March 20, 2007

S 1032. HEALTH INSURANCE/PROMPT PAY TIME LINES. Filed 3/20/07. TO IMPOSE TIME LIMITATIONS ON OVERPAYMENT RECOVERY UNDER THE PROMPT CLAIM PAYMENTS STATUTE.

Amends GS 58-3-225(h) to require an insurer to give written notice to a health care provider or facility no less than 45 days before seeking overpayment recovery or offsetting future payments. Also limits the time for the recovery of overpayments or the offsetting of future payments by insurers and the time that health care providers or facilities may recover under or nonpayment to no more than 180 days after the date of the original claim payment, except when there is documented evidence of fraud.

Intro. by Clodfelter.

GS 58

May 14, 2007

S 1032. HEALTH INSURANCE/PROMPT PAY TIME LINES. Filed 3/20/07. Senate committee substitute makes the following changes to 1st edition. Modifies proposed amendments to GS 58-3-225(h) to extend from 180 days to two years the time limit on insurers recovering overpayments and on health care providers and facilities recovering underpayments or nonpayments. Also modifies the exceptions to the time limits. Makes the act effective for claims for services rendered on or after January 1, 2008, and provides an exception for insurers covered by certain national settlement agreements that incorporate the same provisions as the act.

May 17, 2007

S 1032. HEALTH INSURANCE/PROMPT PAY TIME LINES. Filed 3/20/07. Senate committee substitute makes the following changes to 2nd edition. Modifies the proposed amendment to GS 58-3-225(h) (putting time limitations on the ability of insurers to recover overpayments from health care providers and facilities) by (1) deleting the requirement that the provision applies only to the extent permitted by the contract between the insurer and the health care provider or health care facility, (2) shortening the time by which an insurer must give notice of overpayment from 45 to 30 days before the insurer actually seeks recovery of an overpayment, and (3) exempts from the two-year statute of limitations for seeking recovery of overpayment claims involving fraud by an agent of a health care provider or facility and claims involving a provider receiving a double payment from a government payor. Also, modifies the similar exception relating to underpayment recovery. Removes provision exempting insurers subject to certain national settlement agreement.

July 27, 2007

S 1032. HEALTH INSURANCE/PROMPT PAY TIME LINES. Filed 3/20/07. House committee substitute makes the following changes to 4th edition. Effective for policies issued or renewed on or after January 1, 2009, enacts new GS 58-3-247 requiring insurers to provide insurance identification cards to individuals insured under a health benefit plan. Specifies the information that the card must contain and other requirements for card design and presentation of the information. States that the information may also be provided through other electronic technology. Conforms the effective date and the title.

August 27, 2007

SL 2007-362 (S 1032). HEALTH INSURANCE/PROMPT PAY TIME LINES. AN ACT TO IMPOSE TIME LIMITATIONS ON OVERPAYMENT RECOVERY UNDER THE PROMPT CLAIM PAYMENTS STATUTE AND TO REQUIRE THAT INSURERS OFFERING HEALTH BENEFITS PLANS PROVIDE INSURANCE IDENTIFICATION CARDS. Summarized in Daily Bulletin 3/20/07, 5/14/07, 5/17/07, and 7/27/07. Enacted August 17, 2007. Section 1 is effective January 1, 2008. The remainder is effective January 1, 2009.