

HB 460 -- Health Insurance Coding

Co-Sponsors: Pearce, Threlkeld, Schaaf, Portwood, Harris (23), Page, Cooper (155), Stefanick

This bill limits the practice of health insurers who change or attempt to change any health service procedure code submitted by a physician for billing and reimbursement purposes.

If any health insurer changes or attempts to change any health service procedure code, the express written permission of a physician must be obtained and an examination of the patient's medical record must be conducted in order to determine the services provided by the physician.

If a dispute arises between a physician and a health insurer concerning a health service procedure code submission, the health insurer is responsible for establishing procedures for resolving the dispute.

The bill also requires contracts between health insurers and physicians to clearly contain the health service procedure codes which are utilized by the contracting physician and are covered by the health insurer. The contracts must also list the fee, compensation, or reimbursement rate associated with each health service procedure code.