- 1 SB484
- 2 136054-1
- 3 By Senator Bedford
- 4 RFD: Banking and Insurance
- 5 First Read: 05-APR-12

1	136054-1:n:01/31/2012:JMH/hh LRS2012-552
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8	SYNOPSIS: To repeal portions of Title 27 of the Code
9	of Alabama 1975.
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11	A BILL
12	TO BE ENTITLED
13	AN ACT
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15	Relating to the Alabama Insurance Code, to repeal
16	the following:
17	27-1-12 Each willful violation of this title for
18	which a greater penalty is not provided by another provision
19	of this title or by other applicable laws of this state shall,
20	in addition to any applicable prescribed denial, suspension,
21	or revocation of certificate of authority or license, be
22	punishable as a misdemeanor, upon conviction, by a fine of not
23	more than \$1,000.00, or by imprisonment in the county jail, or
24	by sentence to hard labor for the county, for a period not to
25	exceed one year, or by both such fine and imprisonment or hard

labor in the discretion of the court. Each instance of
 violation shall be considered a separate offense.

27-1-13 Every form of insurance document and every
rate or other filing lawfully in use immediately prior to
January 1, 1972, may continue to be so used or be effective
until the commissioner otherwise prescribes pursuant to this
title.

8 27-1-14 This title shall not impair or affect any 9 act done, offense committed or right accruing, accrued, or 10 acquired or liability, penalty, forfeiture, or punishment 11 incurred prior to January 1, 1972, but the same may be 12 enjoyed, asserted, enforced, prosecuted, or inflicted, as 13 fully, and to the same extent, as was possible prior to 14 January 1, 1972.

15 27-1-15 Notwithstanding any other provision of law, 16 when any contract of health insurance or any plan or agreement 17 for health services provides for the reimbursement or payment 18 for services which are within the scope of a podiatrist's 19 professional license as defined in the general laws of 20 Alabama, such policy shall be construed to include payment to 21 a podiatrist who has performed such procedures.

22 27-1-16 (a)(1) The Commissioner of the Department of 23 Insurance shall prescribe a standard health insurance claim 24 form to be used by all hospitals. The forms shall be 25 prescribed in a format which allows for the use of generally 26 accepted diagnosis and treatment coding systems by providers

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of health care and payors. The standard form shall be accepted 1 2 and used by all insurers doing business in the State of 3 Alabama and by all state agencies which pay providers of 4 health care for hospital services. (2) The Commissioner of 5 the Department of Insurance shall also prescribe a format for 6 all health insurance claims transmitted or submitted for 7 payment by electronic or electro-mechanical means. Such a format shall be used by all insurers doing business in the 8 9 State of Alabama and by all state agencies which pay providers 10 of health care for hospital services. (b) An advisory 11 committee of five persons, two appointed by the Alabama Hospital Association, two by the Health Insurance Association 12 13 of America, and one by an Alabama nonprofit corporation which 14 markets health insurance, shall advise the commissioner on an acceptable standard health insurance claim form and an 15 16 electronic or electro-mechanical claims form no later than 60 17 days prior to January 1, 1982. If changes in the forms need to 18 be made at any future time, the Commissioner of the Department of Insurance shall inform the advisory committee and the 19 20 committee shall make recommendations as to the changes. (C) 21 All insurers doing business in Alabama and all state agencies 22 shall accept, for services from physicians licensed to 23 practice medicine, the Uniform Health Insurance Claim Form 24 approved by the Council on Medical Service of the American 25 Medical Association. Nothing in this section shall be 26 construed to prohibit an insurer or state agency from

accepting any other health insurance claim form for services 1 2 provided by a physician licensed to practice medicine. (d) 3 Every third party prescription program serving patients in 4 Alabama shall utilize the Universal Pharmacy Billing Claim 5 Form or format used by pharmacists billing for their services. 6 Information required on the universal prescription claim form, 7 either hard copy or electronic, shall be in compliance with the National Council on Pharmaceutical Drug Plan standards. If 8 9 a provider, due to the location of the pharmacy, cannot comply 10 with electronic claims submission requirements, then the 11 prescription program shall allow the pharmacy to submit claims 12 via hard copy. Pharmacy providers and recipients shall be 13 given at least 45 days advance notice regarding changes in procedures and benefits. (e) All insurers doing business in 14 15 Alabama and all state agencies shall accept for services from 16 dentists licensed to practice dentistry, the Uniform Dental 17 Claim Form approved by the Council on Dental Care Programs of 18 the American Dental Association. Nothing in this section shall be construed to prohibit an insurer or state agency from 19 20 accepting any other dental insurance claim form for services 21 provided by a dentist licensed to practice dentistry. (f) The 22 foregoing provisions shall not apply to the Alabama Medicaid 23 Agency.

24 27-1-17 (a) Each insurer, health service
25 corporation, and health benefit plan that issues or renews any
26 policy of accident or health insurance providing benefits for

medical or hospital expenses for its insured persons shall pay 1 2 for services rendered by Alabama health care providers within 45 calendar days upon receipt of a clean written claim or 30 3 4 calendar days upon receipt of a clean electronic claim. If the 5 insurer, health service corporation, or health benefit plan is 6 denying or pending the claim, the insurer, health service 7 corporation, or health benefit plan shall, within 45 calendar days for a written claim and 30 calendar days for an 8 9 electronic claim, notify the health care provider or 10 certificate holder of the reason for denying or pending the 11 claim and what, if any, additional information is required to 12 process the claim. Any undisputed portion of the claim shall 13 be paid in accordance with the foregoing schedule. If the insurer, health service corporation, or health benefit plan 14 15 fails to provide the notice to the health care provider of the 16 reason for denying or pending the claim, then any such claim, 17 if and when determined to be payable, shall accrue interest at the rate as provided herein, from the date such notice should 18 have been given in accordance with this provision. Upon 19 20 receipt of the necessary information, the claim must be paid, 21 denied, or otherwise adjudicated within 21 calendar days from 22 the receipt of the requested information. The failure of an 23 insurer, health service corporation, or health benefit plan to 24 comply with the time limits in this section shall not have the 25 effect of requiring coverage for an otherwise non-covered 26 claim. This section shall only apply to payments made on a

claims basis and shall not apply to capitation or other forms
of periodic payment to providers. For the purposes of this
section, an insurer, health service corporation, or health
benefit plan domiciled outside of the State of Alabama is
deemed to be subject to the provisions of this section if it
receives, processes, adjudicates, pays, or denies claims for
BE IT ENACTED BY THE LEGISLATURE OF ALABAMA:

8 Section 1. Sections 27-1-1 to 27-1-17, Code of 9 Alabama 1975, are repealed.

10 Section 2. This act shall become effective 11 immediately following its passage and approval by the 12 Governor, or its otherwise becoming law.