



Last modified: July 10, 2025

Washington - Health Care Benefit Manager (HCBM) Disclosure

Washington law, under Rule 21-02-034/WAC 284-180-325, requires carriers to post on their website information that identifies each HCBM contracted with them and identify the services provided by the HCBM.

Health Care Benefits Manager means a person or entity providing services to, or acting on behalf of, a health carrier or employee benefits programs, that directly or indirectly impacts the determination or utilization of benefits for, or patient access to, health care services, drugs, and supplies including, but not limited to:

- Prior authorization or preauthorization of benefits or care
- Certification of benefits or care
- Medical necessity determinations
- Utilization review
- Benefit determinations
- Claims processing and repricing for services and procedures
- Outcome management
- Provider credentialing and recredentialing
- Payment or authorization of payment to providers and facilities for services or procedures
- Dispute resolution, grievances, or appeals relating to determinations or utilization of benefits
- Provider network management or
- Disease management

Health Care Benefit Manager also includes, but is not limited to, HCBMs that specialize in specific types of health care benefit management such as pharmacy benefit managers, radiology benefit managers, laboratory benefit managers and mental health benefit managers.

Below is a list of the HCBMs we contract with, carriers and the services they provide.

Health Care Benefit Manager (HCBM)	Carrier/Insurer	Services the HCBM Provides
Personify Health Solutions, LLC	Continental General Insurance Company	• Claims processing and repricing for services and procedures; • Dispute resolution, grievances, or appeals relating to determinations; • Benefit determinations

