



General Assembly

February Session, 2006

Raised Bill No. 449

LCO No. 1944



Referred to Committee on **PUBLIC HEALTH**

Introduced by:
(PH)

AN ACT CONCERNING STANDARDS IN CONTRACTS BETWEEN HEALTH INSURERS AND PHYSICIANS.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. (NEW) (*Effective October 1, 2006*) (a) As used in this
2 section: (1) "Contracting health organization" means (A) a managed
3 care organization, as defined in section 38a-478 of the 2006 supplement
4 to the general statutes, or (B) a preferred provider network, as defined
5 in section 38a-479aa of the general statutes; and (2) "physician" means a
6 physician or surgeon, chiropractor, podiatrist, psychologist,
7 optometrist, natureopath or advanced practice registered nurse.

8 (b) Each contract for services to be provided to residents of this state
9 entered into, renewed, amended or modified on or after October 1,
10 2006, between a contracting health organization and a physician shall
11 include provisions that: (1) Provide an explanation of the physician
12 payment methodology, the time periods for physician payments, the
13 information to be relied on to calculate payments and adjustments and
14 the process to be relied on to resolve disputes concerning physician
15 payments; and (2) require that the contracting health organization
16 provide to each participating physician a complete copy of all current

17 procedural terminology codes and all current reimbursements for such
 18 codes that determine the physician's reimbursement for the entire
 19 contract period.

20 (c) No contract for services to be provided to residents of this state
 21 entered into, renewed, amended or modified on or after October 1,
 22 2006, between a contracting health organization and a physician shall
 23 include any provision that allows the contracting health organization
 24 or physician to unilaterally change any term or provision of the
 25 agreed-upon contract, including, but not limited to, any term or
 26 provision concerning: (1) Fee schedules or provider panels; (2) the
 27 physician's ability to discuss or negotiate the terms of the contract; or
 28 (3) the physician's ability to terminate the contract.

This act shall take effect as follows and shall amend the following sections:		
Section 1	October 1, 2006	New section

Statement of Purpose:

To establish standards for contracts between health insurers and physicians.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]



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