House Bill 362

By: Representatives Mathiak of the 74th, Gunter of the 8th, Greene of the 154th, Ehrhart of the 36th, and Taylor of the 173rd

A BILL TO BE ENTITLED AN ACT

- 1 To amend Chapter 24 of Title 33 of the Official Code of Georgia Annotated, relating to
- 2 insurance generally, so as to provide for a benefit provider to disclose certain payments to
- 3 a treating healthcare provider; to provide for a definition; to provide for related matters; to
- 4 repeal conflicting laws; to provide for an effective date; and for other purposes.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

6 SECTION 1.

- 7 Chapter 24 of Title 33 of the Official Code of Georgia Annotated, relating to insurance
- 8 generally, is amended by revising Code Section 33-24-56.1, relating to reimbursement of
- 9 medical expense or disability benefit providers in personal injury cases, subrogation
- 10 prohibited, and notice, as follows:
- 11 "33-24-56.1.

5

- 12 (a) As used in this Code section, the term:
- 13 (1) 'Benefit provider' means any insurer, health maintenance organization, health benefit
- plan, preferred provider organization, employee benefit plan, or other entity which
- provides for payment or reimbursement of health care healthcare expenses, health care

healthcare services, disability payments, lost wage payments, or any other benefits under
 a policy of insurance or contract with an individual or group.

- 18 (2) 'Injured party' means a person who alleges that he or she has been injured by the acts
- or omissions of a third party and who has received benefits from a benefit provider. This
- 20 term also includes the personal representative of the estate of such person.
- 21 (3) 'Treating healthcare provider' means a person duly licensed or legally authorized to
- 22 provide healthcare services and that has provided such services to an injured party.
- 23 (b) In the event of recovery for personal injury from a third party by or on behalf of a
- 24 person for whom any benefit provider has paid medical expenses or disability benefits, the
- benefit provider for the person injured may require reimbursement from the injured party
- of benefits it has paid on account of the injury, up to the amount allocated to those
- categories of damages in the settlement documents or judgment, if:
- 28 (1) The amount of the recovery exceeds the sum of all economic and noneconomic losses
- 29 incurred as a result of the injury, exclusive of losses for which reimbursement may be
- 30 sought under this Code section; and
- 31 (2) The amount of the reimbursement claim is reduced by the pro rata amount of the
- 32 attorney's fees and expenses of litigation incurred by the injured party in bringing the
- 33 claim.
- 34 (c) In the settlement of any claim for personal injury, under circumstances where it is
- 35 claimed that the amount of the recovery does not exceed the sum of all economic and
- 36 noneconomic losses incurred as a result of the injury, a benefit provider which has paid
- benefits to or on behalf of the injured person may seek a declaratory judgment pursuant to
- Code Section 9-4-2 as to what extent it may equitably share in said settlement. If the court
- determines said settlement does not fully and completely compensate the injured party, the
- 40 benefit provider has no right of reimbursement.
- 41 (d) In the trial of any case for personal injury submitted to a court or jury, the trier of fact
- may allocate the amounts paid among the categories of damages actually sought by the

plaintiff at trial, and it shall be conclusively presumed that such allocation by the trier of

- fact is reasonable.
- 45 (e) Subrogation for medical expenses and disability payments by a benefit provider against
- a person at fault for injury is prohibited and no defendant or liability insurance carrier shall
- include any insurer seeking reimbursement under subsection (b) of this Code section as a
- copayee on any check or draft in payment of a settlement or judgment.
- 49 (f) No benefit provider shall be entitled to reduce the amount for which it is liable under
- an insured party's coverage for liability, uninsured motorist, disability, medical payments,
- or other benefits as a setoff against any claim for reimbursement under subsection (b) of
- 52 this Code section, nor shall any benefit provider be entitled to withhold or set off insurance
- benefits as a means of enforcing a claim for reimbursement. Nothing in this subsection
- shall be deemed to prohibit the coordination of benefits between or among benefit
- 55 providers.
- 56 (g) When a recovery for personal injury is sought from a third party by or on behalf of a
- person for whom any benefit provider has paid medical expenses or disability benefits, the
- person asserting the claim for recovery against the third party shall provide notice of the
- 59 existence of the claim, by certified mail or statutory overnight delivery unless some other
- form of notice is agreed to by the designated recipient of the notice, to any benefit provider
- which the person asserting the claim has reason to believe has paid benefits relating to the
- 62 injury for which the injured party seeks a recovery. This notice shall be provided no later
- than ten days prior to the consummation of any settlement or commencement of any trial
- unless a shorter notice period is agreed to by the designated recipient of the notice and shall
- include a request for information regarding the existence of any claim by a benefit provider
- and an itemization of payments for which the benefit provider seeks reimbursement
- 67 including the names of payees, the dates of service or payment or both, and the amounts
- 68 thereof.

69

70

71

72

73

74

75

76

77

78

79

(h) If the notice required in subsection (g) of this Code section is provided, a claim for reimbursement under subsection (b) of this Code section is enforceable against an injured party only to the extent that such person has actual notice prior to the consummation of a settlement or commencement of trial, by certified mail or statutory overnight delivery or other form of notice if agreed to by the designated recipient of the notice, of the claim of the benefit provider for reimbursement including a specific itemization of payments for which the benefit provider seeks reimbursement, including the names of payees, the dates of service or payment or both, and the amounts thereof. Nothing contained in this subsection shall prohibit the supplementation of a claim prior to the consummation of a settlement or judgment, except that any supplemental claims shall be subject to the notice requirements contained in this subsection.

- (i) If the notice required in subsection (g) of this Code section is not provided, then subsection (h) of this Code section shall not apply, and a claim for reimbursement under subsection (b) of this Code section is enforceable subject to the other provisions of this Code section.
- (j) No benefit provider contracts or policies containing or incorporating provisions in conflict with this Code section may be issued in this state, and no policy or contract provisions for subrogation or reimbursement in conflict with this Code section may be enforced by a benefit provider with regard to claims or injuries.
- (k) Any settlement which is subject to this Code section that contains a confidentiality provision as to any terms of the settlement which are necessary to a proceeding under this Code section shall be unenforceable as to the disclosure of such required information.
- 91 (l) This Code section shall not apply to the rights of the Department of Community Health 92 to recover under Article 7 of Chapter 4 of Title 49, nor shall it affect the subrogation rights 93 and obligations provided in Code Section 34-9-11.1.
- 94 (m) A benefit provider, upon written request from a treating healthcare provider, shall 95 provide, within 30 days of such request, to the treating healthcare provider a written

96	accounting of an	y and all	payments	and reimb	ursements	for such	provider's	<u>healthcare</u>
97	services."		•				•	

98 SECTION 2.

- This Act shall become effective upon its approval by the Governor or upon its becoming lawwithout such approval.
- 101 SECTION 3.
- 102 All laws and parts of laws in conflict with this Act are repealed.