

**CONFERENCE COMMITTEE REPORT
DIGEST FOR EHB 1346**

Citations Affected: IC 5-10; IC 27-8; IC 27-13; noncode.

Synopsis: Health care. Conference committee report for EHB 1346. Amends the clean claims law that specifies the period within which an administrator of a state employee health benefit plan, an insurer, or a health maintenance organization must pay, deny, or notify a provider of deficiencies concerning a claim. Requires the commission on excellence in health care to study and make recommendations concerning increasing the number of nurses, speech pathologists, respiratory care practitioners, and dental hygienists. Allows additional members to be appointed to subcommittees. (This conference committee report adds provisions that amend the clean claim law.)

Effective: Upon passage; July 1, 2002.

Adopted

Rejected

CONFERENCE COMMITTEE REPORT

MR. SPEAKER:

Your Conference Committee appointed to confer with a like committee from the Senate upon Engrossed Senate Amendments to Engrossed House Bill No. 1346 respectfully reports that said two committees have conferred and agreed as follows to wit:

that the House recede from its dissent from all Senate amendments and that the House now concur in all Senate amendments to the bill and that the bill be further amended as follows:

- 1 Delete the title and insert the following:
2 A BILL FOR AN ACT to amend the Indiana Code concerning health.
3 Page 1, between the enacting clause and line 1, begin a new
4 paragraph and insert:
5 "SECTION 1. IC 5-10-8.1-6, AS ADDED BY P.L.162-2001,
6 SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
7 UPON PASSAGE]: Sec. 6. (a) The administrator shall pay or deny
8 each clean claim in accordance with section 7 of this chapter.
9 (b) An administrator shall notify a provider of any deficiencies in a
10 submitted claim not ~~less~~ **more** than:
11 (1) thirty (30) days for a claim that is filed electronically; or
12 (2) forty-five (45) days for a claim that is filed on paper;
13 and describe any remedy necessary to establish a clean claim.
14 (c) Failure of an administrator to notify a provider as required under
15 subsection (b) establishes the submitted claim as a clean claim.
16 SECTION 2. IC 27-8-5.7-5, AS ADDED BY P.L.162-2001,
17 SECTION 5, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
18 UPON PASSAGE]: Sec. 5. (a) An insurer shall pay or deny each clean
19 claim in accordance with section 6 of this chapter.
20 (b) An insurer shall notify a provider of any deficiencies in a
21 submitted claim not ~~less~~ **more** than:
22 (1) thirty (30) days for a claim that is filed electronically; or

1 (2) forty-five (45) days for a claim that is filed on paper;
2 and describe any remedy necessary to establish a clean claim.

3 (c) Failure of an insurer to notify a provider as required under
4 subsection (b) establishes the submitted claim as a clean claim.

5 SECTION 3. IC 27-13-36.2-3, AS ADDED BY P.L.162-2001,
6 SECTION 6, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
7 UPON PASSAGE]: Sec. 3. (a) A health maintenance organization shall
8 pay or deny each clean claim in accordance with section 4 of this
9 chapter.

10 (b) A health maintenance organization shall notify a provider of any
11 deficiencies in a submitted claim not ~~less~~ **more** than:

12 (1) thirty (30) days for a claim that is filed electronically; or

13 (2) forty-five (45) days for a claim that is filed on paper;
14 and describe any remedy necessary to establish a clean claim.

15 (c) Failure of a health maintenance organization to notify a provider
16 as required under subsection (b) establishes the submitted claim as a
17 clean claim.

18 SECTION 4. IC 27-13-36.2-4, AS ADDED BY P.L.162-2001,
19 SECTION 6, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
20 UPON PASSAGE]: Sec. 4. (a) A health maintenance organization shall
21 pay or deny each clean claim as follows:

22 (1) If the claim is filed electronically, not ~~less~~ **more** than thirty (30)
23 days after the date the claim is received by the health maintenance
24 organization.

25 (2) If the claim is filed on paper, not ~~less~~ **more** than forty-five (45)
26 days after the date the claim is received by the health maintenance
27 organization.

28 (b) If:

29 (1) a health maintenance organization fails to pay or deny a clean
30 claim in the time required under subsection (a); and

31 (2) the health maintenance organization subsequently pays the
32 claim;

33 the health maintenance organization shall pay the provider that
34 submitted the claim interest on the lesser of the usual, customary, and
35 reasonable charge for the health care services provided to the enrollee
36 or an amount agreed to between the health maintenance organization
37 and the provider paid under this section.

38 (c) Interest paid under subsection (b):

39 (1) accrues beginning:

40 (A) thirty-one (31) days after the date the claim is filed under
41 subsection (a)(1); or

42 (B) forty-six (46) days after the date the claim is filed under
43 subsection (a)(2); and

44 (2) stops accruing on the date the claim is paid.

45 (d) In paying interest under subsection (b), a health maintenance
46 organization shall use the same interest rate as provided in
47 IC 12-15-21-3(7)(A).".

48 Page 5, after line 23, begin a new paragraph and insert:

49 "SECTION 6. **An emergency is declared for this act.**".

50 Renumber all SECTIONS consecutively.

(Reference is to EHB 1346 as printed February 20, 2002.)

Conference Committee Report
on
Engrossed House Bill 1346

Signed by:

Representative Pelath
Chairperson

Senator Miller

Representative Budak

Senator Craycraft

House Conferees

Senate Conferees