CONFERENCE COMMITTEE REPORT Senate Bill No. 169 By Senator Claitor

June 23, 2011

To the Honorable President and Members of the Senate and to the Honorable Speaker and Members of the House of Representatives.

Ladies and Gentlemen:

We, the conferees appointed to confer over the disagreement between the two houses concerning Senate Bill No. 169 by Senator Claitor, recommend the following concerning the Reengrossed bill:

- 1. That House Committee Amendment Nos. 1 through, 2, 3, and 5 proposed by the House Committee on Insurance and adopted by the House of Representatives on June 13, 2011 be adopted.
- 2. That House Committee Amendment No. 4 proposed by the House Committee on Insurance and adopted by the House of Representatives on June 13, 2011 be rejected.
- 3. That House Floor Amendment No 1 proposed by Representative Gallot and adopted by the House of Representatives on June 15, 2011 be adopted .
- 4. That the following amendments to the Reengrossed bill be adopted:

AMENDMENT NO. 1

On page 1, line 15, after "representative." add the following:

"After a period of nine months from the date of the accident from which medical claims arise, the health insurance issuer may seek reimbursement from the medical payments insurer for only the outstanding balance remaining under the automobile policy for medical coverage."

Respectfully submitted,	
Senators:	Representatives:
Senator Dan "Blade" Morrish	Representative Patrick Page Cortez
Senator Dan Claitor	Representative Chuck Kleckley
Senator Neil Riser	Representative Richard "Rick" Gallot, Ju

The legislative instrument and the following digest, which constitutes no part of the legislative instrument, were prepared by Tom Tyler.

CONFERENCE COMMITTEE REPORT DIGEST

Senate Bill No. 169 by Senator Claitor

Keyword and summary of the bill as proposed by the Conference Committee

AUTOMOBILE INSURANCE. Provides for payment of medical claims by the insurer. (8/15/11)

Report adopts House amendments to:

- 1. Except from <u>proposed law</u> agreements between the parties and in accordance with regulations of the Department of Insurance governing the coordination of benefits.
- 2. Exclude Medicare Advantage plans or self-insured plans from provisions of <u>proposed</u> law.
- 3. Delete provisions allowing recovery of court costs and attorney fees in any action or proceeding to enforce <u>proposed law</u>.

Report rejects House amendments which would have:

1. Allowed the health insurance issuer to seek reimbursement for the full amount of medical payment coverage proceeds after a period of nine months from the date of the accident from which medical claims arise.

Report amends the bill to:

1. Allow the health insurance issuer to seek reimbursement from the medical payments insurer for only the outstanding balance remaining under the automobile policy for medical coverage after a period of nine months from the date of the accident..

DIGEST OF THE SENATE BILL AS RETURNED TO THE SENATE

Digest of the bill as proposed by the Conference Committee

<u>Proposed law</u> prohibits a health insurance issuer from seeking reimbursement from an insurer that provides automobile medical payment coverage to the health insurance issuer's insured or member without obtaining prior written consent of the insured or member or his legal representative, except as provided in the <u>proposed law</u> or by agreement between the parties and in accordance with regulations of the Department of Insurance governing the coordination of benefits.

Provides that after a period of nine months from the date of the accident from which medical claims arise, the health insurance issuer may seek reimbursement from the medical payments insurer for only the outstanding balance remaining under the automobile policy for medical coverage.

<u>Proposed law</u> does not prohibit or impair the rights of an insurer or provider from seeking reimbursement of monies paid; however, the total amount to be reimbursed is not to exceed the amount actually paid by the insurer or provider.

<u>Proposed law</u> provides that <u>proposed law</u> shall not apply to Medicare Advantage plans or self-insured plans.

Effective August 15, 2011.

(Amends R.S. 32:793(D); adds R.S. 22:1881)