
SENATE BILL 6496

State of Washington 52nd Legislature 1992 Regular Session

By Senators Newhouse and Vognild

Read first time 02/07/92. Referred to Committee on Commerce & Labor.

1 AN ACT Relating to reimbursement for medical services; and amending
2 RCW 51.36.080.

3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

4 **Sec. 1.** RCW 51.36.080 and 1987 c 470 s 1 are each amended to read
5 as follows:

6 (1) All fees and medical charges under this title shall conform to
7 regulations promulgated by the director and shall be paid within sixty
8 days of receipt by the department of a proper billing in the form
9 prescribed by department rule or sixty days after the claim is allowed
10 by final order or judgment, if an otherwise proper billing is received
11 by the department prior to final adjudication of claim allowance. The
12 department shall pay interest at the rate of one percent per month, but
13 at least one dollar per month, whenever the payment period exceeds the
14 applicable sixty-day period on all proper fees and medical charges.

1 Beginning in fiscal year 1987, interest payments under this
2 subsection may be paid only from funds appropriated to the department
3 for administrative purposes. A record of payments made under this
4 subsection shall be submitted twice yearly to the commerce and labor
5 committees of the senate and the house of representatives and to the
6 ways and means committees of the senate and the house of
7 representatives.

8 Nothing in this section may be construed to require the payment of
9 interest on any billing, fee, or charge if the industrial insurance
10 claim on which the billing, fee, or charge is predicated is ultimately
11 rejected or the billing, fee, or charge is otherwise not allowable.

12 In establishing fees for medical and other health care services,
13 the director shall consider the director's duty to purchase health care
14 in a prudent, cost-effective manner without unduly restricting access
15 to necessary care by persons entitled to the care. With respect to
16 workers admitted as hospital inpatients on or after July 1, 1987, the
17 director shall pay for inpatient hospital services on the basis of
18 diagnosis-related groups, contracting for services, or other prudent,
19 cost-effective payment method, which the director shall establish by
20 rules adopted in accordance with chapter 34.05 RCW.

21 In determining what services will be reimbursed, the department
22 shall reimburse a health care practitioner for services within his or
23 her scope of practice if the department reimburses another health care
24 practitioner for the same or similar services, even if those services
25 are performed in a different practice setting.

26 (2) The director may establish procedures for selectively or
27 randomly auditing the accuracy of fees and medical billings submitted
28 to the department under this title.