



General Assembly

**Amendment**

January Session, 2009

LCO No. 9385

**\*SB0004709385HRO\***

Offered by:

REP. D'AMELIO, 71<sup>st</sup> Dist.

To: Subst. Senate Bill No. 47

File No. 176

Cal. No. 711

**"AN ACT CONCERNING HEALTH CARE PROVIDER CONTRACTS."**

1 After the last section, add the following and renumber sections and  
2 internal references accordingly:

3 "Sec. 501. Subdivision (15) of section 38a-816 of the general statutes  
4 is repealed and the following is substituted in lieu thereof (*Effective*  
5 *October 1, 2009*):

6 (15) (A) Failure by an insurer, or any other entity responsible for  
7 providing payment to a health care provider pursuant to an insurance  
8 policy, to pay accident and health claims, including, but not limited to,  
9 claims for payment or reimbursement to health care providers, within  
10 the time periods set forth in subparagraph (B) of this subdivision,  
11 unless the Insurance Commissioner determines that a legitimate  
12 dispute exists as to coverage, liability or damages or that the claimant  
13 has fraudulently caused or contributed to the loss. Any insurer, or any  
14 other entity responsible for providing payment to a health care  
15 provider pursuant to an insurance policy, who fails to pay such a claim

16 or request within the time periods set forth in subparagraph (B) of this  
17 subdivision shall pay the claimant or health care provider the amount  
18 of such claim plus interest at the rate of fifteen per cent per annum, in  
19 addition to any other penalties which may be imposed pursuant to  
20 sections 38a-11, 38a-25, 38a-41 to 38a-53, inclusive, 38a-57 to 38a-60,  
21 inclusive, 38a-62 to 38a-64, inclusive, 38a-76, 38a-83, 38a-84, 38a-117 to  
22 38a-124, inclusive, 38a-129 to 38a-140, inclusive, 38a-146 to 38a-155,  
23 inclusive, 38a-283, 38a-288 to 38a-290, inclusive, 38a-319, 38a-320, 38a-  
24 459, 38a-464, 38a-815 to 38a-819, inclusive, 38a-824 to 38a-826,  
25 inclusive, and 38a-828 to 38a-830, inclusive. Whenever the interest due  
26 a claimant or health care provider pursuant to this section is less than  
27 one dollar, the insurer shall deposit such amount in a separate interest-  
28 bearing account in which all such amounts shall be deposited. At the  
29 end of each calendar year each such insurer shall donate such amount  
30 to The University of Connecticut Health Center.

31 (B) Each insurer, or other entity responsible for providing payment  
32 to a health care provider pursuant to an insurance policy subject to this  
33 section, shall pay claims not later than (i) forty-five days after receipt  
34 by the insurer of the claimant's proof of loss form or the health care  
35 provider's request for payment filed in accordance with the insurer's  
36 practices or procedures, if such proof of loss form or request for  
37 payment is submitted to such insurer or other entity responsible for  
38 providing payment electronically, or (ii) ninety days if such proof of  
39 loss form or request for payment is not submitted electronically, except  
40 that, irrespective of the form of submission, when there is a deficiency  
41 in the information needed for processing a claim, as determined in  
42 accordance with section 38a-477, the insurer shall [(i)] (I) send written  
43 notice to the claimant or health care provider, as the case may be, of all  
44 alleged deficiencies in information needed for processing a claim not  
45 later than thirty days after the insurer receives a claim for payment or  
46 reimbursement under the contract, and [(ii)] (II) pay claims for  
47 payment or reimbursement under the contract not later than thirty  
48 days after the insurer receives the information requested.

49 (C) As used in this subdivision, "health care provider" means a

50 person licensed to provide health care services under chapter 368d,  
51 chapter 368v, chapters 370 to 373, inclusive, 375 to 383c, inclusive, 384a  
52 to 384c, inclusive, or chapter 400j."