

HOUSE BILL 1126

By Naifeh

AN ACT to amend Tennessee Code Annotated, Title 56,
Chapter 7, Part 23, relative to healthcare research
institutions.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF TENNESSEE:

SECTION 1. Tennessee Code Annotated, Section 56-7-2302, is amended by deleting subsection (c) in its entirety and by substituting instead the following:

(c)

(1) Notwithstanding any other law to the contrary, no insurer, or employer or other entity that administers expense incurred health insurance or that has an insurance company administering its expense incurred health services program, and no policy of expense incurred health insurance issued pursuant to this title, that is entered into, amended, delivered, issued for delivery, or renewed by agreement or otherwise, on or after March 17, 1982, shall deny, for the reason that the insured or the covered dependent incurred no expense, charge, or obligation, a claim for expenses incurred in connection with the patient's diagnosis and treatment, including hospitalization and outpatient services, rendered by healthcare research institution.

(2) No expense incurred health insurance policy issued, delivered, amended, or renewed on or after March 17, 1982, or employer or other entity that administers expense incurred health insurance or that has an insurance company administering its expense incurred health services program, shall except, limit, or reduce benefits or otherwise fail to pay for services rendered to an insured or covered dependent by a healthcare research institution.

(3) As used in this subsection (c):

(A) "Expense incurred health insurance" includes contracts designed to reimburse or defray healthcare expenses which are sold by an insurance company including hospitals, medical service corporations, and health maintenance organizations;

(B) "Healthcare research institution" means a non-governmental, nonprofit research institution with its principal place of business in this state, that is, or that is affiliated with, a hospital or clinic for the treatment of pediatric patients, that does not seek payment for treatment provided to patients in the absence of insurance coverage for the treatment; and

(C) "Insurance company" includes any hospital and medical service corporation licensed under chapter 29 of this title, or any health maintenance organization licensed under chapter 32 of this title.

SECTION 2. This act shall take effect upon becoming a law, the public welfare requiring it.