

HOUSE BILL 2104

By Shepard

AN ACT to amend Tennessee Code Annotated, Title 56,
Chapter 32, relative to certain information
maintained by managed health insurance issuers.

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

SECTION 1. Tennessee Code Annotated, Section 56-32-130(e)(1), is amended by deleting the word "and" at the end of subdivision (C); by deleting the period at the end of subdivision (D) and substituting instead a semi-colon and the word "and"; and by adding the following language as a new subdivision to be designated as follows:

(E) If an issuer elects not to alter or modify the provider's profiling, tiering, comparison or rating after the provider has submitted additional data in accordance with subdivision (e)(1)(B), then the aggrieved provider may appeal to the commissioner within thirty (30) days of receiving notice of the issuer's election to not alter or modify the disputed matter or within thirty (30) days of the publication of the information, whichever is later. The commissioner or the commissioner's designee shall request parties to provide promptly any relevant information for resolving the dispute. The commissioner may elect to have the dispute handled as a contested case under the Uniform Administrative Procedures Act, compiled in title 4, chapter 5, part 3. After appropriate investigation, the commissioner or the commissioner's designee may decide the appeal and issue a final order resolving the matter and order any appropriate alteration, modification or removal of the information. An issuer may not publish any disputed information during the pendency of an appeal.

SECTION 2. Tennessee Code Annotated, Section 56-32-130(e)(2), is amended by inserting the language "but subject to an appeal under subdivision (e)(1)(E)," between the language "contrary," and "upon satisfying".

SECTION 3. This act shall take effect upon becoming a law, the public welfare requiring it.