

House Bill 1328 (AS PASSED HOUSE AND SENATE)

By: Representatives Peake of the 137th, Channell of the 116th, and Lunsford of the 110th

A BILL TO BE ENTITLED
AN ACT

1 To amend Code Section 33-20A-9.1 of the Official Code of Georgia Annotated, relating to
2 consumer choice options offered by managed care plans, so as to revise a provision relating
3 to consumer choice options under the state employees' health insurance plan; to provide for
4 related matters; to repeal conflicting laws; and for other purposes.

5 BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

6 style="text-align:center">**SECTION 1.**

7 Code Section 33-20A-9.1 of the Official Code of Georgia Annotated, relating to consumer
8 choice options offered by managed care plans, is amended by revising subsection (c) as
9 follows:

10 "(c) Except for managed care plans offering a consumer choice option under subparagraph
11 (d)(2)(C) of this Code section, every managed care plan ~~offered pursuant to Article 1 of~~
12 ~~Chapter 18 of Title 45 or~~ offered by a managed care entity shall offer a separate consumer
13 choice option to enrollees at least annually with the following provisions:

14 (1) Every enrollee of a managed care plan shall have the right to nominate one or more
15 out of network health care providers or hospitals for use by that enrollee and that
16 enrollee's eligible dependents, if:

17 (A) Such health care provider or hospital is located within and licensed by the state;

18 (B) Such health care provider or hospital agrees to accept reimbursement from both the
19 plan and the enrollee at the rates and on the terms and conditions applicable to similarly
20 situated participating providers and hospitals. The reimbursement rates for the plan
21 may be proportionally reduced from those paid to participating providers if the
22 cost-sharing provisions in paragraph (3) of subsection (d) of this Code section are
23 utilized in the consumer choice option;

24 (C) Such health care provider or hospital agrees to adhere to the managed care plan's
25 quality assurance requirements and to provide the plan with necessary medical
26 information related to such care; and

1 (D) Such health care provider or hospital meets all other reasonable criteria as required
2 by the managed care plan of in network providers and hospitals; and
3 (2) Each nominated health care provider or hospital which meets the requirements of
4 subparagraphs (A), (B), (C), and (D) of paragraph (1) of this subsection shall be
5 reimbursed by the plan, subject to the agreement in subparagraph (B) of paragraph (1) of
6 this subsection, as though it belonged to the managed care plan's provider network. Such
7 reimbursement shall be full and final payment for the health care services provided to the
8 enrollee and no health care provider or hospital shall bill the enrollee for any portion of
9 a payment exclusive of the requirements of subparagraph (B) of paragraph (1) of this
10 subsection."

11 **SECTION 2.**

12 All laws and parts of laws in conflict with this Act are repealed.