

April 13, 1999

S 839. INSURANCE CLAIMS PAYMENTS/Y2K. *TO AUTHORIZE THE COMMISSIONER OF INSURANCE TO REQUIRE INTERIM CLAIMS PAYMENTS TO PROVIDERS IN THE EVENT CLAIMS CANNOT BE TIMELY PROCESSED DUE TO YEAR 2000 COMPUTER PROBLEMS.*

Adds GS 58-2-235 to require every insurer, third-party administrator, and health care provider to report to Insurance Comm'r if it cannot process or submit claims for services in timely manner due to problems associated with change to year 2000. Report must be made within five business days of determining that problem exists. Comm'r must require insurer or administrator to make interim payments to health care providers if necessary to prevent disruption of health care. Comm'r to use same methods, if any, applicable under federal law for determining interim payments required by federal law. Act effective when becomes law and expires December 31, 2000.

Intro. by Wellons.

Ref. to Insurance

GS 58

April 28, 1999

S 839. INSURANCE CLAIMS PAYMENTS/Y2K. Intro. 4/13/1999. Senate committee substitute makes technical changes to 1st edition.

May 24, 1999

S 839. INSURANCE CLAIMS PAYMENTS/Y2K. Intro. 4/13/99. House committee substitute makes the following changes to 2nd edition. Deletes reporting requirements of third-party administrators and health care providers. Provides that, in the event there is no applicable federal law, interim payments made by the insurer because of a Y2K problem shall be: (1) no less than 80% of the amount paid to the health care provider during the same calendar month of 1999, or (2) an amount equal to the average of the most recent three months of claims payable to the health care provider by that insurer, if the health care provider did not submit claims for services to the insurer during the same calendar month in 1999. Provides that an interim payment is not considered payment in full unless it equals or exceeds the actual amount due to the health care provider.