Regular Session, 2012

HOUSE BILL NO. 989

BY REPRESENTATIVES HUVAL, PIERRE, REYNOLDS, RITCHIE, TALBOT, AND
     THIBAUT

INSURANCE/HEALTH: Provides for release of certain group information to the group
     policyholder or his agent prior to renewal of a group policy

1   AN ACT

2   To enact R.S. 22:978(E) and (F), relative to group, family group, blanket, and association

3   health and accident insurance and health maintenance organizations; to provide with

4   respect to notice required for certain premium increase, cancellation, or nonrenewal;

5   to provide for the release of claims data; to provide with respect to civil immunity

6   and certifications; and to provide for related matters.

7   Be it enacted by the Legislature of Louisiana:

8   Section 1. R.S. 22:978(E) and (F) are hereby enacted to read as follows:

9   §978. Group, family group, blanket, and association health and accident insurance;

10   notice required for certain premium increase, cancellation, or nonrenewal

11   *   *   *

12   E.(1) Not less than ninety days prior to the renewal of a policy, every health

13   and accident insurance issuer, including a health maintenance organization, shall,

14   upon request, release to each group policyholder or agent of a policyholder claims

15   data and shall provide this data within no more than fourteen business days of receipt

16   of the request, which shall include the following items:

17   (a) The net claims paid by month during the policy period.

18   (b) The monthly enrollment by employee only, employee and spouse, and

19   employee and family during the policy period.

1   (c) The amount of any claims reserve established by the insurance provider

2   against future claims under the policy.

3   (d) Claims over ten thousand dollars including claim identifier, the date of

4   occurrence, the amount of claims paid and those unpaid or outstanding, and claimant

5   health condition or diagnosis.

6   (e) A complete listing of all potential catastrophic diagnoses and prognoses

7   involving persons covered under the policy provisions.

8   (2) A health and accident insurer that discloses data or information in

9   compliance with the provisions of this Section may condition any such disclosure

10   upon the execution of an agreement for immunity from civil liability.

11   (3) A health and accident insurer that provides data or information in

12   compliance with the provisions of this Section shall be immune from civil liability

13   for any acts or omissions of any person's subsequent use of such data or information.

14   (4) The provisions of this Subsection shall not be construed to authorize the

15   disclosure of the identity of a particular employee covered under the group policy,

16   nor the disclosure of any individual employee's particular health insurance claim,

17   condition, diagnosis, or prognosis, which would violate federal or state law.

18   (5) For purposes of this Subsection, "claim identifier" shall be defined as

19   data that reflects a number designation including but not limited to an alphabetic or

20   alphanumeric designation which shall not be a name identifier of an employee,

21   employee's spouse, or employee's dependent.

22   (6) The provisions of this Subsection shall not apply to limited benefit

23   insurance, as defined by R.S. 22:47(2)(c).

24   (7) A plan sponsor is entitled to receive protected health information under

25   this Section only after an appropriately authorized representative of the plan sponsor

26   makes to the health and accident insurer a certification substantially similar to the

27   following certification:

1   'I hereby certify and have demonstrated that the plan

2   documents comply with the requirements of 45 C.F.R.

3   Section 164.504(f)(2) and that the plan sponsor will safeguard

4   and limit the use and disclosure of protected health

5   information that the plan sponsor may receive from the group

6   health plan to perform the plan administration functions.'

7   (8)   A plan sponsor that does not provide the certification required in

8   Paragraph (7) of this Subsection is not entitled to receive the protected health

9   information described in Subparagraphs (1)(d) and (e) of this Subsection, but is

10   entitled to receive a report of claim information that includes the other information

11   required by this Subsection.

12   F. For purposes of this Section, the term "health and accident insurer" or

13   "health and accident insurance issuer" shall include a health maintenance

14   organization, the term "policy" shall include a subscriber agreement, and the term

15   "policyholder" shall include an enrollee or subscriber of a health maintenance

16   organization.

17   Section 2. This Act shall become effective on January 1, 2013.

DIGEST

The digest printed below was prepared by House Legislative Services. It constitutes no part of the legislative instrument. The keyword, one-liner, abstract, and digest do not constitute part of the law or proof or indicia of legislative intent. [R.S. 1:13(B) and 24:177(E)]

Huval   HB No. 989

Abstract: Provides for release of certain group information to the group policyholder or his agent prior to renewal of a group policy.

Present law requires every insurer to notify the policyholder in writing at least 45 days before any increase of 20% or more in the policy rates or at least 60 days before any cancellation or nonrenewal of a policy. Requires every health insurance issuer providing coverage to an employer group comprising more than 100 enrollees to provide the premium rate or amount to be paid to renew the group policy at least 90 days prior to the date of renewal or termination.

Proposed law retains present law.

Proposed law requires every health insurance issuer, including a health maintenance organization, not less than 90 days prior to the renewal of a policy, to release to each group policyholder or agent of a policyholder, claims data upon request and to provide this data

within no more than 14 business days of receipt of the request. Provides that the data shall
include:

(1)   Net claims paid by month during the policy period.

(2)   Monthly enrollment by employee only, employee and spouse, and employee and
        family during the policy period.

(3)   The amount of any claims reserve established by the insurance provider against
        future claims.

(4)   Claims over $10,000 including claim identifier, the date of occurrence, the amount
        of claims paid and those unpaid or outstanding, and claimant health condition or
        diagnosis.

(5)   A complete listing of all potential catastrophic diagnoses and prognoses involving
        persons covered by the policy.

Proposed law provides that a health and accident insurer that discloses data or information
may condition any such disclosure upon the execution of an agreement for immunity from
civil liability. Also provides that such insurer shall be immune from civil liability for any
acts or omissions of any person's subsequent use of such data or information.

Proposed law does not authorize disclosure of the identity of particular employees nor of
their particular health insurance claim, condition, diagnosis, or prognosis if disclosure would
violate any federal or state law.

Proposed law defines "claim identifier" as data that reflects a number designation, including
but not limited to an alphabetic or alphanumeric designation which shall not be a name
identifier of an employee, employee's spouse, or employee's dependent.

Proposed law provides for its inapplicability to limited benefit insurance.

Proposed law additionally provides for certain certifications that a plan sponsor shall make
to a health and accident insurer to receive protected health information.

Effective Jan. 1, 2013.

(Adds R.S. 22:978(E) and (F))

Summary of Amendments Adopted by House

    Committee Amendments Proposed by House Committee on Insurance to the original
        bill.

    1.   Added provision that a health and accident insurer that discloses data or
          information may condition any such disclosure upon the execution of a
          nondisclosure and confidentiality agreement.

    2.   Added provision that a health and accident insurer that provides data or
          information shall be immune from civil liability for any acts or omissions of any
          person's subsequent use of such data or information.

    3.   Made proposed law inapplicable to limited benefit insurance.

    4.   Added an effective date of Jan. 1, 2013.

CODING: Words in ~~struck through~~ type are deletions from existing law; words underscored
are additions.

House Floor Amendments to the engrossed bill.

1. Made proposed law additionally applicable to health maintenance organizations.

2. Allowed a health and accident insurer that discloses data or information to condition such disclosure upon the execution of an agreement for immunity from civil liability rather than a disclosure and confidentiality agreement.

3. Added provisions relative to certifications to be made by a plan sponsor to receive protected health information.