

2022 SESSION

INTRODUCED

22103705D

HOUSE BILL NO. 1174

Offered January 17, 2022

A BILL to require each health carrier in the Commonwealth to submit a quarterly report of all first-time denials of coverage.

Patron—Adams, D.M.

Committee Referral Pending

Be it enacted by the General Assembly of Virginia:

1. § 1. *Each health carrier in the Commonwealth shall submit to the State Corporation Commission on a quarterly basis a report of all first-time denials of coverage, including any denials of coverage on the basis of a preexisting condition exclusion, as defined in § 38.2-3438 of the Code of Virginia, and any denials of coverage based on a determination that the health care service or treatment recommended or requested is experimental or investigational, as described in § 38.2-3563 of the Code of Virginia. A denial of coverage may entitle a covered person to file a request for an internal appeal or an external review, pursuant to the provisions of Chapter 35.1 (§ 38.2-3556 et seq.) of Title 38.2 of the Code of Virginia. Upon any denial of coverage, adverse determination, or final adverse determination, a health carrier shall issue a statement to the covered person informing him of the right to an internal appeal or, if applicable, an external review, as required by § 38.2-3570 of the Code of Virginia. The provisions of this act shall expire on July 1, 2024.*

INTRODUCED

HB1174