

1 H.14
2 Introduced by Representative Kimbell of Woodstock
3 Referred to Committee on
4 Date:
5 Subject: Workers' compensation; use of marijuana for symptom relief
6 Statement of purpose of bill as introduced: This bill proposes to extend benefit
7 payments in workers' compensation insurance claims to the prescription of
8 medical marijuana.

9 An act relating to workers' compensation
10 It is hereby enacted by the General Assembly of the State of Vermont:
11 Sec. 1. 18 V.S.A. § 4474c is amended to read:
12 § 4474c. PROHIBITIONS, RESTRICTIONS, AND LIMITATIONS
13 REGARDING THE USE OF MARIJUANA FOR SYMPTOM
14 RELIEF

15 * * *

16 (b) This Except as otherwise provided by 21 V.S.A. § 640, this chapter
17 shall not be construed to require that coverage or reimbursement for the use of
18 marijuana for symptom relief be provided by:
19 (1) a health insurer as defined by section 9402 of this title, or any
20 insurance company regulated under Title 8;

1 (2) Medicaid or any other public health care assistance program; or

2 (3) an employer; or

3 (4) ~~for purposes of workers' compensation~~, an employer as defined in

4 21 V.S.A. § 601(3). [Repealed.]

* * *

6 Sec. 2. 21 V.S.A. § 640 is amended to read:

(a) An employer subject to the provisions of this chapter shall furnish to an injured employee reasonable surgical, medical, and nursing services and supplies, including prescription drugs, marijuana for symptom relief pursuant to 18 V.S.A. chapter 86, subchapter 2, and durable medical equipment. The employer shall provide assistive devices and modification to vehicles and residences reasonably necessary to permit an injured worker who is determined to have or expected to suffer a permanent disability, such as an ambulatory disability as defined in 20 V.S.A. § 2900 or blindness as defined in 20 V.S.A. § 2900, that substantially and permanently prevents or limits the worker's ability to continue to live at home or perform basic life functions. In determining what devices and modifications are reasonably necessary, consideration shall be given to factors that include ownership of the residence to be modified, the length of time the worker is expected to utilize and benefit

1 from the devices or modifications, and the extent to which the devices or
2 modifications enhance or improve the worker's independent functioning. The
3 employer shall also furnish reasonable hospital services and supplies, including
4 surgical, medical, and nursing services while the injured employee is confined
5 in a hospital for treatment and care.

6 * * *

7 (d) The liability of the employer to pay for medical, surgical, hospital, and
8 nursing services and supplies, prescription drugs, marijuana for symptom
9 relief, and durable medical equipment provided to the injured employee under
10 this section shall not exceed the maximum fee for a particular service,
11 prescription drug, marijuana for symptom relief, or durable medical equipment
12 as provided by a schedule of fees and rates prepared by the Commissioner.
13 The reimbursement rate for services and supplies in the fee schedule shall
14 include consideration of medical necessity, clinical efficacy, cost-
15 effectiveness, and safety, and those services and supplies shall be provided on
16 a nondiscriminatory basis consistent with workers' compensation and health
17 care law. The Commissioner shall authorize reimbursement at a rate higher
18 than the scheduled rate if the employee demonstrates to the Commissioner's
19 satisfaction that reasonable and necessary treatment, prescription drugs,
20 marijuana for symptom relief, or durable medical equipment is not available at
21 the scheduled rate. An employer shall establish direct billing and payment

1 procedures and notification procedures as necessary for coverage of ~~medically-~~
2 ~~necessary~~ medically necessary prescription medications or marijuana for
3 chronic conditions of injured employees, in accordance with rules adopted by
4 the Commissioner.

5 * * *

6 Sec. 3. 21 V.S.A. § 640a is amended to read:

7 § 640a. MEDICAL BILLS; PAYMENT; DISPUTE

8 (a) No later than 30 days following receipt of a bill from a health care
9 provider for medical, surgical, hospital, nursing services, supplies, prescription
10 drugs, or durable medical equipment provided to an injured employee, or from
11 a dispensary as defined in 18 V.S.A. § 4472 for marijuana for symptom relief
12 provided to an injured employee, an employer or insurance carrier shall do one
13 of the following:

14 (1) Pay or reimburse the bill.

15 (2) Provide written notification to the injured employee, the health care
16 provider or dispensary, and the Commissioner that the medical bill is contested
17 or denied. The notice shall include specific reasons supporting the contest or
18 denial, a description of any additional information needed by the employer or
19 insurance carrier to determine liability for the medical bill, and a request that
20 such information be submitted to the employer or insurance carrier within 30
21 days following receipt of the notice.

13 (e) Interest shall accrue on an unpaid medical bill at the rate of 12 percent
14 per annum calculated as follows:

15 * * *

16 (4) For a medical bill that is paid in accordance with a contract between
17 the health care provider or dispensary and the employer or insurance carrier,
18 from the day following the contract payment period or as otherwise specified
19 in the contract.

20 * * *

1 (j) An employer or insurance carrier shall not impose on any health care
2 provider or dispensary any retrospective denial of a previously paid medical
3 bill or any part of that previously paid medical bill, unless:

(1) The employer or insurance carrier has provided at least 30 days' notice of any retrospective denial or overpayment recovery or both in writing to the health care provider or dispensary. The notice must include:

7 * * *

8 (l)(1) For purposes of subsections (j) and (k) of this section, for routine
9 recoveries as described in subdivisions (A) through (J) of this subdivision (1),
10 retrospective denial or overpayment recovery of any or all of a previously paid
11 medical bill shall not require 30 days' notice before recovery may be made. A
12 recovery shall be considered routine only if one of the following situations
13 applies:

14 * * *

15 (F) payment where the health care provider or dispensary provides
16 the employer or insurance carrier with new or additional information
17 demonstrating an overpayment;

(G) payment to a health care provider or dispensary at an incorrect rate or using an incorrect fee schedule;

20 * * *

1 Sec. 4. EFFECTIVE DATE

2 This act shall take effect on July 1, 2019.