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H.641

Introduced by Representatives Dunn of Essex, Buckholz of Hartford, Christie of Hartford, Donovan of Burlington, Gardner of Richmond, Gonzalez of Winooski, Houghton of Essex, Howard of Rutland City, Jickling of Randolph, Murphy of Fairfax, Ode of Burlington, Sheldon of Middlebury, Sibia of Dover, Squirrell of Underhill, Stuart of Brattleboro, Sullivan of Dorset, Sullivan of Burlington, Troiano of Stannard, Wood of Waterbury, Yacovone of Morristown, and Yantachka of Charlotte

Referred to Committee on

Date:

Subject: Health; health insurance; physical therapy; chiropractic;  
nonpharmacological treatments for pain

Statement of purpose of bill as introduced: This bill proposes to limit the co-payment amount for physical therapy and chiropractic services under a health insurance plan to the amount of the co-payment for primary care services. It also expresses legislative intent to require the same co-payments for visits to additional providers as part of new requirements for insurance coverage of nonpharmacological approaches to treating pain to be enacted as soon as federal law allows the addition of new benefit mandates without the State being liable for the increased premium amounts.

1           An act relating to co-payments for nonpharmacological approaches to  
2           treating pain

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

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

5           § 4088a. CHIROPRACTIC SERVICES

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

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

16          (3) Health care services provided by chiropractic physicians may be  
17          subject to reasonable deductibles, ~~co-payment and~~ co-insurance amounts, fee  
18          or benefit limits, practice parameters, and utilization review consistent with  
19          any applicable regulations published by the Department of Financial  
20          Regulation; provided that any such amounts, limits, and review shall not  
21          function to direct treatment in a manner unfairly discriminative against  
22          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 co-  
6 payment amount is not greater than the amount of the co-payment applicable to  
7 care and services provided by a primary care provider under the health  
8 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. 8 V.S.A. § 4088k is added to read:

15 § 4088k. COST-SHARING FOR PHYSICAL THERAPY

16 (a) As used in this section:

17 (1) “Health insurance plan” means an individual or group health  
18 insurance policy, a hospital or medical service corporation or health  
19 maintenance organization subscriber contract, or another health benefit plan  
20 offered, issued, or renewed for a person in this State by a health insurer. The

1 term does not include benefit plans providing coverage for a specific disease or  
2 other limited benefit coverage.

3 (2) "Health insurer" shall have the same meaning as in 18 V.S.A.  
4 § 9402.

5 (b) A health insurance plan providing coverage for physical therapy shall  
6 not impose a co-payment for care or services provided by a physical therapist  
7 licensed pursuant to 26 V.S.A. chapter 38 that is greater than the co-payment  
8 applicable under the plan for care or services provided by a primary care  
9 provider.

10 Sec. 3. INSURANCE COVERAGE AND CO-PAYMENTS FOR  
11 NONPHARMACOLOGICAL PAIN TREATMENTS;  
12 LEGISLATIVE INTENT

13 As soon as federal law allows for the addition of new health insurance  
14 mandates without requiring the State to pay for the increased premium  
15 amounts, it is the intent of the General Assembly to:

16 (1) require health insurance coverage for additional nonpharmacological  
17 approaches to treating pain, including acupuncture, acupressure, massage, and  
18 reflexology; and

19 (2) limit the amount of the co-payments for those services to not more  
20 than the co-payment required for a primary care visit.

1       Sec. 4. EFFECTIVE DATES

2           (a) Secs. 1 (chiropractic) and 2 (physical therapy) shall take effect on  
3           October 1, 2018 and shall apply to all health insurance plans issued on and  
4           after October 1, 2018 on such date as a health insurer offers, issues, or renews  
5           the health insurance plan, but in no event later than October 1, 2019.

6           (b) Sec. 3 (co-payments for nonpharmacological pain treatments;  
7           legislative intent) and this section shall take effect on passage.