

SECOND REGULAR SESSION

SENATE BILL NO. 841

91ST GENERAL ASSEMBLY

INTRODUCED BY SENATOR KLARICH.

Pre-filed December 19, 2001, and 1,000 copies ordered printed.

TERRY L. SPIELER, Secretary.

3509S.011

AN ACT

To amend chapter 376, RSMo, by adding thereto two new sections relating to insurance coverage for chiropractic care.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section A. Chapter 376, RSMo, is amended by adding thereto two new sections, to be known as sections 376.1230 and 376.1231, to read as follows:

376.1230. 1. Every policy issued by a health carrier, as defined in section 376.1350, that includes coverage for physician services in the physician's office and every policy that provides major medical or similar comprehensive coverage, including managed care organizations, shall provide chiropractic care, as defined in chapter 331, RSMo, as part of basic health care services.

2. For plans offered by all health carriers, as defined in section 376.1350, a covered enrollee who wishes to receive chiropractic care shall have direct access to the services of a chiropractic physician of his or her choice within the provider network.

3. A covered enrollee shall have the right to obtain clinically necessary and appropriate initial and follow-up chiropractic care and referrals for diagnostic testing related to chiropractic care. The chiropractic services shall be within the scope of practice of the selected doctor of chiropractic and shall be subject to the terms and conditions of the policy.

4. No health carrier utilizing a gatekeeper shall permit such gatekeeper to intentionally misinform a covered enrollee of the existence or availability of chiropractic care benefits under such enrollee's plan.

5. Nothing in this section shall be construed to limit the health carrier's ability to credential providers or be deemed as a willing provider provision.

376.1231. 1. For purposes of this section, "health care provider" or "provider" means a chiropractic physician licensed pursuant to chapter 331, RSMo, or a medical physician or surgeon licensed pursuant to chapter 334, RSMo. Any health carrier, as defined in section 376.1350, shall not discriminate against any health care provider or group of providers based on licensure, or limit or restrict the diagnosis, treatment, management, or reimbursement of the same or similar condition, injury, complaint, disorder, or ailment while acting within the scope of their practice.

2. All health care providers may be subject to reasonable deductibles, co-payment, and coinsurance amounts, fee or benefit limits, practice parameters and reasonable utilization review; provided that any such amounts, limits, and review shall not function to direct treatment in a manner which unfairly discriminates against any health care providers and are no more restrictive than those applicable under the same policy of care or services provided by other health care providers in the diagnosis, treatment, and management of the same or similar conditions, injuries, complaints, disorders, or ailments, even if differing nomenclature is used to describe the condition, injury, complaint, disorder, or ailment.

Bill

Copy