, emailed to senatorrodriguez@gmail.com, or to the Legislature Mailroom at 155 Hesler Place Hagatna, Guam 96910.

Joseph A. Q. Mesngon
C. Jice of Senator Dennis G. Roanquez, Jr.
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32nd Guam Legislature
176 Serenu Avenue Suite 107
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Fax: 671-649-0520
Please visit us at:
www.toduguam.com

On Mon, Sep 16, 2013 at 10:47 PM, Amanda Shelton <amanda@toduguam.com> wrote:
[Quoted text hidden]



FIRST NOTICE OF PUBLIC HEARING-September 23, 2013

Amanda Shelton <amanda@toduguam.com>

Mon, Sep 16, 2013 at 10:47 PM

Bcc: Clynt Ridgell <clynt@spbguam.com>, Duane George <dmgeorge@guampdn.com>, dtamondong@guampdn.com, editor@mvariety.com, gdumat-ol@guampdn.com, gerry@mvguam.com, Sabrina Salas Matanane <hottips@kuam.com>, john@kuam.com, Josh Tyquiengco <jtyquiengco@spbguam.com>, mpieper@guampdn.com, mvariety@pticom.com, news@spbguam.com, nick.delgado@kuam.com, parroyo@k57.com, Sabrina Salas Matanane <sabrina@kuam.com>, slimtiaco@guampdn.com, zita@mvguam.com, Amritha Alladi <aalladi@guampdn.com>, Arvin Temkar <aktemkar@guampdn.com>, Cameron Miculka <cimiculka@guampdn.com>, "David V. Crisostomo" <dcrisostomo@guampdn.com>, "George, Duane M" <dmgeorge@guam.gannett.com>, gerry partido <gerrypartido.mvguam3@gmail.com>, James <officemanager@hitradio100.com>, Jason Salas <jason@kuam.com>, Jerick Sablan <jpsablan@guampdn.com>, "Jon A. Anderson" <editor@mvguam.com>, Joy <joy@mvguam.com>, Jr <news@lifeneews.com>, Katrina <life@guampdn.com>, Ken Quintanilla <kenq@kuam.com>, Kevin Kerrigan <kevin@spbguam.com>, Kevin Kerrigan <news@k57.com>, Marvic Cagurangan <marvic@mvguam.com>, Mindy Aguon <mindy@kuam.com>, Oyaol Ngirairiki <odngirairiki@guampdn.com>, Pacific Daily News <news@guampdn.com>, "rgibson@k57.com" <rgibson@k57.com>, Travis Coffman <thebigshow@k57.com>, William Gibson <breakfastshowk57@gmail.com>, rose.grino@takecareasia.com, "Larsen, Jeffrey" <Jeff.Larsen@takecareasia.com>, Timothy.Ogata@takecareasia.com, fsantos@staywellguam.com, Jason Rios <jsrios@staywellguam.com>, frank.campillo@calvosinsurance.com, jcrisostomo@netcarelifeandhealth.com, Tom Shieh <guammedicalassociation@gmail.com>

Hala Adai,

Please see attached notice of public hearing. If you have any questions or concerns, please contact the office of Senator Rodriguez. Thank you.

FOR IMMEDIATE RELEASE

September 16, 2013

PRESS RELEASE

FIRST NOTICE OF PUBLIC HEARING

Monday, September 23, 2013, 6:00 p.m.

In accordance with the Open Government Law, Public Law 24-109, relative to notice for Public Meetings. Please be advised that the Committee on Health & Human Services, Insurance Reform, Economic Development and Senior Citizens will be conducting a public hearing **Monday, September 23, 2013, 6:00 p.m.** at *Liheslaturan Guåhan's* Public Hearing Room in Hagåtña, on the following:

6:00 p.m.

Bill No. 167-32 (COR), An act to repeal § 23113 of Chapter 23, Title 22 of the Guam Code Annotated to remove the current tax exemption on premiums collected by insurance companies as part of the QC program. Introduced by R.J. Respicio.

Bill No. 94-32 (COR), An act to amend sections 9902 (b), 9902 (d), and 9902 (g) of Title 10 Guam Code Annotated relative to prompt payment requirements for health care and health insurance benefits. Introduced by R.J. Respicio/T.C. Ada/J.T. Won Pat, Ed.D.

Testimony should be addressed to Senator Dennis Rodriguez, Jr., Chairman, and may be submitted via- hand delivery to our office at 176 Serenu Avenue Suite 107 Tamuning, Guam 96931 or our mailbox at the Main Legislature Building at 155 Hesler Place, Hagåtña, Guam 96910, or via email to senatordrodriguez@gmail.com.

We comply with Title II of the Americans with Disabilities Act (ADA). Individuals who require an auxiliary aid or service (i.e. qualified sign language interpreters, documents in Braille, large print, etc.) for effective communication, or a modification of policies or procedures to participate in a program service, or activity of Senator Dennis Rodriguez, Jr. should contact our office at 649-8638 (TODU) as soon as possible but no later than 48 hours before this scheduled event. We look forward to your attendance and participation.

For further information, please contact the Office of Senator Dennis Rodriguez, Jr. at 649-8638 (TODU).

