

By: Representative Chism

To: Public Health and Human Services; Appropriations

HOUSE BILL NO. 1222

1 AN ACT TO BRING FORWARD SECTIONS 83-41-403 AND 83-41-409,
2 MISSISSIPPI CODE OF 1972, WHICH ARE PART OF THE PATIENT PROTECTION
3 ACT OF 1995, FOR PURPOSES OF POSSIBLE AMENDMENT; AND FOR RELATED
4 PURPOSES.

5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

6 **SECTION 1.** Section 83-41-403, Mississippi Code of 1972, is
7 brought forward as follows:

8 83-41-403. As used in this article:

9 (a) "Department" means the Mississippi Department of
10 Insurance.

11 (b) "Managed care plan" means a plan operated by a
12 managed care entity as described in subparagraph (c) that provides
13 for the financing and delivery of health care services to persons
14 enrolled in such plan through:

15 (i) Arrangements with selected providers to
16 furnish health care services;

17 (ii) Explicit standards for the selection of
18 participating providers;



19 (iii) Organizational arrangements for ongoing
20 quality assurance, utilization review programs and dispute
21 resolution; and

22 (iv) Financial incentives for persons enrolled in
23 the plan to use the participating providers, products and
24 procedures provided for by the plan.

25 (c) "Managed care entity" includes a licensed insurance
26 company, hospital or medical service plan, health maintenance
27 organization (HMO), an employer or employee organization, or a
28 managed care contractor as described in subparagraph (d) that
29 operates a managed care plan.

30 (d) "Managed care contractor" means a person or
31 corporation that:

32 (i) Establishes, operates or maintains a network
33 of participating providers;

34 (ii) Conducts or arranges for utilization review
35 activities; and

36 (iii) Contracts with an insurance company, a
37 hospital or medical service plan, an employer or employee
38 organization, or any other entity providing coverage for health
39 care services to operate a managed care plan.

40 (e) "Participating provider" means a physician,
41 hospital, pharmacy, pharmacist, dentist, nurse, chiropractor,
42 optometrist, or other provider of health care services licensed or
43 certified by the state, that has entered into an agreement with a



44 managed care entity to provide services, products or supplies to a
45 patient enrolled in a managed care plan.

46 **SECTION 2.** Section 83-41-409, Mississippi Code of 1972, is
47 brought forward as follows:

48 83-41-409. In order to be certified and recertified under
49 this article, a managed care plan shall:

50 (a) Provide enrollees or other applicants with written
51 information on the terms and conditions of coverage in easily
52 understandable language including, but not limited to, information
53 on the following:

54 (i) Coverage provisions, benefits, limitations,
55 exclusions and restrictions on the use of any providers of care;

56 (ii) Summary of utilization review and quality
57 assurance policies; and

58 (iii) Enrollee financial responsibility for
59 copayments, deductibles and payments for out-of-plan services or
60 supplies;

61 (b) Demonstrate that its provider network has providers
62 of sufficient number throughout the service area to assure
63 reasonable access to care with minimum inconvenience by plan
64 enrollees;

65 (c) File a summary of the plan credentialing criteria
66 and process and policies with the State Department of Insurance to
67 be available upon request;



68 (d) Provide a participating provider with a copy of
69 his/her individual profile if economic or practice profiles, or
70 both, are used in the credentialing process upon request;

71 (e) When any provider application for participation is
72 denied or contract is terminated, the reasons for denial or
73 termination shall be reviewed by the managed care plan upon the
74 request of the provider; and

75 (f) Establish procedures to ensure that all applicable
76 state and federal laws designed to protect the confidentiality of
77 medical records are followed.

78 **SECTION 3.** This act shall take effect and be in force from
79 and after July 1, 2018.

