

The Senate Committee on Rules offered the following substitute to HB 454:

A BILL TO BE ENTITLED  
AN ACT

1 To amend Code Section 33-20C-2 of the Official Code of Georgia Annotated, relating to  
2 online provider directories, so as to provide for certain coverage requirements concerning  
3 providers that become out-of-network during a plan year; to provide for exceptions and  
4 applicability; to provide for related matters; to repeal conflicting laws; and for other  
5 purposes.

6 BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

7 **SECTION 1.**

8 Code Section 33-20C-2 of the Official Code of Georgia Annotated, relating to online  
9 provider directories, is amended by adding a new subsection to read as follows:

10 "(g)(1) When an insurer's provider directory accessed through the insurer's website  
11 includes a provider as a participating provider for a network plan at such time as a  
12 prospective covered person selects his or her health benefit plan during the designated  
13 open enrollment time frame, and subsequent to open enrollment in the succeeding plan  
14 year, the provider is no longer in-network for the covered person's benefit plan, such  
15 insurer shall, subject to the coverage terms of the health benefit plan, reimburse the  
16 provider at its most recent contracted in-network rates for a period ending 180 days after

17 the date upon which the provider contract terminates or ending on the last day of the  
18 covered person's coverage, whichever occurs sooner. The provider shall accept the  
19 insurer's payment in full. Any amount paid to the provider by the insurer pursuant to this  
20 subsection shall not be required to include any amount of coinsurance, copayment, or  
21 deductible owed by the covered person or already paid by such covered person.

22 (2) In the event of a public health emergency, including but not limited to a public health  
23 emergency as defined in Code Section 31-12-1.1, an insurer shall, for a period  
24 commencing on the effective date of the public health emergency and ending 150 days  
25 after the expiration of such public health emergency:

26 (A) Be prohibited from terminating a provider from the insurer's network; and

27 (B) Reimburse a provider at its most recent contracted in-network rates.

28 (3) This subsection shall not apply if the:

29 (A) Provider becomes out-of-network due to suspension, expiration, or revocation of  
30 such provider's license;

31 (B) Provider unilaterally terminates participation in the insurer's network plan without  
32 cause;

33 (C) Insurer terminates the provider for cause for fraud, misrepresentation, or other  
34 actions constituting a termination for cause under such provider's contract; or

35 (D) Insurer's provider directory accessed through the insurer's website accurately  
36 displayed the provider's network status, including any future date on which such  
37 provider would become out of network, 15 days prior to the beginning of the designated  
38 open enrollment time frame.

39 (4) The provisions of subsection (d) of Code Section 33-20C-3 shall not apply to the  
40 circumstances described in paragraph (1) of this subsection."

41 **SECTION 2.**

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