

# SENATE BILL REPORT

## SB 6346

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As Reported by Senate Committee On:  
Health & Long-Term Care, February 2, 2012

**Title:** An act relating to harmonizing state requirements regarding discrimination against health care providers with federal requirements.

**Brief Description:** Harmonizing state requirements regarding discrimination against health care providers with federal requirements.

**Sponsors:** Senators Prentice, Conway and McAuliffe.

**Brief History:**

**Committee Activity:** Health & Long-Term Care: 2/01/12, 2/02/12 [DP, w/oRec].

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### SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

**Majority Report:** Do pass.

Signed by Senators Keiser, Chair; Conway, Vice Chair; Becker, Ranking Minority Member; Carrell, Frockt, Kline, Pflug and Pridemore.

**Minority Report:** That it be referred without recommendation.

Signed by Senator Parlette.

**Staff:** Kathleen Buchli (786-7488)

**Background:** The Affordable Care Act (ACA) contains a provision prohibiting a group health plan or a health insurance issuer that offers group or individual health insurance coverage from discriminating with respect to participation under the plan or coverage against any health care provider who is acting within the scope of that provider's license or certification under applicable state law. A group health plan or health insurance issuer is not required to contract with any health care provider willing to abide by the terms and conditions for participation established by the plan or issuer. Group health plans and health insurance issuers are not prevented from establishing varying reimbursement rates based on quality or performance measures. This provision takes effect in 2014.

**Summary of Bill:** The ACA provision is incorporated into state insurance law. Health carriers offering group or individual health insurance coverage may not discriminate with respect to participation under the plan or coverage against any health care provider who is

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acting within the scope of that provider's license or certification. Health carriers are not required to contract with any health care provider willing to abide by the terms and conditions for participation established by the health carrier. Health carriers are not prevented from establishing varying reimbursement rates based on quality or performance measures.

**Appropriation:** None.

**Fiscal Note:** Not requested.

**Committee/Commission/Task Force Created:** No.

**Effective Date:** Ninety days after adjournment of session in which bill is passed.

**Staff Summary of Public Testimony:** PRO: Takes the federal statute and restates it into state law. It will improve awareness and understanding of the law and will make compliance easier because Washington residents will be able to take action through the Office of the Insurance Commissioner rather than the federal Department of Health and Human Services. This is not an every willing provider bill. Because of the expected doctor shortage in the future, it is in the best interest of the public to be able to choose their own practitioner.

**Persons Testifying:** PRO: Brad Tower, Ken White, Optometric Physicians of WA.