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### STATE OF RHODE ISLAND

#### IN GENERAL ASSEMBLY

#### **JANUARY SESSION, A.D. 2017**

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## AN ACT

#### RELATING TO INSURANCE -- ACCIDENT AND SICKNESS INSURANCE POLICIES

Introduced By: Senators Lombardo, DiPalma, Nesselbush, Lynch Prata, and McCaffrey

<u>Date Introduced:</u> April 25, 2017

Referred To: Senate Health & Human Services

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:

#### 27-18-48.2. Patient access to alternative medicine.

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

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

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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SECTION 4. Chapter 27-41 of the General Laws entitled "Health Maintenance

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## **EXPLANATION**

## BY THE LEGISLATIVE COUNCIL

OF

# AN ACT

## RELATING TO INSURANCE -- ACCIDENT AND SICKNESS INSURANCE POLICIES

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This act would require insurance reimbursement for chiropractic diagnosis and treatment of conditions associated with the use of pain medications.

This act would take effect upon passage.

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