THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL No. 1645 Session of 1999

INTRODUCED BY PHILLIPS, GEORGE, ALLEN, RAMOS, BARRAR, BELFANTI,
 BENNINGHOFF, M. COHEN, COSTA, DeLUCA, FAIRCHILD, FLEAGLE,
 FORCIER, GEIST, HARHAI, HERSHEY, HESS, JAMES, KAISER,
 LAUGHLIN, McGILL, McNAUGHTON, MYERS, PLATTS, ROSS, SAYLOR,
 SCHRODER, SCRIMENTI, SEMMEL, SERAFINI, SEYFERT, STABACK,
 STEELMAN, STERN, SURRA, TANGRETTI AND TRAVAGLIO,
 JUNE 14, 1999

REFERRED TO COMMITTEE ON INSURANCE, JUNE 14, 1999

AN ACT

Amending the act of May 17, 1921 (P.L.682, No.284), entitled "An act relating to insurance; amending, revising, and 3 consolidating the law providing for the incorporation of insurance companies, and the regulation, supervision, and protection of home and foreign insurance companies, Lloyds associations, reciprocal and inter-insurance exchanges, and 7 fire insurance rating bureaus, and the regulation and supervision of insurance carried by such companies, 9 associations, and exchanges, including insurance carried by the State Workmen's Insurance Fund; providing penalties; and 10 repealing existing laws," further providing for chiropractic 11 12 services and reimbursements. 13 The General Assembly of the Commonwealth of Pennsylvania hereby enacts as follows: 14 15 Section 1. The act of May 17, 1921 (P.L.682, No.284), known as The Insurance Company Law of 1921, is amended by adding a 16 section to read: 17 18 Section 635.2. Chiropractic Reimbursement.--(a) All third-19 party payors and health insurance companies, regardless of

whether they utilize the resource-based relative value system

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- 1 payment methodology, shall only reimburse persons who practice
- 2 manipulation who are in compliance with the act of December 16,
- 3 1986 (P.L.1646, No.188), known as the "Chiropractic Practice
- 4 Act, " in accordance with that methodology as utilized by the
- 5 <u>Health Care Finance Administration and in a manner which is</u>
- 6 applied utilizing the same percentages that are applied to all
- 7 <u>health care providers where like services are rendered, with the</u>
- 8 full range of services available within the chiropractor's scope
- 9 of license.
- 10 (b) The term "health insurance policy" when used in this
- 11 <u>section means any individual or group health insurance policy,</u>
- 12 <u>subscriber contract, certificate or plan which provides medical</u>
- 13 or health care coverage by any health care facility or licensed
- 14 health care provider which is offered by or is governed under
- 15 this act or any of the following:
- (i) Subarticle (f) of Article IV of the act of June 13, 1967
- 17 (P.L.31, No.21), known as the "Public Welfare Code."
- 18 (ii) The act of December 29, 1972 (P.L.1701, No.364), known
- 19 <u>as the "Health Maintenance Organization Act."</u>
- 20 (iii) The act of May 18, 1976 (P.L.123, No.54), known as the
- 21 <u>"Individual Accident and Sickness Insurance Minimum Standards</u>
- 22 Act."
- 23 (iv) The act of December 14, 1992 (P.L.835, No.134), known
- 24 <u>as the "Fraternal Benefit Societies Code."</u>
- 25 (v) A nonprofit corporation subject to 40 Pa.C.S. Chs. 61
- 26 (relating to hospital plan corporations) and 63 (relating to
- 27 professional health services plan corporations).
- 28 Section 2. Section 2111 of the act is amended by adding a
- 29 clause to read:
- 30 Section 2111. Responsibilities of Managed Care Plans.--A

- 1 managed care plan shall do all of the following:
- 2 * * *
- 3 (7.1) Provide direct access to chiropractic services by
- 4 permitting an enrollee to select a doctor of chiropractic to
- 5 obtain necessary and appropriate initial and follow-up
- 6 chiropractic care and referrals for diagnostic testing related
- 7 to chiropractic care without prior approval. The chiropractic
- 8 services shall be within the scope of practice of the selected
- 9 <u>doctor of chiropractic. The selected doctor of chiropractic</u>
- 10 shall inform the enrollee's primary care provider of all
- 11 chiropractic services provided.
- 12 * * *
- 13 Section 3. This act shall take effect in 60 days.