###

**Listserv: phnotice@guamlegislature.org
As of September 3, 2013**

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SENATOR DENNIS G. RODRIGUEZ, JR.

AGENDA

Monday, September 23, 2013

6pm

Public Hearing Room, *I Liheslatura*

I. Call to Order

II. Items public consideration:

- **Bill No. 167-32 (COR)**, An act to repeal § 23113 of Chapter 23, Title 22 of the Guam Code Annotated to remove the current tax exemption on premiums collected by insurance companies as part of the QC program. Introduced R.J. Respicio.
- **Bill No. 94-32 (COR)**, An act to amend sections 9902 (b), 9902 (d), and 9902 (g) of Title 10 Guam Code Annotated relative to prompt payment requirements for health care and health insurance benefits. Introduced R.J. Respicio/T.C. Ada/J.T. Won Pat, Ed.D.

III. Adjournment

Testimonies may be addressed to Sen. Dennis G. Rodriguez, Jr. and sent or to 155 Hesler St. Hagatna, Guam, the Guam Legislature's Mailroom, or via email at senatordrodriguez@gmail.com.

Si Yu'os Ma'åse' for your participation in today's hearings and discussions!



COMMITTEE ON RULES

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V. Anthony Ada
Member
MINORITY LEADER

Senator
Aline Yamashita
Member

April 19, 2013

MEMORANDUM

To: **Rennae Meno**
Clerk of the Legislature

Attorney Therese M. Terlaje
Legislative Legal Counsel

From: **Senator Rory J. Respicio** 
Majority Leader & Rules Chair

Subject: **Referral of Bill No. 94-32(COR)**

As the Chairperson of the Committee on Rules, I am forwarding my re referral of Bill No. **94-32(COR)**.

Please ensure that the subject bill is referred, in my name, to the respective committee, as shown on the attachment. I also request that the same be forwarded to all members of *I Mina'trentai Dos na Liheslaturan Guåhan*.

Should you have any questions, please feel free to contact our office at 472-7679.

Si Yu'os Ma'åse!

Attachment

I MINA'TRENTAI DOS NA LIHESLATURAN GUÅHAN
2013 (FIRST) REGULAR SESSION

Bill No. 94-32 (COR)

Introduced by:

R.J. RESPICIO
T.C. Ada
Judith T. Won Pat, Ed.D.
T.R. Muña Barnes
Aline A. Yamashita, Ph.D.
Michael F. Q. San Nicolas
Chris M. Dueñas

AN ACT TO AMEND SECTIONS 9902(b),
9902(d), AND 9902(g) OF TITLE 10 GUAM
CODE ANNOTATED RELATIVE TO PROMPT
PAYMENT REQUIREMENTS FOR HEALTH
CARE AND HEALTH INSURANCE BENEFITS.

2013 APR 18 PM 3:55
3:55

1 BE IT ENACTED BY THE PEOPLE OF GUAM:

2 Section 1. § 9902(b) of Article 9 of Title 10 Guam Code Annotated,
3 "Prompt Payment for Health Care and Health Insurance Benefits," is
4 amended to read:

5 "(b) Health Plan Administrators shall reimburse a Clean Claim,
6 or any portion thereof, submitted by a patient or Health Care
7 Provider, that is eligible for payment and not contested or denied not
8 more than [~~forty-five (45)~~] twenty-one (21) calendar days after
9 receiving the Clean Claim filed in writing."

10 Section 2. § 9902(d) of Article 9 of Title 10 Guam Code Annotated,

1 **“Prompt Payment for Health Care and Health Insurance Benefits,” is**
2 **amended to read:**

3 “(d) If information received pursuant to a request for additional
4 information is satisfactory to warrant paying the Clean Claim, the
5 Clean Claim shall be paid not more than [~~45~~] twenty-one (21)
6 calendar days after receiving the additional information in writing. “

7 **Section 3. § 9902(g) of Article 9 of Title 10 of the Guam Code**
8 **Annotated, “Prompt Payment for Health Care and Health Insurance**
9 **Benefits,” is amended to read:**

10 “(g) Notwithstanding any provisions to the contrary, interest
11 shall be allowed to accrue at a rate of [~~12%~~] sixteen percent (16%)
12 per annum as damages for money owed by a Health Plan
13 Administrator for payment of a Clean Claim, or portion thereof, that
14 exceeds the applicable reimbursement time limitations under this
15 Section, including applicable costs for collecting past due payments
16 as provided in § 9905 of this Article, as follows:

17 (1) for an uncontested Clean Claim:

18 (i) filed in writing, interest from the first calendar
19 day after the ~~forty-five (45)~~ twenty-one (21) day period in

1 § 9902(b); or

2 (2) for a contested claim, or portion thereof, filed in
3 writing:

4 (i) for which notice was provided under § 9902(c),
5 interest from the first calendar day ~~forty-five (45)~~ twenty-
6 one (21) days after the date the additional information is
7 received; or

8 (ii) for which notice was provided, but not within
9 the time specified under § 9902(c), interest from the first
10 calendar day after the claim is received.”

-O-