

§ 58-93-75. Continuation of health care services.

The Commissioner shall require that each PHP have a plan for handling insolvency. The plan must allow for health care services to be provided to enrollees until the PHP's capitated contract is terminated by DHHS and all enrollees required under G.S. 108D-40 to enroll in a PHP are transitioned to another PHP. In considering the plan, the Commissioner may require any of the following:

- (1) Insurance to cover the expenses to be paid for enrollee health care services after an insolvency.
- (2) Provisions in provider contracts that obligate the provider to provide services for the duration of the period after the PHP's insolvency until the PHP's capitated contract is terminated by DHHS and all enrollees required under G.S. 108D-40 to enroll in a PHP are transitioned to another PHP.
- (3) Insolvency reserves.
- (4) Letters of credit acceptable to the Commissioner.
- (5) Any other arrangements to assure that health care services are provided to enrollees as specified in this section. (2018-49, s. 1(a); 2022-46, s. 5.)