Vermont Chiropractic Association

S.243 Proposed Amendment

Sec. 1. 8 V.S.A. § 4088a(a) is amended to read:

(a) A health insurance plan shall provide coverage for clinically necessary health care services provided by a chiropractic physician licensed in this State for treatment within the scope of practice described in 26 V.S.A. chapter 10, but limiting adjunctive therapies to physiotherapy modalities and rehabilitative exercises. A health insurance plan does not have to provide coverage for the treatment of any visceral condition arising from problems or dysfunctions of the abdominal or thoracic organs. A health insurer may require that the chiropractic services be provided by a licensed chiropractic physician under contract with the insurer or upon referral from a health care provider under contract with the insurer. Health care services provided by chiropractic physicians may be subject to reasonable deductibles, co-payment and co-insurance amounts, fee or benefit limits, practice parameters and utilization review consistent with any applicable regulations published by the Department of Financial Regulation; provided that any such amounts, limits and review shall not function to direct treatment in a manner unfairly discriminative against chiropractic care, and collectively shall be no more restrictive than those applicable under the same policy to care or services provided by other health care providers but allowing for the management of the benefit consistent with variations in practice patterns and treatment modalities among different types of health care providers. Health care services provided by chiropractic physicians may be subject to a co-payment that is no greater than the co-payment applicable to care and services provided by a primary care physician under the insured's policy. Nothing herein contained shall be construed as impeding or preventing either the provision or coverage of health care services by licensed chiropractic physicians, within the lawful scope of chiropractic practice, in hospital facilities on a staff or employee basis.

Sec. 2. EFFECTIVE DATE

This act shall take effect on October 1, 2016, and shall apply to all health insurance plans issued on and after October 1, 2016, on such date as a health insurer offers, issues, or renews the health insurance plan, but in no event later than October 1, 2017.