

State of Misconsin 2009 - 2010 LEGISLATURE

# 2009 ASSEMBLY BILL 665

- January 22, 2010 Introduced by Representatives POCAN, BENEDICT, BERCEAU, MASON, SINICKI, SOLETSKI, SHILLING, ROYS, TURNER, VRUWINK, GUNDERSON, ZEPNICK, A. OTT, HEBL and KAUFERT, cosponsored by Senators ERPENBACH, HANSEN, JAUCH, VINEHOUT, WIRCH, LEHMAN and LASSA. Referred to Committee on Public Health.
- 1 AN ACT to amend 185.981 (4t) and 185.983 (1) (intro.); and to create 609.71 and 2 632.723 of the statutes; relating to: requiring an insurer to make payment 3 directly to a provider who provides the insurer with an assignment of benefits.

## Analysis by the Legislative Reference Bureau

This bill requires an insurer that has issued a group or individual health insurance policy (each called a "disability insurance policy" in the statutes) to pay a health care provider (provider) directly for any service, item, or supply that the provider provides to an insured under the health insurance policy if: the service, item, or supply is covered under the health insurance policy; the provider is not under contract with the insurer to provide services, items, or supplies to the insurer's insureds; and the provider provides to the insurer an assignment of benefits from the insured to the provider. The bill defines an assignment of benefits as a written instrument signed by an insured or the insured's authorized representative that assigns to a provider the insured's claim for payment, reimbursement, or benefits under a health insurance policy.

# The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

**SECTION 1.** 185.981 (4t) of the statutes, as affected by 2009 Wisconsin Act 28,

5 is amended to read:

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1	185.981 (4t) A sickness care plan operated by a cooperative association is
2	subject to ss. 252.14, 631.17, 631.89, 631.95, 632.72 (2), <u>632.723</u> , 632.745 to 632.749,
3	632.85, 632.853, 632.855, 632.87 (2m), (3), (4), (5), and (6), 632.885, 632.895 (10) to
4	(17), and 632.897 (10) and chs. 149 and 155.
5	SECTION 2. 185.983 (1) (intro.) of the statutes, as affected by 2009 Wisconsin
6	Act 28, is amended to read:
7	185.983 (1) (intro.) Every such voluntary nonprofit sickness care plan shall be
8	exempt from chs. $600$ to $646$ , with the exception of ss. $601.04$ , $601.13$ , $601.31$ , $601.41$ ,
9	$601.42,601.43,601.44,601.45,611.67,619.04,628.34\;(10),631.17,631.89,631.93,$
10	631.95, 632.72 (2), <u>632.723</u> , 632.745 to 632.749, 632.775, 632.79, 632.795, 632.85,
11	632.853, 632.855, 632.87 (2m), (3), (4), (5), and (6), $632.885, 632.895$ (5) and (9) to (17),
12	632.896, and 632.897 (10) and chs. 609, 630, 635, 645, and 646, but the sponsoring
10	association shall:
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$\frac{13}{14}$	<b>SECTION 3.</b> 609.71 of the statutes is created to read:
14	<b>SECTION 3.</b> 609.71 of the statutes is created to read:
$14\\15$	<b>SECTION 3.</b> 609.71 of the statutes is created to read: <b>609.71 Direct payment under assignment of benefits.</b> Limited service
14 15 16	<ul> <li>SECTION 3. 609.71 of the statutes is created to read:</li> <li>609.71 Direct payment under assignment of benefits. Limited service health organizations, preferred provider plans, and defined network plans are</li> </ul>
14 15 16 17	SECTION 3. 609.71 of the statutes is created to read: 609.71 Direct payment under assignment of benefits. Limited service health organizations, preferred provider plans, and defined network plans are subject to s. 632.723.
14 15 16 17 18	<ul> <li>SECTION 3. 609.71 of the statutes is created to read:</li> <li>609.71 Direct payment under assignment of benefits. Limited service health organizations, preferred provider plans, and defined network plans are subject to s. 632.723.</li> <li>SECTION 4. 632.723 of the statutes is created to read:</li> </ul>
14 15 16 17 18 19	<ul> <li>SECTION 3. 609.71 of the statutes is created to read:</li> <li>609.71 Direct payment under assignment of benefits. Limited service health organizations, preferred provider plans, and defined network plans are subject to s. 632.723.</li> <li>SECTION 4. 632.723 of the statutes is created to read:</li> <li>632.723 Direct payment to health care provider. (1) In this section:</li> </ul>
14 15 16 17 18 19 20	<ul> <li>SECTION 3. 609.71 of the statutes is created to read:</li> <li>609.71 Direct payment under assignment of benefits. Limited service health organizations, preferred provider plans, and defined network plans are subject to s. 632.723.</li> <li>SECTION 4. 632.723 of the statutes is created to read:</li> <li>632.723 Direct payment to health care provider. (1) In this section:</li> <li>(a) "Assignment of benefits" means a written instrument signed by an insured,</li> </ul>
14 15 16 17 18 19 20 21	<ul> <li>SECTION 3. 609.71 of the statutes is created to read:</li> <li>609.71 Direct payment under assignment of benefits. Limited service health organizations, preferred provider plans, and defined network plans are subject to s. 632.723.</li> <li>SECTION 4. 632.723 of the statutes is created to read:</li> <li>632.723 Direct payment to health care provider. (1) In this section:</li> <li>(a) "Assignment of benefits" means a written instrument signed by an insured, or the authorized representative of an insured, that assigns to a health care provider</li> </ul>
14 15 16 17 18 19 20 21 21 22	<ul> <li>SECTION 3. 609.71 of the statutes is created to read:</li> <li>609.71 Direct payment under assignment of benefits. Limited service health organizations, preferred provider plans, and defined network plans are subject to s. 632.723.</li> <li>SECTION 4. 632.723 of the statutes is created to read:</li> <li>632.723 Direct payment to health care provider. (1) In this section:</li> <li>(a) "Assignment of benefits" means a written instrument signed by an insured, or the authorized representative of an insured, that assigns to a health care provider the insured's claim for payment, reimbursement, or benefits under a disability</li> </ul>

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1 (d) "Nonparticipating provider" means a health care provider that is not under 2 contract with the insurer to provide health care services, items, or supplies to 3 insureds of the insurer.

4 (2) An insurer issuing a group or individual disability insurance policy shall  $\mathbf{5}$ pay a nonparticipating provider directly for any service, item, or supply that the 6 nonparticipating provider provides to an insured under the disability insurance 7 policy and for which there is coverage under the disability insurance policy if the 8 nonparticipating provider provides to the insurer an assignment of benefits, from the 9 insured to the nonparticipating provider. An assignment of benefits in its original 10 form or a legible photocopy or electronic facsimile copy of an assignment of benefits 11 is presumed to be valid.

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### SECTION 5. Initial applicability.

(1) Except as provided in subsection (2), this act first applies to payments for
services, items, and supplies that are provided on the effective date of this
subsection.

(2) If a disability insurance policy that is in effect on the effective date of this
subsection contains a provision that is inconsistent with this act, this act first applies
to payments under the disability insurance policy for services, items, and supplies
that are provided on the date on which the disability insurance policy is renewed.

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(END)