
SENATE BILL 5297

State of Washington

55th Legislature

1997 Regular Session

By Senators Franklin, Winsley, Kohl, Patterson, Thibaudeau, Goings, Fraser, Heavey, Snyder, Loveland, Prentice, McAuliffe, Spanel, Rasmussen, Wojahn, Fairley, Sheldon, Wood, Brown and Haugen

Read first time 01/22/97. Referred to Committee on Health & Long-Term Care.

1 AN ACT Relating to health insurance benefits for mastectomies;
2 adding a new section to chapter 48.43 RCW; adding a new section to
3 chapter 41.05 RCW; and creating a new section.

4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

5 NEW SECTION. **Sec. 1.** The legislature recognizes the role of
6 health care providers as the appropriate authority to determine and
7 establish the delivery of quality health care services to mastectomy
8 patients. It is the intent of the legislature to recognize patient
9 preference and the clinical sovereignty of providers as they make
10 determinations regarding the length of time individual patients may
11 need to remain in a health care facility after mastectomies. It is not
12 the intent of the legislature to diminish a carrier's ability to
13 utilize managed care strategies but to ensure the clinical judgment of
14 the provider is not undermined by restrictive carrier contracts or
15 utilization review criteria that fail to recognize individual needs.

16 NEW SECTION. **Sec. 2.** A new section is added to chapter 48.43 RCW
17 to read as follows:

1 (1) Unless otherwise specifically provided, the following
2 definitions apply throughout this section:

3 (a) "Attending provider" means a provider who: Has clinical
4 hospital privileges consistent with RCW 70.43.020; is included in a
5 provider network of the carrier that is providing coverage; and is a
6 physician licensed under chapter 18.57 or 18.71 RCW.

7 (b) "Health carrier" or "carrier" means disability insurers
8 regulated under chapter 48.20 or 48.21 RCW, health care services
9 contractors regulated under chapter 48.44 RCW, health maintenance
10 organizations regulated under chapter 48.46 RCW, plans operating under
11 the health care authority under chapter 41.05 RCW, the state health
12 insurance pool operating under chapter 48.41 RCW, and insuring entities
13 regulated under this chapter.

14 (2)(a) Every health carrier that provides coverage for mastectomies
15 must permit the attending provider, in consultation with the patient,
16 to make decisions on the length of inpatient stay, rather than making
17 such decisions through contracts or agreements between providers,
18 hospitals, and insurers. These decisions must be based on accepted
19 medical practice.

20 (b) Nothing in this section shall be construed to require attending
21 providers to authorize care they believe to be medically unnecessary.

22 (3) No carrier that provides coverage for mastectomies may
23 deselect, terminate the services of, require additional documentation
24 from, require additional utilization review of, reduce payments to, or
25 otherwise provide financial disincentives to any attending provider or
26 health care facility solely as a result of the attending provider or
27 health care facility ordering care consistent with the provisions of
28 this section. Nothing in this section shall be construed to prevent
29 any insurer from reimbursing an attending provider or health care
30 facility on a capitated, case rate, or other financial incentive basis.

31 (4) Every carrier that provides coverage for mastectomies must
32 provide notice to policyholders regarding the coverage required under
33 this section. The notice must be in writing and must be transmitted at
34 the earliest of the next mailing to the policyholder, the yearly
35 summary of benefits sent to the policyholder, or January 1 of the year
36 following the effective date of this section.

37 (5) This section is not intended to establish a standard of
38 medical care.

1 (6) This section applies to coverage for mastectomies under a
2 contract issued or renewed by a health carrier after the effective date
3 of this section.

4 NEW SECTION. **Sec. 3.** A new section is added to chapter 41.05 RCW
5 to read as follows:

6 (1) For the purposes of this section, "attending provider" means a
7 provider who: Has clinical hospital privileges consistent with RCW
8 70.43.020; is included in a provider network of the carrier that is
9 providing coverage; and is a physician licensed under chapter 18.57 or
10 18.71 RCW.

11 (2)(a) Every state purchased health care plan that provides
12 coverage for mastectomies must permit the attending provider, in
13 consultation with the patient, to make decisions on the length of
14 inpatient stay, rather than making such decisions through contracts or
15 agreements between providers, hospitals, and insurers. These decisions
16 must be based on accepted medical practice.

17 (b) Nothing in this section shall be construed to require attending
18 providers to authorize care they believe to be medically unnecessary.

19 (3) No state purchased health care plan that provides coverage for
20 mastectomies may deselect, terminate the services of, require
21 additional documentation from, require additional utilization review
22 of, reduce payments to, or otherwise provide financial disincentives to
23 any attending provider or health care facility solely as a result of
24 the attending provider or health care facility ordering care consistent
25 with the provisions of this section. Nothing in this section shall be
26 construed to prevent any insurer from reimbursing an attending provider
27 or health care facility on a capitated, case rate, or other financial
28 incentive basis.

29 (4) Every state purchased health care plan that provides coverage
30 for mastectomies must provide notice to policyholders regarding the
31 coverage required under this section. The notice must be in writing
32 and must be transmitted at the earliest of the next mailing to the
33 policyholder, the yearly summary of benefits sent to the policyholder,
34 or January 1 of the year following the effective date of this section.

35 (5) This section is not intended to establish a standard of
36 medical care.

1 (6) This section applies to coverage for mastectomies under a
2 contract issued or renewed by a state purchased health care plan after
3 the effective date of this section.

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