

Bill Summary
2nd Session of the 57th Legislature

Bill No.:	SB 1556
Version:	INT
Request No.:	2727
Author:	Sen. Newhouse
Date:	01/16/2020

Bill Analysis

SB 1556 allows insurance carriers to provide a reason for a claim being denied and requires such notification to provide detailed information. The measure requires carriers to include instructions on where a person or entity that received notification of a denial may respond through a dedicated facsimile or electronic mail message. Recipients of the notice are authorized by the measure to appeal the decision. Insurers denying an appeal must provide a response addressing the contents of the appeal as well as provide a number to a health plan representative at the department of appeals of the insurer. A date and time to discuss the claim must also be specified within 21 days of receipt of the appeal by the insurer.

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