304.11-045 Jurisdiction over providers of health care benefits.

- (1) The purpose of this section is to give Kentucky jurisdiction over providers of health care benefits; to indicate how each provider of health care benefits may show under what jurisdiction it falls; to allow for examination by Kentucky if the provider of health care benefits is unable to show it is subject to another jurisdiction; to make such a provider of health care benefits subject to the laws of Kentucky if it cannot show that it is subject to another jurisdiction; and to disclose to purchasers of such health care benefits whether or not the plans are fully insured.
- (2) Notwithstanding any other provision of law, and except as provided herein, any person or other entity which provides coverage in this state for medical, surgical, chiropractic, physical therapy, speech pathology, audiology, professional mental health, dental, hospital, or optometric expenses, whether such coverage is by direct payment, reimbursement, or otherwise, shall be presumed to be subject to the jurisdiction of the department, unless the person or other entity shows that while providing such services it is subject to the jurisdiction of another agency of this state, any subdivision thereof, or the federal government.
- (3) If a person or entity wishes to show that it is subject to the jurisdiction of another agency of this state, any subdivision thereof, or the federal government, such showing shall be made by providing to the commissioner the appropriate certificate, license, or other document issued by other governmental agency which permits or qualifies it to provide those services.
- (4) Any person or entity which is unable to show under subsection (3) that it is subject to the jurisdiction of another agency of this state, any subdivision thereof, or the federal government, shall submit to an examination by the commissioner to determine the organization and solvency of the person or the entity, and to determine whether or not such person or entity complies with the applicable provisions of this chapter.
- (5) Any person or entity unable to show that it is subject to the jurisdiction of another agency of this state, any subdivision thereof, or the federal government, shall be subject to all appropriate provisions of this code regarding the conduct of its business.
- (6) Any production agency or administrator which advertises, sells, transacts, or administers the coverage in this state described in subsection (2) of this section and which is required to submit to an examination by the commissioner under subsection (4) of this section shall, if said coverage is not fully insured or otherwise fully covered by an authorized life or health insurer, nonprofit hospital, medical-surgical, dental, and health service corporation, health maintenance organization, or prepaid dental plan organization, advise every purchaser, prospective purchaser, and covered person of such lack of insurance or other coverage. Any administrator which advertises or administers the coverage in this state described in subsection (2) of this section which is required to submit to an examination by the commissioner under subsection (4) of this section shall advise any production agency of the elements of the coverage, including the amount of "stop loss" insurance in effect.

Effective: July 15, 2010

History: Amended 2010 Ky. Acts ch. 24, sec. 1104, effective July 15, 2010. --Created 1986 Ky. Acts ch. 437, sec. 16, effective July 15, 1986.