

# 2022 Rules Agenda

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Name of proposed rule	Summary	Complexity	Lead Policy Analyst
<a href="#">R 2022-01</a> Premium Change Transparency	The Commissioner is considering rulemaking that will seek to achieve increased transparency in insurance underwriting by requiring insurers to provide notices to consumers for all factors evaluated in any associated insurer actions, which must include an itemized disclosure of all variables considered in underwriting, as well as the proportionality or weight at which those factors were evaluated. This rule making will attempt to accomplish increased transparency in underwriting by defining and clarifying the scope of insurer responsibility for adverse actions, premiums, rate changes, and consumer notice requirements.	Complex	Michael Walker/Andrew Davis
<a href="#">R 2022-02</a> Implementation of E2SHB 1688	In 2022, the Legislature passed E2SHB 1688 to align the federal No Surprises Act with the Balance Billing Protection Act (BBPA). Current rules are inconsistent in a number of respects. Additionally, the bill creates new provisions in law that were not present in the BBPA, likely creating the need for rule making on those provisions.	Complex	Jane Beyer
<a href="#">R 2022-03</a> Accessing and Receiving Health Care Services and Benefits	In 2022, the Legislature enacted several new laws regarding accessing health care services, including HB 1651 (allowing providers to bill separately for immediate postpartum contraception), ESHB 1821 (concerning the definition of	Normal	Shari Maier

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	<p>established relationship for purposes of audio only telemedicine, and E2SSB 5702 (requiring coverage for donor breast milk). Rule making would concern various sections, including chapters 284-43 (health carriers/health plans) and 284-170 (health benefit plan management) WAC. This rule making would incorporate a consolidated approach.</p>		
<p><a href="#">R 2022-04</a> Notice requirements in adverse benefit determinations</p>	<p>Although some rulemaking has already been completed for 2SSB 5313(2021), further rulemaking is needed to revise some consumer facing language, which was added into rule as part of that rulemaking. WAC 284-43-3070 (Notice and explanation of adverse benefit determination—General requirements) needs to have the required statement under (1)(f) revised to a more accessible reading level.</p>	Normal	Shari Maier
<p><a href="#">R 2022-05</a> Cost sharing for prescription drugs</p>	<p>SSB 5610 (2022) requires certain third-party payments to count towards an enrollee's cost-sharing obligation or out-of-pocket maximum for prescription drugs. Rule making is needed to clarify any potential ambiguity in implementation and should seek to ensure that there is clarity in the drug exception request process and appeals process.</p>	Normal	Barb Jones
<p><a href="#">R 2022-06</a> General Filing Instructions for the Submission of Provider Agreements and HCBM Contracts</p>	<p>This rule making would establish unique general filing instructions for the submission of provider contracts and HCBM contracts by carriers. The subject matter expertise for review of provider agreements is located in the Provider Network Oversight Program at the OIC, and most carriers have a separate team for submission of these agreements, which have different filing requirements than health forms. Due to legislation passed in 2020 (2SSB 5601), carriers are also now required to file HCBM contracts, which include provider network management and other services that direct provider activity. The subject matter expertise for the review of HCBM</p>	Simple	Shari Maier

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	Contracting is located in the Provider Network Oversight Program that reviews provider agreements at the OIC. Health carriers similarly have units that specialize in these types of agreement and contracting arrangements.		
<a href="#">R 2022-07</a> Small pharmacies reporting requirements	The purpose or concept behind the rules making is: To amend or repeal existing rules under subchapters D and E of WAC chapter 284-180 that affect the revised reporting requirements by the Hearings unit for appeals received from small pharmacies regarding reimbursement settlements with pharmacy benefit managers, which will be referred to the state Office of Administrative Hearings.	Normal	Barb Jones