



COMMONWEALTH OF PUERTO RICO  
**OFFICE OF THE COMMISSIONER OF INSURANCE**

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August 8, 2007

CIRCULAR LETTER NO.: 2007-1778-AL

TO ALL INSURERS AND HEALTH SERVICES ORGANIZATIONS AUTHORIZED TO WRITE HEALTH INSURANCE OR HEALTH CARE PLANS IN PUERTO RICO.

PROMPT PAYMENT OF CLAIMS TO HEALTH SERVICES PROVIDERS

Dear Sirs and Madams:

We have recently become aware of the events surrounding the investigation of the operations of the Medical Examiners Board and the alleged fraud in granting licenses to physicians. Specifically, we have become aware of charges that have been brought against several physicians.

Section 30.020(e) of the Puerto Rico Insurance Code, 26 L.P.R.A. § 3001(e), defines "participating provider" as "any physician, hospital, primary services center, diagnostic and treatment center, dentist, laboratory, pharmacy, emergency or pre-hospitalization medical services or any other person authorized to provide health care services in Puerto Rico, that under contract with an insurer or health services organization renders health services to subscribers or beneficiaries of a health care or health insurance plan." Our emphasis.

Pursuant to Section 30.030 of the Puerto Rico Insurance Code, 26 L.P.R.A. § 3002, all insurers or health services organizations have the obligation to pay the full amount of any clean claim within a period of fifty (50) calendar days, to be counted from the date on which the insurer or health services organization receives the claim.

In view of the fact that until now these physicians have only been charged, we remind you that the claims that they may have submitted for services rendered under the contract between the parties, must be processed as provided in the aforementioned section of the law.

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We also remind you that section 30.080 of the Puerto Rico Insurance Code, 26 L.P.R.A. § 3007, provides that the Commissioner of Insurance may impose administrative fines or sanctions for violations to the provisions of Chapter 30 of the Code, upon the initiative of the Commissioner or upon the filing of a complaint by a participating provider arising from such violation.

Based on the above, we require strict compliance with the guidelines of this Circular Letter by all insurers and health services organizations notified herein.

Very truly yours,

SIGNED

Dorelisse Juarbe-Jiménez  
Commissioner of Insurance