
Health Care & Wellness Committee

HB 1263

Brief Description: Reducing the financial loss to emergency medical care and transportation services by ensuring direct payment for emergency transportation services.

Sponsors: Representatives Angel, Van De Wege, Cody, Tharinger, Ryu and Fey.

Brief Summary of Bill

- Requires health service contractors to reimburse emergency medical care and transportation services directly to the provider or in a manner that is co-payable.

Hearing Date: 1/29/13

Staff: Jim Morishima (786-7191).

Background:

A health care services contractor is an entity that contracts with a network of providers to meet the needs of its covered lives. When paying claims for services provided by certain out-of-network providers, such as physicians, registered nurses, providers of emergency medical and transportation services, and chiropractors, a health care services contractor must make the check out to both the provider and the covered person. If the covered person provides evidence of pre-payment, the check may be made out solely to the person.

Summary of Bill:

A health care services contractor must pay claims for emergency medical care and transportation services directly to the provider or in a manner that is co-payable.

Appropriation: None.

Fiscal Note: Available.

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.