## 304.32-330 Requirements for self-insured employer that provides health coverage and requires utilization review of benefits.

- (1) Every employer in this state which provides coverage of hospital benefits on a self-insured basis and requires the utilization review of such benefits by an insurer, its designee, or a private review agent shall:
  - (a) Be a registered private review agent in accordance with KRS 304.17A-607 and administrative regulations promulgated under the authority of KRS 304.17A-613; or
  - (b) Contract with a private review agent that has been registered in accordance with KRS 304.17A-607 and administrative regulations promulgated under the authority of KRS 304.17A-613.
- (2) Notwithstanding any other provision of KRS 304.17A-603, 304.17A-605, 304.17A-607, 304.17A-609, 304.17A-611, 304.17A-613, and 304.17A-615, a self-insured employer shall not deny or reduce payment of health benefits to any person, licensed practitioner, or health facility for covered services which have been rendered to an insured unless:
  - (a) Notice of denial has been issued; and
  - (b) The self-insured employer is in compliance with subsection (1) of this section.

Effective: July 14, 2000

**History:** Amended 2000 Ky. Acts ch. 262, sec. 30, effective July 14, 2000. -- Created 1990 Ky. Acts ch. 451, sec. 10, effective July 13, 1990.