

CONFERENCE COMMITTEE REPORT SUMMARY

Measure HB1053

Principal Authors: Representative McEntire
Senator Treat

General Subject Matter: Insurance

General Description of **Major Differences** between the current report and the version last seen and voted on in the House and the sections in which such differences are located:

√ Changes from engrossed House measure which were made in the Senate and contained in conference committee report/substitute (applies *only* to House measures):

Strikes the title.

√ Changes made in conference:

The CCS to HB1053 change the material of the bill from relating to small health employer insurance to relating to out-of-network surprise medical bills. The CCS creates the Out-of-Network Surprise Billing Transparency Act. The act defines terms and provides plans affected. The CCS prohibits providers from seeking compensation from enrollees for emergency out-of-network services and non-emergency out-of-network services when an enrollee has not signed a disclosure statement.

The bill allows for bill dispute resolution procedures, requires health benefit plans and health providers to provide certain information on their websites, requires contracts between carriers and providers to contain a “hold-harmless” agreement, requires certain notice in cases where a provider bills an enrollee for out-of-network nonemergency services, and requires carriers to provide a provider directory on its website for enrollees.

Date Prepared: May 16, 2019
Prepared by: Anna Rouw