DIGEST

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HB 369 Original	2018 Regular Session	Talbot
TID 509 Oliginal	2010 Regular Session	raioot

Abstract: Provides for mediation of the settlement of out-of-network health benefit claims involving balance billing in an amount over \$500.

<u>Proposed law</u> defines "administrator", "emergency care", "emergency care provider", "emergency medical condition", "enrollee", "facility", "facility-based provider", "healthcare practitioner", "mediation", "mediator", and "party".

<u>Proposed law</u> authorizes an enrollee to request mediation of a settlement of an out-of-network health benefit claim if both of the following apply:

- (1) The amount for which the enrollee is responsible to a facility-based provider or emergency care provider, after copayments, deductibles, and coinsurance, including the amount unpaid by the administrator or insurer, is greater than \$500.
- (2) The health benefit claim is for either emergency care or a healthcare or medical service or supply provided by a facility-based provider in a facility that is a preferred provider or that has a contract with the administrator.

<u>Proposed law</u> provides that a facility-based provider who makes a disclosure of projected out-ofnetwork costs to an enrollee prior to service and obtains the enrollee's written acknowledgment of that disclosure shall not be required to mediate a billed charge if the amount billed is less than or equal to the maximum amount projected in the disclosure.

<u>Proposed law</u> provides for the qualifications and appointment of a mediator.

<u>Proposed law</u> sets forth the procedures for the mediation and provides that the goal of the mediation is to reach an agreement among the enrollee, the facility-based provider or emergency care provider, and the insurer or administrator, as applicable, as to the amount paid by the insurer or administrator to the facility-based provider or emergency care provider, the amount charged by the facility-based provider or emergency care provider, and the amount paid to the facility-based provider or emergency care provider, and the amount paid to the facility-based provider or emergency care provider.

<u>Proposed law</u> requires the commissioner of insurance to enter an order of referral of an unsuccessful mediation to the division of administrative law.

Proposed law provides for bad faith mediation including civil penalties imposed by the

commissioner.

<u>Proposed law</u> requires the commissioner to investigate complaints related to the settlement of an outof-network claim.

(Adds R.S. 22:2455.1-2455.41)