## As Introduced

## 129th General Assembly Regular Session 2011-2012

S. B. No. 55

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## **Senator Tavares**

## A BILL

To enact sections 1751.76, 3923.71, and 3923.74 of

the Revised Code to prohibit health insurers from denying payment for a service during or after the

performance of the service if the insurer provided

prior written authorization for the service. BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO: Section 1. That sections 1751.76, 3923.71, and 3923.74 of the 6 Revised Code be enacted to read as follows: Sec. 1751.76. No health insuring corporation that agrees in 8 writing to provide coverage for the performance of a service prior 9 to the performance of the service shall deny payment for the 10 service during or after the performance of the service unless the 11 health insuring corporation's written agreement to provide 12 coverage for the service was based upon inaccurate information 13 provided to the health insuring corporation by the enrollee or 14 health care provider. 15 Sec. 3923.71. No sickness and accident insurer that agrees in 16 writing to provide coverage for the performance of a service prior 17 to the performance of the service shall deny payment for the 18

service during or after the performance of the service unless the

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insurer's written agreement to provide coverage for the service	20
was based upon inaccurate information provided to the insurer by	21
the insured or the health care provider.	22
Sec. 3923.74. No public employee benefit plan that agrees in	23
writing to provide coverage for the performance of a service prior	24
to the performance of the service shall deny payment for the	25
service during or after the performance of the service unless the	26
public employee benefit plan's written agreement to provide	27
coverage for the service was based upon inaccurate information	28
provided to the public employee benefit plan by the plan member,	29
covered dependent, or health care provider.	30