

GREEN SHEET REDIGEST

HB 595

2021 Regular Session

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INSURANCE CLAIMS. Provides for the payment of health insurance claims prior to the credentialing of a healthcare provider.

DIGEST

Present law ((R.S. 22:1874(A)(5) and (R.S. 46:460.62(A)) requires, under certain circumstances, a health insurance issuer or MCO to pay the contracted reimbursement rate for covered services rendered by a new provider who has not yet been credentialed, when the contracted health care group bills the respective issuer or MCO using a group identification number and the following circumstances apply:

- (1) The new provider has already been credentialed by the health insurance issuer or MCO and the provider's credentialing is still active with the issuer or MCO.
- (2) The health insurance issuer or MCO has received the required credentialing application, including proof of active hospital privileges, from the new provider and the issuer or MCO has not notified the provider group that the new provider's credentialing has been denied.

Proposed law retains present law but makes the following modifications:

- (1) Requires a health insurance issuer or MCO to consider a new provider as an in-network or participating provider for the purposes of utilization management or prior authorization processes required by the issuer for that provider group or MCO.
- (2) Removes the requirement that the new provider submit proof of membership on a hospital medical staff.

Proposed law provides that if a new provider is an advanced practice registered nurse or a physician assistant licensed in Louisiana, proof of membership on a hospital medical staff is not required if they provide a written attestation identifying the collaborating or supervising physician, if a physician relationship is required by law.

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

(Amends R.S. 22:1874(A)(5)(a)(intro. para.) and (ii) and R.S. 46:460.62(A)(intro. para.) and (2); adds R.S. 22:1874(A)(5)(a)(iii))

Summary of Amendments Adopted by House

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

- 1. Make a technical change to restore present law language requiring credentialing applications submitted by new providers to MCOs to be correctly and fully completed.

Summary of Amendments Adopted by Senate

Committee Amendments Proposed by Senate Committee on Insurance to the engrossed bill

- 1. Removes provision that an applicant provide proof of active hospital privileges and allow proof of membership on a hospital medical staff.

2. Adds provisions for a provider who is an advanced practical registered nurse or a physician assistant licensed in the state, if they provide a written attestation identifying the collaborating or supervising physician.