

(2) A CARRIER SHALL PROVIDE THE INFORMATION REQUIRED UNDER THIS SUBSECTION IN A MANNER PRESCRIBED BY THE DEPARTMENT, IN ACCORDANCE WITH THE STANDARD DATA ELEMENTS FOR STANDARD TRANSACTIONS REQUIRED UNDER 42 U.S.C. § 1320D-4 AS ADOPTED BY THE SECRETARY OF HEALTH AND HUMAN SERVICES.

~~(C)~~ (D) A CARRIER SHALL ACCEPT THE PROGRAM'S RIGHT OF RECOVERY AND THE ASSIGNMENT TO THE PROGRAM OF ANY RIGHT OF AN INDIVIDUAL OR OTHER ENTITY TO PAYMENT FROM THE CARRIER FOR AN ITEM OR SERVICE FOR WHICH PAYMENT HAS BEEN MADE UNDER THE PROGRAM IF THE CARRIER HAS A LEGAL OBLIGATION TO MAKE PAYMENT FOR THE ITEM OR SERVICE.

~~(D)~~ (E) A CARRIER MAY NOT REJECT, DENY, LIMIT, CANCEL, REFUSE TO RENEW, INCREASE THE RATES OF, AFFECT THE TERMS OR CONDITIONS OF, OR OTHERWISE AFFECT A HEALTH INSURANCE POLICY OR CONTRACT FOR A REASON BASED WHOLLY OR PARTLY ON:

(1) THE ELIGIBILITY OF AN INDIVIDUAL TO RECEIVE BENEFITS UNDER THE PROGRAM; OR

(2) THE RECEIPT BY AN INDIVIDUAL OF BENEFITS UNDER THE PROGRAM.

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect June 1, 2008.

Approved by the Governor, May 13, 2008.

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## CHAPTER 407

(House Bill 1045)

AN ACT concerning

Department of Budget and Management – Health and Welfare Benefits Program – Information from and Liability of Health Insurance Carriers

FOR the purpose of requiring certain health insurance carriers to provide certain information in a certain manner to the Department of Budget and Management, at the request of the Department, about individuals who are eligible for benefits