

## Department of Planning and Budget 2013 Fiscal Impact Statement

**1. Bill Number:** SB 707

<b>House of Origin</b>	<input type="checkbox"/> Introduced	<input type="checkbox"/> Substitute	<input type="checkbox"/> Engrossed
<b>Second House</b>	<input type="checkbox"/> In Committee	<input type="checkbox"/> Substitute	<input checked="" type="checkbox"/> Enrolled

**2. Patron:** McEachin

**3. Committee:** Passed Both Houses

**4. Title:** Health care providers; submitting health insurance claims

**5. Summary:** The bill requires any in-network provider that provides health care services to a covered patient to submit its claim to the health insurer for the health care services in accordance with the terms of the applicable provider agreement. The requirement does not apply if the covered patient fails to provide information required by the terms of the plan documents. If an in-network provider does not submit its claim as required, then the covered patient is not obligated to pay for health care services for which the in-network provider was required to submit its claim, and the in-network provider shall not have the benefit of certain liens with regard to the health care services. In addition, such an in-network provider is prohibited from recovering payment from medical expense benefits provided under a motor vehicle liability insurance policy.

**6. Budget Amendment Necessary:** No.

**7. No Fiscal Impact**

**8. Fiscal Implications:** The bill has no fiscal impact on the Commonwealth. It deals with the responsibilities of in-network providers to submit claims in accordance with their provider agreement with a health insurer, and that failure to do so eliminates any liability on the covered patient from paying for those health care services.

**9. Specific Agency or Political Subdivisions Affected:** None.

**10. Technical Amendment Necessary:** No.

**11. Other Comments:** None.

**Date:** 2/19/13

**Document:** G:\GA Sessions\2013 Session\SB707ER.docx