

2017 -- H 6124

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STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2017

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A N A C T

RELATING TO INSURANCE -- ACCIDENT AND SICKNESS INSURANCE POLICIES

Introduced By: Representatives Amore, and Giarrusso

Date Introduced: April 14, 2017

Referred To: House Corporations

It is enacted by the General Assembly as follows:

1 SECTION 1. Chapter 27-18 of the General Laws entitled "Accident and Sickness
2 Insurance Policies" is hereby amended by adding thereto the following section:

3 **27-18-48.2. Patient access to alternative medicine.**

4 (a) Legislative purpose - Medications prescribed for the management of pain constitute a
5 factor involved in the incidence of drug-related overdoses and deaths. The purpose of this section
6 is to ensure patient access to alternative means of pain management, specifically, access to and
7 reimbursement of medical services rendered by chiropractic physicians in the diagnosis and
8 treatment of conditions associated with the usage of pain medications.

9 (b) Construction of health policies, plans and contracts. - Notwithstanding any other
10 provision of law, when any health insurance policy, health care services plan, or other contract
11 provides for the payment for medical expense benefits or procedures related to the treatment of
12 pain, such policy, plan, or contract shall be construed to include equivalent payment to a
13 chiropractic physician who provides the equivalent non-pharmaceutical medical service benefits
14 or procedures which are within the scope of a chiropractic physician's license. Any limitation or
15 condition placed upon services, diagnosis, treatment, or payments for pain conditions utilizing
16 non-pharmaceutical interventions, by any licensed physician shall apply equally to all licensed
17 physicians without unfair discrimination based upon the usual and customary treatment
18 procedures of any class of physicians. Nothing in this section shall be construed as preventing a
19 group health plan or a health insurance issuer from establishing varying reimbursement rates

1 based on quality or performance measures; provided, however, that:

2 (1) Reimbursement may not be arbitrarily capped and must be based on medical
3 necessity;

4 (2) Reimbursement rates must be set utilizing industry standard relative value scale
5 metrics, including equivalent co-payments for equivalent levels of service delivered by any
6 licensed provider group; and

7 (3) No discriminatory contractual terms may be imposed based upon whether the treating
8 provider is an allopathic, osteopathic, or chiropractic physician.

9 (c) Enforcement. The office of the health insurance commissioner shall enforce the
10 provisions of this section.

11 SECTION 2. Chapter 27-19 of the General Laws entitled "Nonprofit Hospital Service
12 Corporations" is hereby amended by adding thereto the following section:

13 **27-19-40.2. Patient access to alternative medicine.**

14 (a) Legislative purpose - Medications prescribed for the management of pain constitute a
15 factor involved in the incidence of drug-related overdoses and deaths. The purpose of this section
16 is to ensure patient access to alternative means of pain management, specifically, access to and
17 reimbursement of medical services rendered by chiropractic physicians in the diagnosis and
18 treatment of conditions associated with the usage of pain medications.

19 (b) Construction of health policies, plans and contracts. - Notwithstanding any other
20 provision of law, when any health insurance policy, health care services plan, or other contract
21 provides for the payment for medical expense benefits or procedures related to the treatment of
22 pain, such policy, plan, or contract shall be construed to include equivalent payment to a
23 chiropractic physician who provides the equivalent non-pharmaceutical medical service benefits
24 or procedures which are within the scope of a chiropractic physician's license. Any limitation or
25 condition placed upon services, diagnosis, treatment, or payments for pain conditions utilizing
26 non-pharmaceutical interventions, by any licensed physician shall apply equally to all licensed
27 physicians without unfair discrimination based upon the usual and customary treatment
28 procedures of any class of physicians. Nothing in this section shall be construed as preventing a
29 group health plan or a health insurance issuer from establishing varying reimbursement rates
30 based on quality or performance measures; provided, however, that:

31 (1) Reimbursement may not be arbitrarily capped and must be based on medical
32 necessity;

33 (2) Reimbursement rates must be set utilizing industry standard relative value scale
34 metrics, including equivalent co-payments for equivalent levels of service delivered by any

1 licensed provider group; and

2 (3) No discriminatory contractual terms may be imposed based upon whether the treating
3 provider is an allopathic, osteopathic, or chiropractic physician.

4 (c) Enforcement. The office of the health insurance commissioner shall enforce the
5 provisions of this section.

