

HOUSE SUMMARY OF SENATE AMENDMENTS

House Bill No. 601 by Representative Abramson

INSURANCE/HEALTH: Prohibits a provider of healthcare services from refusing to submit a claim to a health insurance issuer under certain circumstances

Synopsis of Senate Amendments

1. Deletes provision prohibiting a provider of healthcare services from requiring an insured, as a condition for submission of a claim, to consent to full payment for such services in the event that the insured's health insurance issuer denies a claim for such services.
2. Deletes provision specifying that proposed law shall not preclude a provider of healthcare services from requiring an insured to pay for healthcare services directly to the provider if the claim is denied after submission to the health insurance issuer but before the services are provided if still requested by the insured.
3. Adds provision prohibiting a healthcare provider that accepts a patient's health insurance coverage from requiring an enrollee or insured to consent to payment for healthcare services as a condition for verification of health insurance coverage for such healthcare services.

Digest of Bill as Finally Passed by Senate**Abramson****HB No. 601**

Abstract: Prohibits healthcare providers from refusing to submit a claim to a health insurance issuer under certain circumstances.

Proposed law prohibits a healthcare provider that accepts a patient's health insurance coverage from requiring an enrollee or insured to consent to payment for healthcare services as a condition for verification of health insurance coverage for such healthcare services.

Proposed law defines the terms: "healthcare services", "health insurance coverage", and "health insurance issuer".

Proposed law provides that any provision in an agreement between a provider of healthcare services and a health insurance issuer that conflicts with proposed law shall be deemed null and void.

(Adds R.S. 22:1827)