

## AMENDMENTS TO HOUSE BILL NO. 564

Sponsor: REPRESENTATIVE PICKETT

Printer's No. 579

1 Amend Bill, page 1, lines 11 through 13, by striking out  
2 "uniform health insurance claim" in line 11 and all of lines 12  
3 and 13 and inserting  
4 quality health care accountability and protection, further  
5 providing for prompt payment of claims.

6 Amend Bill, page 1, line 16, by striking out "1202" and  
7 inserting  
8 2166(a)

9 Amend Bill, page 1, lines 19 through 21; pages 2 and 3, lines  
10 1 through 30; page 4, lines 1 through 12; by striking out all of  
11 said lines on said pages and inserting

12 Section 2166. Prompt Payment of Claims.--(a) A licensed  
13 insurer or a managed care plan shall pay a clean claim submitted  
14 by a participating or nonparticipating health care provider  
15 within forty-five (45) days of receipt of the clean claim.

16 (b) If a licensed insurer or a managed care plan fails to  
17 remit the payment as provided under subsection (a), interest at  
18 ten per centum (10%) per annum shall be added to the amount owed  
19 on the clean claim. Interest shall be calculated beginning the  
20 day after the required payment date and ending on the date the  
21 claim is paid. The licensed insurer or managed care plan shall  
22 not be required to pay any interest calculated to be less than  
23 two (\$2) dollars.

24 (c) For purposes of this section, a claim shall be deemed to  
25 be paid when a licensed insurer or managed care plan:

26 (1) mails a check to the participating or nonparticipating  
27 provider; or

28 (2) makes an electronic transfer of funds to the  
29 participating provider or nonparticipating provider.