2017 -- H 6124 SUBSTITUTE A

LC002440/SUB A

STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2017

AN ACT

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:

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

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27-18-25. Unfair discrimination prohibited.

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| 4 | Notwithstanding any provision of any policy of insurance, certificate, or service contract |
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| 5 | issued in this state, whenever the insurance policy, certificate, or service contract provides for |
| 6 | reimbursement for any services which may be legally performed by any person licensed under the |
| 7 | provisions of chapters 29, 30, 35 and 37 of title 5, reimbursement under the insurance policy, |
| 8 | certificate, or service contract shall be based upon a determination of medical necessity and shall |
| 9 | not be denied because of race, color, or creed, nor shall any insurer make or permit any unfair |
| 10 | discrimination against particular individuals or persons licensed under chapters 29, 30, 35 and 37 |
| 11 | of title 5. |

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

14

27-19-74. Unfair discrimination prohibited.

15 Notwithstanding any provision of any policy of insurance, certificate, or service contract

16 issued in this state, whenever the insurance policy, certificate, or service contract provides for

17 reimbursement for any services which may be legally performed by any person licensed under the

18 provisions of chapters 29, 30, 35 and 37 of title 5, reimbursement under the insurance policy,

19 certificate, or service contract shall be based upon a determination of medical necessity and shall

1 not be denied because of race, color, or creed, nor shall any insurer make or permit any unfair

2 discrimination against particular individuals or persons licensed under chapters 29, 30, 35 and 37

3 <u>of title 5.</u>

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

27-20-70. Unfair discrimination prohibited.

- 7 Notwithstanding any provision of any policy of insurance, certificate, or service contract
- 8 issued in this state, whenever the insurance policy, certificate, or service contract provides for
- 9 reimbursement for any services which may be legally performed by any person licensed under the
- 10 provisions of chapters 29, 30, 35 and 37 of title 5, reimbursement under the insurance policy,
- 11 certificate, or service contract shall be based upon a determination of medical necessity and shall
- 12 not be denied because of race, color, or creed, nor shall any insurer make or permit any unfair
- 13 discrimination against particular individuals or persons licensed under chapters 29, 30, 35 and 37
- 14 <u>of title 5.</u>
- 15 SECTION 4. Chapter 27-41 of the General Laws entitled "Health Maintenance
 16 Organizations" is hereby amended by adding thereto the following section:

17 <u>27-41-87. Unfair discrimination prohibited.</u>

18 Notwithstanding any provision of any policy of insurance, certificate, or service contract

- 19 issued in this state, whenever the insurance policy, certificate, or service contract provides for
- 20 reimbursement for any services which may be legally performed by any person licensed under the

21 provisions of chapters 29, 30, 35 and 37 of title 5, reimbursement under the insurance policy,

22 certificate, or service contract shall be based upon a determination of medical necessity and shall

- 23 not be denied because of race, color, or creed, nor shall any insurer make or permit any unfair
- 24 discrimination against particular individuals or persons licensed under chapters 29, 30, 35 and 37
- 25 <u>of title 5.</u>

SECTION 5. Section 27-38.2-1 of the General Laws in Chapter 27-38.2 entitled "Insurance Coverage for Mental Illness and Substance Abuse" is hereby amended to read as follows:

29

27-38.2-1. Coverage for the treatment of mental health and substance use disorders.

30 (a) A group health plan and an individual or group health insurance plan shall provide
31 coverage for the treatment of mental health and substance-use disorders under the same terms and
32 conditions as that coverage is provided for other illnesses and diseases.

33 (b) Coverage for the treatment of mental health and substance-use disorders shall not34 impose any annual or lifetime dollar limitation.

1 (c) Financial requirements and quantitative treatment limitations on coverage for the 2 treatment of mental health and substance-use disorders shall be no more restrictive than the 3 predominant financial requirements applied to substantially all coverage for medical conditions in 4 each treatment classification.

5 (d) Coverage shall not impose non-quantitative treatment limitations for the treatment of 6 mental health and substance-use disorders unless the processes, strategies, evidentiary standards, 7 or other factors used in applying the non-quantitative treatment limitation, as written and in 8 operation, are comparable to, and are applied no more stringently than, the processes, strategies, 9 evidentiary standards, or other factors used in applying the limitation with respect to 10 medical/surgical benefits in the classification.

(e) The following classifications shall be used to apply the coverage requirements of this
chapter: (1) Inpatient, in-network; (2) Inpatient, out-of-network; (3) Outpatient, in-network; (4)
Outpatient, out-of-network; (5) Emergency care; and (6) Prescription drugs.

(f) Medication-assisted treatment or medication-assisted maintenance services of
substance-use disorders, opioid overdoses, and chronic addiction, including methadone,
buprenorphine, naltrexone, or other clinically appropriate medications, is included within the
appropriate classification based on the site of the service.

(g) Payors shall rely upon the criteria of the American Society of Addiction Medicinewhen developing coverage for levels of care for substance-use disorder treatment.

20 (h) Patients with substance use disorders shall have access to evidence-based non-opioid

21 treatment for pain, therefore coverage shall apply to medically necessary chiropractic care, and

22 <u>osteopathic manipulative treatment performed by an individual licensed under §5-37-2.</u>

23 SECTION 6. This act shall take effect upon passage.

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EXPLANATION

BY THE LEGISLATIVE COUNCIL

OF

AN ACT

RELATING TO INSURANCE -- ACCIDENT AND SICKNESS INSURANCE POLICIES

- 1 This act would require insurance reimbursement for medically necessary evidence-based
- 2 chiropractic and osteopathic non-opioid treatments for pain.
- 3 This act would take effect upon passage.

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