

RULES REQUIRED FOR CHAPTER 246, LAWS OF 2015

1. Rules required for data submission, security and privacy.

- a) Definition of “claims data” including billed, allowed and paid amounts – Required by Section 1(3)
- b) Definition of “claim files” and “data files” – Required by Section 7(1) (a)
- c) Deadlines for submission of claims files – Required by Section 7(1) (b)
- d) Procedures for ensuring that all data received from data suppliers are securely collected and stored in compliance with state and federal law – Required by Section 7(1) (d).
- e) Procedures for ensuring compliance with state and federal privacy laws – Required by Section 7(1) (e).

2. Rules required to release data from the APCD

- a) Format for the calculation and display of aggregate cost data consistent with this chapter that will prevent the disclosure or determination of proprietary financial information. Required by Section 5(6).
- b) Procedures for data release. Required by Section 7(1)(g)
- c) Reasons to decline a request for data. Required by Section 5(2)

3. Rule required for fees

- a) Procedures for establishing appropriate fees. Required by Section 7(1)(f)

4. Rules required to penalize failure to submit claims files as required and misuse of data

- a. Penalties for failure to submit claim files as required – Required by Section 7(1) (c)
- b. Penalties associated with inappropriate disclosures or uses of direct patient identifiers, indirect patient identifiers, and proprietary financial information. Required by Section 7(1) (h)

5. Optional rule to expand the scope of claims data submission

The OFM director may expand the claims data submission requirement “by rule to include any health plans or health benefit plans defined in RCW 48.43.005(26) (a) through (i) to accomplish the goals of this chapter set forth in RCW 43.371.020(1).” Optional in Section 3(1)

RCW 48.43.005(26) (a) through (i) includes:

- a. Long term care insurance
- b. Medicare supplemental
- c. Coverage supplemental to the coverage provided under 55, Title 10 USC
- d. Limited health care services offered by limited health care service contractors RCW 48.44.035
- e. Disability income
- f. Coverage incidental to a property/casualty liability insurance policy such as automobile personal injury protection coverage
- g. Homeowner guest medical
- h. Accident only coverage
- i. Specified disease or illness-triggered payment insurance
- j. Hospital confinement fixed payment insurance offered as an independent, non-coordinated benefit.