6.6.5903 FILING PROVIDER LISTS

(1) An insurer shall file on the date specified in filing instructions from the commissioner, an electronic report of all participating providers in that insurer's network on a form and in a manner prescribed by the commissioner. If the insurer maintains health plans with different network access, the insurer must file a separate report for each network.

(2) An insurer shall file an updated report if:

(a) provider numbers decrease by five percent or more;

(b) a hospital, surgi-center, or other inpatient facility, with more than five beds, terminates its provider contract with that insurer; or

(c) requested by the commissioner.

(3) The commissioner may conduct an audit of an insurer's provider network.

Authorizing statute(s): 33-22-1707, MCA

Implementing statute(s): 33-22-1706, MCA

History: NEW, 2015 MAR p. 565, Eff. 5/15/15.