

Side-by-side comparison of S.224 as passed by Senate and House
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 May 11, 2018

	Senate version	House version
Limit on chiropractic co-pays	For Exchange plans, not more than the plan's primary care co-pay	For bronze and silver Exchange plans and reflective silver plans, 140-160% of the plan's primary care co-pay
Sunset on chiropractic co-pay limit	Repealed on January 1, 2022	[No similar provision]
Limit on physical therapy co-pays	[No similar provision]	For bronze and silver Exchange plans and reflective silver plans, 140-160% of the plan's primary care co-pay
Impact report(s)	By January 15, 2021, Green Mountain Care Board (GMCB) must report on impact of chiropractic co-pay limit on utilization, premiums, actuarial values, and plan designs	<ul style="list-style-type: none"> • By January 1, 2019, Department of Vermont Health Access (DVHA) and the insurers must report on project impact of chiropractic and physical therapy co-pay limits on premiums, actuarial values, and plan designs • By November 15, 2021, DVHA and the insurers must report on the impact of the co-pay limits on utilization of chiropractic and physical therapy services
Rate filing information	With 2019, 2020, and 2021 premium rate filings, insurers must provide information to GMCB about any modifications to rates attributable to a plan's compliance with the chiropractic co-payment limit	[No similar provision]
Insurance coverage for non-opioid pain management	[No similar provision]	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.
Effective dates	<ul style="list-style-type: none"> • Co-pay limits for chiropractic care starting in 2019 plan year • The rest is effective on passage 	<ul style="list-style-type: none"> • Co-pay limits for chiropractic care and physical therapy starting in 2020 plan year • The rest is effective on passage