6 SECTION 3. Chapter 27-20 of the General Laws entitled "Nonprofit Medical Service
7 Corporations" is hereby amended by adding thereto the following section:

8 **27-20-35.2 Patient access to alternative medicine.**

9 (a) Legislative purpose - Medications prescribed for the management of pain constitute a
10 factor involved in the incidence of drug-related overdoses and deaths. The purpose of this section
11 is to ensure patient access to alternative means of pain management, specifically, access to and
12 reimbursement of medical services rendered by chiropractic physicians in the diagnosis and
13 treatment of conditions associated with the usage of pain medications.

14 (b) Construction of health policies, plans and contracts. - Notwithstanding any other
15 provision of law, when any health insurance policy, health care services plan, or other contract
16 provides for the payment for medical expense benefits or procedures related to the treatment of
17 pain, such policy, plan, or contract shall be construed to include equivalent payment to a
18 chiropractic physician who provides the equivalent non-pharmaceutical medical service benefits
19 or procedures which are within the scope of a chiropractic physician's license. Any limitation or
20 condition placed upon services, diagnosis, treatment, or payments for pain conditions utilizing
21 non-pharmaceutical interventions, by any licensed physician shall apply equally to all licensed
22 physicians without unfair discrimination based upon the usual and customary treatment
23 procedures of any class of physicians. Nothing in this section shall be construed as preventing a
24 group health plan or a health insurance issuer from establishing varying reimbursement rates
25 based on quality or performance measures; provided, however, that:

26 (1) Reimbursement may not be arbitrarily capped and must be based on medical
27 necessity;

28 (2) Reimbursement rates must be set utilizing industry standard relative value scale
29 metrics, including equivalent co-payments for equivalent levels of service delivered by any
30 licensed provider group; and

31 (3) No discriminatory contractual terms may be imposed based upon whether the treating
32 provider is an allopathic, osteopathic, or chiropractic physician.

33 (c) Enforcement. The office of the health insurance commissioner shall enforce the
34 provisions of this section.

1 SECTION 4. Chapter 27-41 of the General Laws entitled "Health Maintenance
2 Organizations" is hereby amended by adding thereto the following section:

3 **27-41-49.2. Patient access to alternative medicine.**

4 (a) Legislative purpose - Medications prescribed for the management of pain constitute a
5 factor involved in the incidence of drug-related overdoses and deaths. The purpose of this section
6 is to ensure patient access to alternative means of pain management, specifically, access to and
7 reimbursement of medical services rendered by chiropractic physicians in the diagnosis and
8 treatment of conditions associated with the usage of pain medications.

9 (b) Construction of health policies, plans and contracts. - Notwithstanding any other
10 provision of law, when any health insurance policy, health care services plan, or other contract
11 provides for the payment for medical expense benefits or procedures related to the treatment of
12 pain, such policy, plan, or contract shall be construed to include equivalent payment to a
13 chiropractic physician who provides the equivalent non-pharmaceutical medical service benefits
14 or procedures which are within the scope of a chiropractic physician's license. Any limitation or
15 condition placed upon services, diagnosis, treatment, or payments for pain conditions utilizing
16 non-pharmaceutical interventions, by any licensed physician shall apply equally to all licensed
17 physicians without unfair discrimination based upon the usual and customary treatment
18 procedures of any class of physicians. Nothing in this section shall be construed as preventing a
19 group health plan or a health insurance issuer from establishing varying reimbursement rates
20 based on quality or performance measures; provided, however, that:

21 (1) Reimbursement may not be arbitrarily capped and must be based on medical
22 necessity;

23 (2) Reimbursement rates must be set utilizing industry standard relative value scale
24 metrics, including equivalent co-payments for equivalent levels of service delivered by any
25 licensed provider group; and

26 (3) No discriminatory contractual terms may be imposed based upon whether the treating
27 provider is an allopathic, osteopathic, or chiropractic physician.

28 (c) Enforcement. The office of the health insurance commissioner shall enforce the
29 provisions of this section.

30 SECTION 5. This act shall take effect upon passage.

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EXPLANATION
BY THE LEGISLATIVE COUNCIL
OF
A N A C T
RELATING TO INSURANCE -- ACCIDENT AND SICKNESS INSURANCE POLICIES

- 1 This act would require insurance reimbursement for chiropractic diagnosis and treatment
- 2 of conditions associated with the use of pain medications.
- 3 This act would take effect upon passage.

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