

6122-S

Sponsor(s): Senate Committee on Health & Long-Term Care (originally sponsored by Senators Quigley, Fairley, Kohl, Thibaudeau, Loveland, Sheldon, Franklin, Winsley, Pelz and McAuliffe)

Brief Description: Protecting patient choice in health care insurance and health care providers.

**SB 6122-S - DIGEST**

(AS OF SENATE 2ND READING 2/10/96)

Provides that every carrier, with respect to every health plan delivered, issued for delivery, or renewed on and after January 1, 1997, may include enrollee cost-sharing requirements, utilization review requirements, gatekeeper requirements, or any other managed care requirements or procedures, only to assure efficient and effective delivery of health care services. Such requirements, procedures, or contract terms may not discriminate against any type of provider included in the plan and must be written and applied on a substantially fair and uniform basis among all health care providers included in the plan.

Includes chiropractors and naturopathic physicians in the plan.