FE Sent For:

2001 DRAFTING REQUEST

Senate Amendment (SA-SSA1-SB55)

Received: 06/15/2001					Received By: kahlepj		
Wanted: Soon					Identical to LRB:		
For: Senate Democratic Caucus					By/Representing: Keckhaver		
This file may be shown to any legislator: NO					Drafter: kahlepj		
May Contact:					Addl. Drafters:		
Subject: Insurance - health					Extra Copies:		
Submit v	ia email: NO	•					
Requeste	r's email:						
Pre Topi	ic:						
SDC:	Keckhaver - C	CN1042,					
Topic:							
Providing	g for when ins	urance claims fo	or chiropracti	c services a	re overdue		
Instructi	ons:						
See Attac	ched						
Drafting	History:						
Vcrs.	<u>Drafted</u>	Reviewed	Typed	Proofed	Submitted	Jacketed	Required
' ?	kahlepj 06/16/2001	jdyer 06/16/2001			•		
' 1			jfrantze 06/16/2001	I	lrb_docadmin 06/16/2001		

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May Contact:	Addl. Drafters:		
Subject: Insurance - health	Extra Copies:		
Submit via email: NO			
Requester's email:			
Pre Topic:			
SDC:Keckhaver - CN1042,			
Topic:			
Providing for when insurance claims for chiropractic services ar	re overdue		
Instructions:			
See Attached			
Drafting History:			
Vers. Drafted Reviewed Typed Proofed	Submitted Jacketed Required		
/? kahlepj / 18 jld 766/16 20 16/16			
FE Sent For: <end></end>			

Adopt LRB 2181/1, relating to when insurance claims for payment of chiropractic services are overdue.

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Date (time) needed

LRB b 0785 / 1

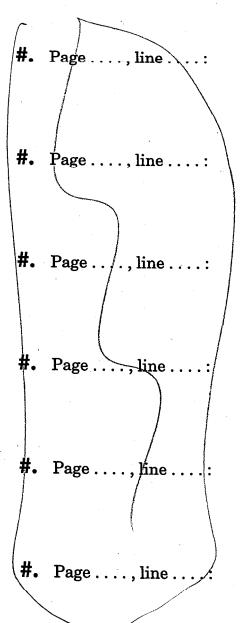
AMDT TO BUDGET SUB AMDT

PJK: jld:

See form AMENDMENTS — COMPONENTS & ITEMS.

SENATE AMENDMENT TO SENATE AMENDMENT TO SENATE SUBSTITUTE AMENDMENT 1, TO 2001 SENATE BILL 55

At the locations indicated, amend the substitute amendment an end as follows:



[rev: 6/15/01 2001DF16(fm)SB]

. Page 1181, line 3: after that line insert. to provide the statement within 80 days after receiving clinical documentation from the chiropractor that the services were provided. The people of the state of Wisconsin, represented in senate and assembly do enact as follows: 7375**5**9.X SECTION 1. 628.46 (2m) of the statutes is created to read: 628.46 (2m) Notwithstanding subs. (1) and (2), a claim for payment for chiropractic services is overdue if not paid within 30 days after the insurer receives clinical documentation from the chiropractor that the services were provided unless, within those 30 days, the insurer provides to the insured and to the chiropractor the written statement under s. 632.875 (2). SECTION \$\(632.875\) (2) (intro.) of the statutes is amended to read: 632.875 (2) (intro.) If, on the basis of an independent evaluation, an insurer restricts or terminates a patient's coverage for the treatment of a condition or complaint by a chiropractor acting within the scope of his or her license and the restriction or termination of coverage results in the patient becoming liable for payment for his or her treatment, the insurer shall within the time required under s. 628.46 (2m), provide to the patient and to the treating chiropractor a written statement that contains all of the following: SECTION 3. Initial applicability +. Page 1399, line 25: after that line If a policy, plan, or contract contains provisions that are inconsistent with first applies to that policy, plan, or contract on the day on which the policy, plan, or contract is terminated or renewed, whichever occurs first. "((Im) CLAIM FOR CHIROPRACTIC SERVICES. (4) the treatment of sections 628.46 (2m) and 632.875(2) (intro.) of the statutes

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SDC:.....Keckhaver - CN1042, Providing for when insurance claims for chiropractic services are overdue

FOR 2001-03 BUDGET - NOT READY FOR INTRODUCTION

CAUCUS SENATE AMENDMENT

TO SENATE SUBSTITUTE AMENDMENT 1,

TO 2001 SENATE BILL 55

1	At the locations indicated, amend the substitute amendment as follows:
2	1. Page 1181, line 3: after that line insert:
3	"Section 3755g. 628.46 (2m) of the statutes is created to read:
4	628.46 (2m) Notwithstanding subs. (1) and (2), a claim for payment for
5	chiropractic services is overdue if not paid within 30 days after the insurer receives
6	clinical documentation from the chiropractor that the services were provided unless,
7	within those 30 days, the insurer provides to the insured and to the chiropractor the
8	written statement under s. 632.875 (2).
9	SECTION 3760m. 632.875 (2) (intro.) of the statutes is amended to read:

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632.875 (2) (intro.) If, on the basis of an independent evaluation, an insurer restricts or terminates a patient's coverage for the treatment of a condition or complaint by a chiropractor acting within the scope of his or her license and the restriction or termination of coverage results in the patient becoming liable for payment for his or her treatment, the insurer shall, within the time required under s. 628.46 (2m), provide to the patient and to the treating chiropractor a written statement that contains all of the following:".

2. Page 1399, line 25: after that line insert:

"(1c) CLAIM FOR CHIROPRACTIC SERVICES. If a policy, plan, or contract contains provisions that are inconsistent with the treatment of sections 628.46 (2m) and 632.875 (2) (intro.) of the statutes, the treatment of sections 628.46 (2m) and 632.875 (2) (intro.) of the statutes first applies to that policy, plan, or contract on the day on which the policy, plan, or contract is terminated or renewed, whichever occurs first.".

(END)