

March 5, 2003

H 208. MANAGED CARE/HLTH BENEFITS CLARIFYING. *TO AMEND THE PROMPT PAY LAW TO CLARIFY THAT A "CLAIMANT" UNDER THE LAW INCLUDES "AN INSURED"; THAT THIRTY DAYS REFERENCES ARE TO THIRTY "CALENDAR" DAYS; THAT THE NINETY-DAY DEADLINE FOR RESPONDING TO ADDITIONAL INFORMATION REQUESTS FROM AN INSURER ONLY APPLIES TO CLAIMS NOT ALREADY DENIED; TO REQUIRE, UNDER THE PROMPT PAY LAWS, A STATUS REPORT WHEN CLAIMS ARE NOT PAID OR DENIED WITHIN SIXTY DAYS EVEN WHEN THE INSURER IS AWAITING INFORMATION REQUESTED FROM THE CLAIMANT; TO REMOVE FROM THE UNIFORM CREDENTIALING STATUTE AN UNNECESSARY PROVISION; AND TO AMEND UTILIZATION REVIEW LAWS TO CLARIFY THAT A SECOND-LEVEL GRIEVANCE REVIEW PANEL CAN CONSIST OF ONE OR MORE PERSONS.* Amends GS 58-3-225(a)(1), 58-3-225(c) through (g), 58-3-230(a) and 58-50-62(f)(2) as title indicates.

Intro. by Wright.

Ref. to Health	GS 58
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April 29, 2003

H 208. MANAGED CARE/HLTH BENEFITS CLARIFYING. Intro. 3/5/03. House committee substitute makes the following changes to 1st edition. Amends GS 58-3-225 to provide that an insurer must provide notice of a problem with a claim within 15 days of receipt of the claim, and amends title accordingly. Makes other technical changes.

July 17, 2004

H 208. CONVENING ORGANIZATIONAL SESSION. Intro. 3/5/03. Senate committee substitute makes the following changes to 2nd edition. Replaces previous edition with *AN ACT TO PROVIDE FOR AN ORGANIZATIONAL SESSION OF THE GENERAL ASSEMBLY ON THE SECOND MONDAY IN JANUARY AND FOR ADJOURNMENT UNTIL THE THIRD MONDAY AFTER THE INITIAL CONVENING WHEN A HOUSE HAS COMPLETED ITS ORGANIZATIONAL TASKS.* Amends GS 120-11.1 as title indicates.