

New law 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 new law or by agreement between the parties and in accordance with regulations of the DOI 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.

New law 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.

New law provides that new law shall not apply to Medicare Advantage plans or self-insured plans.

Effective August 15, 2011.

(Adds R.S. 22:1881)