

Regular Session, 2010

SENATE BILL NO. 683

BY SENATOR LAFLEUR

HEALTH/ACC INSURANCE. Requires health insurance issuers to directly pay noncontracted health care providers of emergency services for their usual and customary charges. (8/15/10)

1 AN ACT

2 To enact R.S. 22:1826, relative to noncontracted providers of emergency services; to require  
3 health insurance issuers to directly pay such providers their usual and customary  
4 charges for such services; and to provide for related matters.

5 Be it enacted by the Legislature of Louisiana:

6 Section 1. R.S. 22:1826 is hereby enacted to read as follows:

7 **§1826. Payment of claims for emergency services provided by noncontracted**  
8 **health care providers**

9 **A. A health care provider that does not contract with a health insurance**  
10 **issuer may file a claim with a health insurance issuer for emergency services**  
11 **rendered. The health insurance issuer shall directly pay such a claim by a**  
12 **noncontracted provider in the amount of the provider's usual and customary**  
13 **charges paid for such emergency services, less any amount representing**  
14 **coinsurance, copayments, deductibles, noncovered services, or any other**  
15 **amounts identified by the health insurance issuer as an amount for which the**  
16 **insured or enrollee is liable. Payment of such claim by the health insurance**  
17 **issuer shall in no circumstances be made directly to the patient, insured, or**

1           enrollee.  
2                    B. For purposes of this Section, "health insurance issuer" means any  
3                    entity that offers health insurance coverage through a policy or certificate of  
4                    insurance subject to state law that regulates the business of insurance. The term  
5                    shall also include a health maintenance organization, as defined and licensed  
6                    pursuant to Subpart I of Part I of Chapter 2 of this Title, and nonfederal  
7                    government plans subject to the provisions of Subpart B of this Part but shall  
8                    not include the office of group benefits.

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The original instrument and the following digest, which constitutes no part  
of the legislative instrument, were prepared by Linda Nugent.

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#### DIGEST

Proposed law authorizes a health care provider that does not contract with a health insurance issuer to file a claim with a health insurance issuer for emergency services rendered. Requires the health insurance issuer to directly pay such a claim by a noncontracted provider in the amount of the provider's usual and customary charges paid for such emergency services, less any amount representing coinsurance, copayments, deductibles, noncovered services, or any other amounts identified by the health insurance issuer as an amount for which the insured or enrollee is liable. Specifies that payment of such claim by the health insurance issuer shall in no circumstances be made directly to the patient, insured, or enrollee.

Proposed law further defines "health insurance issuer" as any entity that offers health insurance coverage through a policy or certificate of insurance subject to state law that regulates the business of insurance. Specifies that the term shall also include health maintenance organizations and nonfederal government plans but shall not include the office of group benefits.

Effective August 15, 2010.

(Adds R.S. 22:1826)