Factual Chronology Of Legal Events Related to RCW 48.43.045

April 1993	The Washington State legislature adopted the "every category of provider" mandate as part of the 1993 Health Care Reform Act.
April 1995	The Washington State legislature adopted the every category of provider mandate in RCW 48.43.045. The statute was to be effective January 1, 1996.
August 1995	The Insurance Commissioner sent a letter dated August 18, 1995 to the CEO's of all disability insurers, HCSC's and HMO's requesting the submission by September 15, 1995, of a time line and work plan for achieving an adequate network of every category of provider.
September 1995	Carriers submitted plans as requested by the Insurance Commissioner.
December 19, 1995	The Insurance Commissioner issued Bulletin 95-9 setting forth the Commissioner's interpretation of RCW 48.43.045. None of the carriers' previously submitted plans would satisfy that interpretation.
January 8, 1996	Carriers filed a lawsuit in Thurston County Superior Court, sub nom <u>Blue Cross of Washington and Alaska v. Senn</u> , to have a court decide the correct interpretation of RCW 48.43.045.
April 8, 1996	Superior Court dismissed lawsuit due to carriers lack of exhaustion of their administrative remedies.
May 21, 1996	Carriers filed a Petition for a Declaratory Order to have the Insurance Commissioner decide the correct interpretation of RCW 48.43.045.
August 21, 1996	The Insurance Commissioner issues the Declaratory Order requested by the carriers.
August 1996	Carriers sue the Insurance Commissioner in Thurston County Superior Court, asking the court to reverse the Declaratory Order and stay all enforcement of it.

May 9, 1997

May 30, 1997

Insurance Commissioner files a motion in Federal

District Court to clarify whether the court's May 2nd ruling applies to non-ERISA governed health plans.

Insurance Commissioner files an appeal with the 9th

preempts RCW 48.43.045 from ERISA plans.

Circuit Court of Appeals of the May 2, 1997 ruling that

May 30, 1997	Insurance Commissioner supports a facilitated meeting of health plan medical director's and representatives of alternative provider professions discussing clinical aspects of alternative therapies in health plans.
July 23, 1997	Federal district court denies the Commissioner's motion to clarify the ruling.
July 30, 1997	Insurance Commissioner refiles the appeal to the 9th Circuit Court of Appeals.
September 29, 1997	Washington state brief filed with the Ninth Circuit Court of Appeals. Amicus briefs filed in support of the position of the Office of the Insurance Commissioner by U.S. Department of Labor, National Association of Insurance Commissioners and provider groups.
May 7, 1998	Oral Argument in 9th Circuit Court of Appeals.
June 18, 1998	9th Circuit Court of Appeals reverses the lower court and directs summary judgement be entered in favor of the state.
July 3, 1998	Plaintiffs petition the 9th Circuit for a re-hearing on it's June 18, decision.
August 24, 1998	Ninth Circuit denies the plaintiff's petition for arehearing, and rejects the plaintiff's state law arguments under 48.47.005-030, in addition to the ERISA claims rejected in it's June 18 decision.
September 17, 1998	Plaintiff's notify Thurston County Superior Court they will file a "petition for Writ of Certiorari with the United States Supreme Court" from the decision of the Ninth Circuit.
November, 1998	Plaintiff's filed Writ of Certiorari with the US Supreme Court to review the lower court's decision.
December 20, 1998	OIC filed a brief in response to the Plaintiff's petition in the US Supreme Court.
January 1999	US Supreme Court denies Plaintiff's petition for Writ of Certiorari, leaving the decision of the Ninth Circuit Court of Appeals to stand.