- RCW 48.200.030 Registration requirements—Application—Fees—Retention of transaction records. (1) To conduct business in this state, a health care benefit manager must register with the commissioner and annually renew the registration.
- (2) To apply for registration under this section, a health care benefit manager must:
- (a) Submit an application on forms and in a manner prescribed by the commissioner and verified by the applicant by affidavit or declaration under chapter 5.50 RCW. Applications must contain at least the following information:
- (i) The identity of the health care benefit manager and of persons with any ownership or controlling interest in the applicant including relevant business licenses and tax identification numbers, and the identity of any entity that the health care benefit manager has a controlling interest in;
- (ii) The business name, address, phone number, and contact person for the health care benefit manager;
- (iii) Any areas of specialty such as pharmacy benefit management, radiology benefit management, laboratory benefit management, mental health benefit management, or other specialty; and
- (iv) Any other information as the commissioner may reasonably require.
- (b) Pay an initial registration fee and annual renewal registration fee as established in rule by the commissioner. The fees for each registration must be set by the commissioner in an amount that ensures the registration, renewal, and oversight activities are self-supporting. If one health care benefit manager has a contract with more than one carrier, the health care benefit manager must complete only one application providing the details necessary for each contract.
- (3) All receipts from fees collected by the commissioner under this section must be deposited into the insurance commissioner's regulatory account created in RCW 48.02.190.
- (4) Before approving an application for or renewal of a registration, the commissioner must find that the health care benefit manager:
- (a) Has not committed any act that would result in denial, suspension, or revocation of a registration;
 - (b) Has paid the required fees; and
- (c) Has the capacity to comply with, and has designated a person responsible for, compliance with state and federal laws.
- (5) Any material change in the information provided to obtain or renew a registration must be filed with the commissioner within thirty days of the change.
- (6) Every registered health care benefit manager must retain a record of all transactions completed for a period of not less than seven years from the date of their creation. All such records as to any particular transaction must be kept available and open to inspection by the commissioner during the seven years after the date of completion of such transaction. [2020 c 240 § 3.]