1996 SESSION

ENROLLED

VIRGINIA ACTS OF ASSEMBLY - CHAPTER

2 An Act to amend and reenact § 38.2-5300 of the Code of Virginia, relating to accident and sickness 3 insurance; utilization review.

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Approved

Be it enacted by the General Assembly of Virginia: 6

7 1. That § 38.2-5300 of the Code of Virginia is amended and reenacted as follows: 8

§ 38.2-5300. Definitions.

9 In this chapter and Chapter 54 (§ 38.2-5400, et seq.) of this title, the following terms have the 10 meanings indicated:

"Certificate" means a certificate of registration granted by the Commission to a private review agent.

"Commission" means the State Corporation Commission.

"Physician advisor" means a physician licensed to practice medicine who provides medical advice or 13 14 information to a private review agent or a utilization review entity in connection with its utilization 15 review activities.

16 "Private review agent" means a person or entity performing utilization review, except that the term 17 shall not include the following entities or employees of any such entity so long as they conduct utilization review solely for subscribers, policyholders, members or enrollees: 18 19

1. A health maintenance organization authorized to transact business in Virginia; or

20 2. A health insurer, hospital service corporation, health services plan or preferred provider 21 organization authorized to offer health benefits in this Commonwealth.

"Utilization review" means a system for reviewing the necessity, appropriateness and efficiency of 22 23 hospital, medical or other health care resources rendered or proposed to be rendered to a patient or 24 group of patients for the purpose of determining whether such services should be covered or provided 25 by an insurer, health services plan, health maintenance organization, or other entity or person. For purposes of this chapter and Chapter 54 of this title, "utilization review" shall include, but not be limited 26 27 to, preadmission, concurrent and retrospective medical necessity determination and review related to the appropriateness of the site at which services were or are to be delivered. "Utilization review" shall not 28 29 include (i) review of issues concerning insurance contract coverage or contractual restrictions on 30 facilities to be used for the provision of services $\Theta_{\mathbf{F}}$, (ii) any review of patient information by an 31 employee of or consultant to any licensed hospital for patients of such hospital, or (iii) any 32 determination by an insurer as to the reasonableness and necessity of services for the treatment and 33 care of an injury suffered by an insured for which reimbursement is claimed under a contract of 34 insurance covering any classes of insurance defined in §§ 38.2-117 through 38.2-119, 38.2-124 through 38.2-126, 38.2-130 through 38.2-132 and 38.2-134. 35

"Utilization review program" means a program for conducting utilization review by a private review 36 37 agent.

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