

RÉSUMÉ DIGEST

ACT 35 (HB 188)

2017 Regular Session

Cromer

Existing law requires that when a covered person requests an external review of his health insurance issuer, the issuer pay the cost to conduct the review.

New law retains existing law and further requires that the costs of the external review charged to the issuer must be reasonable and that the independent review organization provide documentation outlining an explanation of costs.

New law provides that when an issuer believes that the cost of the external review are unreasonable, he can appeal to the commissioner of insurance, who may make an adjustment, if appropriate. New law allows the commissioner to request additional information if necessary to assess the reasonableness of the costs.

Effective August 1, 2017.

(Amends R.S. 22:2444)