

Regular Session, 2014

HOUSE BILL NO. 852

BY REPRESENTATIVE TALBOT

INSURANCE/GROUP: Provides relative to the disclosure of insurance claims data

1 AN ACT

2 To amend and reenact R.S. 22:978(E)(1)(introductory paragraph), (a), (b), (d), and (e), (7),
3 and (8) and to enact R.S. 22:978(G), relative to insurance claims data; to provide for
4 the release of claims data to agents; to require the agent receiving the claims data to
5 certify the limited use of the data; to provide that an insurer shall not be required to
6 release information protected as confidential by federal law; and to provide for
7 related matters.

8 Be it enacted by the Legislature of Louisiana:

9 Section 1. R.S. 22:978(E)(1)(introductory paragraph), (a), (b), (d), and (e), (7), and
10 (8) are hereby amended and reenacted and R.S. 22:978(G) is enacted to read as follows:

11 §978. Group, family group, blanket, and association health and accident insurance;
12 notice required for certain premium increase, cancellation, or nonrenewal

13 * * *

14 E.(1) ~~Not less than ninety days prior to the renewal of a policy, every health~~
15 Every health and accident insurance issuer, including a health maintenance
16 organization, shall, upon request, release to each group policyholder ~~or~~ and agent of
17 a policyholder claims data and shall provide this data within no more than fourteen
18 business days of receipt of the request, which shall include the following items:

1 (a) The net claims paid by month during the current and the two immediately
2 preceding policy period periods.

3 (b) The monthly enrollment by employee only, employee and spouse, and
4 employee and family during the current and the two immediately preceding policy
5 period periods.

6 * * *

7 (d) Claims over ten thousand dollars including claim identifier, the date of
8 occurrence, the amount of claims paid and those unpaid or outstanding, and claimant
9 health condition or diagnosis during the current and the two immediately preceding
10 policy periods. The data shall provide a unique identifying number or code for the
11 claimant.

12 (e) A complete listing of all potential catastrophic diagnoses and prognoses
13 involving persons covered under the policy provisions. The data shall provide a
14 unique identifying number or code for the claimant.

15 * * *

16 (7) A plan sponsor ~~is~~ and the plan sponsor's agent are entitled to receive
17 protected health information under this Section only after an appropriately
18 authorized representative of the plan sponsor or agent makes to the health and
19 accident insurer a certification substantially similar to the following certification:

20 I hereby certify and have demonstrated that the plan
21 documents comply with the requirements of 45 C.F.R.
22 Section 164.504(f)(2) and that the plan sponsor will safeguard
23 and limit the use and disclosure of protected health
24 information that the plan sponsor or agent may receive from
25 the group health plan to perform the plan administration
26 functions.'

27 (8) A plan sponsor or agent that does not provide the certification required
28 in Paragraph (7) of this Subsection is not entitled to receive the protected health
29 information described in Subparagraphs (1)(d) and (e) of this Subsection, but is

1 entitled to receive a report of claim information that includes the other information
2 required by this Subsection.

3 * * *

4 G. Nothing in this Section shall be construed to require an insurer to provide
5 information protected as confidential by the Health Insurance Portability and
6 Accountability Act of 1996 or any other provision of federal law.

DIGEST

The digest printed below was prepared by House Legislative Services. It constitutes no part of the legislative instrument. The keyword, one-liner, abstract, and digest do not constitute part of the law or proof or indicia of legislative intent. [R.S. 1:13(B) and 24:177(E)]

Talbot

HB No. 852

Abstract: Requires the release of claims data to the agent of a group policyholder, in addition to the policyholder, within 90 days of renewal of the policy after the agent certifies he will limit the use and disclosure of the claims data as provided by federal regulation.

Present law provides for the release of claims data by a health and accident insurer within 90 days of renewal of the group policy to the group policyholder upon certification that the policyholder will only use and disclose the data in compliance with federal regulation.

Proposed law retains present law but also provides for the release of the claims data to the agent of the policyholder, and limits the claims data that must be released to the current and two immediately preceding policy periods.

Proposed law provides that insurer shall not be required to release information protected as confidential by federal law.

Proposed law requires that the data provide a unique identifying number or code for the claimant.

(Amends R.S. 22:978(E)(1)(intro.para.), (a), (b), (d), and (e), (7), and (8); Adds R.S. 22:978(G))

Summary of Amendments Adopted by House

Committee Amendments Proposed by House Committee on Insurance to the original bill.

1. Provided that an insurer shall not be required to release information protected as confidential by federal law.

House Floor Amendments to the engrossed bill.

1. Added provisions that the data provided must cover the current and two immediately preceding policy periods regarding the monthly enrollment by the employee, his spouse, and family, and that the data provided include a unique identifying number or code for the claimant.
2. Made technical changes.