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H.655

Introduced by Representatives Sullivan of Burlington, Yacovone of
Morristown, Brennan of Colchester, Carr of Brandon, Christie
of Hartford, Cina of Burlington, Copeland-Hanzas of Bradford,
Donovan of Burlington, Dunn of Essex, Gamache of Swanton,
Harrison of Chittenden, Higley of Lowell, Hill of Wolcott,
Hooper of Montpelier, Houghton of Essex, Howard of Rutland
City, Jickling of Randolph, Keefe of Manchester, Lawrence of
Lyndon, Lefebvre of Newark, Macaig of Williston, Marcotte of
Coventry, McCullough of Williston, Morrissey of Bennington,
Murphy of Fairfax, Nolan of Morrystown, Ode of Burlington,
O’Sullivan of Burlington, Parent of St. Albans Town, Poirier of
Barre City, Pugh of South Burlington, Savage of Swanton,
Shaw of Pittsford, Sheldon of Middlebury, Stuart of
Brattleboro, Yantachka of Charlotte, and Young of Glover

Referred to Committee on

Date:

Subject: Health; health insurance; cost-sharing; chiropractors

Statement of purpose of bill as introduced: This bill proposes to require health
insurance plans to limit the co-payment for a visit to a chiropractor to no more
than the co-payment for a visit to a primary care physician.

1 An act relating to co-payment limits for chiropractic services

2 It is hereby enacted by the General Assembly of the State of Vermont:

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

4 § 4088a. CHIROPRACTIC SERVICES

5 (a)(1) A health insurance plan shall provide coverage for clinically
6 necessary health care services provided by a chiropractic physician licensed in
7 this State for treatment within the scope of practice described in 26 V.S.A.
8 chapter 10, but limiting adjunctive therapies to physiotherapy modalities and
9 rehabilitative exercises. A health insurance plan does not have to provide
10 coverage for the treatment of any visceral condition arising from problems or
11 dysfunctions of the abdominal or thoracic organs.

12 (2) A health insurer may require that the chiropractic services be
13 provided by a licensed chiropractic physician under contract with the insurer or
14 upon referral from a health care provider under contract with the insurer.

15 (3) Health care services provided by chiropractic physicians may be
16 subject to reasonable deductibles, ~~co-payment and~~ co-insurance amounts, fee
17 or benefit limits, practice parameters, and utilization review consistent with
18 any applicable regulations published by the Department of Financial
19 Regulation; provided that any such amounts, limits, and review shall not
20 function to direct treatment in a manner unfairly discriminative against
21 chiropractic care, and collectively shall be no more restrictive than those

1 applicable under the same policy to care or services provided by other health
2 care providers but allowing for the management of the benefit consistent with
3 variations in practice patterns and treatment modalities among different types
4 of health care providers. Health care services provided by a chiropractic
5 physician may be subject to a co-payment requirement as long as the required
6 co-payment amount is not greater than the amount of the co-payment
7 applicable to care and services provided by a primary care provider under the
8 health insurance plan.

9 (4) Nothing ~~herein~~ contained in this section shall be construed as
10 impeding or preventing either the provision or coverage of health care services
11 by licensed chiropractic physicians, within the lawful scope of chiropractic
12 practice, in hospital facilities on a staff or employee basis.

13 * * *

14 Sec. 2. EFFECTIVE DATE

15 This act shall take effect on October 1, 2018 and shall apply to all health
16 insurance plans issued on and after October 1, 2018 on such date as a health
17 insurer offers, issues, or renews the health insurance plan, but in no event later
18 than October 1, 2019.