Side-by-side comparison of House Proposal of Amendment to S.224 and S.1 (Spec. Sess.) as passed by Senate Prepared by Jennifer Carbee, Legislative Counsel May 24, 2018

	S.224 - House Proposal of Amendment	S.1 (Spec. Sess.) as passed by Senate
Co-payment limit for chiropractic services starting in plan year 2019	[No similar provision]	 For plan year 2019, for silver and bronze plans, any required co-pay for chiropractic care must be equal to the co-pay amount for primary care under the plan (Sec. 1)
Co-payment limit for chiropractic services starting in plan year 2020	 Starting in plan year 2020, for silver and bronze plans, any required co-pay for chiropractic care must be 140-160% of the co-pay amount for primary care under the plan (Sec. 1) 	 Starting in plan year 2020, for silver and bronze plans, any required co-pay for chiropractic care must be 125-150% of the co-pay amount for primary care under the plan, up to a maximum of 50% of the total reimbursement amount to the provider for the services (Sec. 2)
Co-payment limit for physical therapy services starting in plan year 2020	 Starting in plan year 2020, for silver and bronze plans, any required co-pay for physical therapy must be 140-160% of the co-pay amount for primary care under the plan (Sec. 2) 	 Starting in plan year 2020, for silver and bronze plans, any required co-pay for physical therapy must be 125-150% of the co-pay amount for primary care under the plan, up to a maximum of 50% of the total reimbursement amount to the provider for the services (Sec. 3)
Chiropractic and physical therapy co- payment limit impact reports	 By January 1, 2019, DVHA and the insurers must report on the projected impact of the chiropractic and physical therapy co-pay limits on rates, actuarial values, and plan designs 	 By January 1, 2019, DVHA and the insurers must report on the projected impact of setting the chiropractic co-pay limit at the primary care provider level for plan year 2019 on rates, actuarial values, and plan designs By January 1, 2020, DVHA and the insurers must report on the projected impact of the chiropractic and physical therapy co-pay limits on rates, actuarial values, and plan designs

	S.224 - House Proposal of Amendment	S.1 (Spec. Sess.) as passed by Senate
	• By November 15, 2021, DVHA and the insurers must report on the impact of the chiropractic and physical therapy co-pay limits on utilization of chiropractic and physical therapy services (Sec. 3)	• By November 15, 2021, DVHA and the insurers must report on the impact of the chiropractic and physical therapy co-pay limits on utilization of chiropractic and physical therapy services (Sec. 4)
Health insurance coverage for non-opioid approaches to treating and managing pain	• DVHA must convene a working group to develop recommendations on insurance coverage for non-opioid approaches, including nonpharmacological approaches, to treating and managing pain. Recommendations due by January 15, 2019. (Sec. 4)	• Same, but adds a third issue to be considered - the proper proportional relationship between the amount of the co-pay and the amount of the total charge for services for chiropractic care, physical therapy, and other non-opioid or nonpharmacological modalities for treating and managing pain (Sec. 5)
Effective dates	 140-160% of primary care co-pay limit on chiropractic co-pays starts in plan year 2020 140-160% of primary care co-pay limit on physical therapy co-pays starts in plan year 2020 Remaining sections take effect on passage 	 100% of primary care co-pay limit on chiropractic co-pays effective for plan year 2019 only (this provision is effective on passage) 125-150% of primary care co-pay limit on chiropractic co-pays starts in plan year 2020 125-150% of primary care co-pay limit on physical therapy co-pays starts in plan year 2020 Remaining sections take effect on passage