## 2015 SESSION

## LEGISLATION NOT PREPARED BY DLS ENGROSSED

15104214D

**HOUSE BILL NO. 2384** 

House Amendments in [] - February 9, 2015

A BILL to amend and reenact § 65.2-605.1 of the Code of Virginia, relating to workers' compensation; electronic billing and payment.

Patron Prior to Engrossment—Delegate Byron

Referred to Committee on Commerce and Labor

Be it enacted by the General Assembly of Virginia:

1. That § 65.2-605.1 of the Code of Virginia is amended and reenacted as follows:

§ 65.2-605.1. Prompt payment; limitation on claims.

A. Payment for health care services that the employer does not contest, deny, or consider incomplete shall be made to the health care provider within 60 days after receipt of each separate itemization of the health care services provided.

- B. If the itemization or a portion thereof is contested, denied, or considered incomplete, the employer or the employer's workers' compensation insurance carrier shall notify the health care provider within 45 days after receipt of the itemization that the itemization is contested, denied, or considered incomplete. The notification shall include the following information:
- 1. The reasons for contesting or denying the itemization, or the reasons the itemization is considered incomplete:
- 2. If the itemization is considered incomplete, all additional information required to make a decision;
  - 3. The remedies available to the health care provider if the health care provider disagrees.

Payment or denial shall be made within 60 days after receipt from the health care provider of the information requested by the employer or employer's workers' compensation carrier for an incomplete claim under this subsection.

- C. Payment due for any properly documented health care services that are neither contested within the 45-day period nor paid within the 60-day period, as required by this section, shall be increased by interest at the judgment rate of interest as provided in § 6.2-302 retroactive to the date payment was due under this section.
- D. An employer's liability to a health care provider under this section shall not affect its liability to an employee.
- E. No employer or workers' compensation carrier may seek recovery of a payment made to a health care provider for health care services rendered after July 1, 2014, to a claimant, unless such recovery is sought less than one year from the date payment was made to the health care provider, except in cases of fraud. The Commission shall have jurisdiction over any disputes over recoveries.
- F. No health care provider shall submit a claim to the Commission contesting the sufficiency of payment for health care services rendered to a claimant after July 1, 2014, unless (i) such claim is filed within one year of the date the last payment is received by the health care provider pursuant to this section or (ii) if the employer denied or contested payment for any portion of the health care services, then, as to that service or portion thereof, such claim is filed within one year of the date the medical award covering such date of service for a specific item or treatment in question becomes final.
- G. Any health care provider located outside of the Commonwealth who provides health care services under the Act to a claimant shall be reimbursed as provided in this section, and the "same community," as used in subsection A of § 65.2-605, shall be deemed to be the principal place of business of the employer if located in the Commonwealth or, if no such location exists, then the location where the Commission hearing regarding the dispute is conducted.
- H. Employers, employers' workers' compensation insurance carriers, and providers of workers' compensation medical services shall adopt and implement infrastructure to allow providers of workers' compensation medical services to submit their billing, claims, case management, health records, and all supporting documentation electronically to payers and [allowe allow] payers to return actual payment, claim status, and remittance information electronically which uses a standard for transactions and methods as defined by the Virginia [Workers Workers'] Compensation Commission and consistent with International Association of Industrial Accident Boards and Commission Medical Billing and Payment guidelines.
- 2. That the provisions of Subsection H. shall become effective on January 1, [ 2017 2018 ].