
DIGEST

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HB 283 Engrossed

2020 Regular Session

Crews

Abstract: Prohibits surprise billing by noncontracted, facility-based physicians.

Proposed law defines "surprise billing" as any bill received by an enrollee or insured for any services provided at a base healthcare facility that is contracted with the enrollee's or insured's health insurance issuer but the facility-based physician providing those services is not contracted with the health insurance issuer and seeks to collect amounts in excess of the amounts authorized by proposed law.

Present law requires a health insurance issuer to provide a noncontracted, facility-based physician providing healthcare services in a base healthcare facility to an enrollee or insured, who files a claim with the health insurance issuer for the facility-based services, with an explanation of benefits as to any payment determination.

Proposed law retains present law but makes technical changes.

Present law provides that present law shall not supersede the provisions of present law authorizing a healthcare provider who does not contract with a health maintenance organization to pursue collection from the health maintenance organization for emergency services rendered if the healthcare provider has no direct knowledge or information that the patient is an enrollee of a health maintenance organization.

Proposed law repeals present law.

Proposed law prohibits a facility-based physician from surprise billing or attempting to collect from or collecting from an enrollee or insured an amount in excess of the amount paid by the issuer to contracted providers for the same or similar services at that facility.

Proposed law prohibits the facility-based physician from billing or collecting from an enrollee or insured amounts other than those representing coinsurance, copayments, deductibles, or other amounts identified by the health insurance issuer on an explanation of benefits as an amount for which the enrollee or insured is liable.

Proposed law applies to all services provided by a noncontracted, facility-based provider, regardless of whether the services were due to an emergency.

Effective upon signature of governor or lapse of time for gubernatorial action.

(Amends R.S. 22:1875; Adds R.S. 22:1872(24))

Summary of Amendments Adopted by House

The Committee Amendments Proposed by House Committee on Insurance to the original bill:

1. Require a facility-based physician at an in-network facility to either contract with the same insurers as the facility or secure payment from the facility.
2. Remove provisions relative to prohibiting a facility-based physician from being paid in excess of the median amount paid by the issuer to contracted providers in the parish for similar services.
3. Make technical changes.