

**SSB 6016 - S AMD 442**

By Senators Rivers, Becker

ADOPTED 02/13/2014

1 On page 1, line 8 after "premium." Insert the following:

2 "NEW SECTION. Sec. 2. A new section is added to chapter 48.43 RCW  
3 to read as follows:

4 (1)(a)An issuer of a qualified health plan shall provide a notice  
5 to a health care provider or health care facility that an enrollee is  
6 in a grace period if the health care provider or health care facility:

7 (i)(A) Submits a request to the issuer regarding the enrollee's  
8 eligibility, coverage, or health plan benefits;

9 (B) Submits a request to the issuer regarding the status of a  
10 claim for services provided to an enrollee; or

11 (C) Reports a claim in a remittance advice; and

12 (ii) Request or claim is for a date during the second or third  
13 month of the enrollee's grace period.

14 (b) The issuer of a qualified health plan shall provide the notice  
15 to the health care provider or health care facility. The notice to  
16 the health care provider or health care facility must include:

17 (i) The purpose of the notice;

18 (ii) The enrollee's full legal name and any unique numbers  
19 identifying the enrollee; and

20 (iii) The name of the qualified health plan and the issuer;

21 (3) For purposes of this section "grace period" means a period of  
22 three consecutive months if an enrollee receiving advance payments of  
23 the premium tax credit has previously paid at least one full month's  
24 premium during the benefit year."

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26 Correct the title accordingly.

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EFFECT:

- Requires the insurance carrier to provide notice to health care providers or health care facilities that an enrollee is in a grace period if there has been a request for information or services
- The notice must include the purpose of the notice, the enrollee's name and unique identifying number and the name of the qualified health plan and carrier

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