COMMITTEE SUBSTITUTE

FOR

H. B. 4426

(BY DELEGATES MANCHIN, FERNS, SWARTZMILLER, HARTMAN, MORGAN, MILEY, WHITE, GIVENS, FERRO, SKAFF AND PERRY)

> (Originating in the Committee on the Judiciary) [February 24, 2012]

A BILL to amend the Code of West Virginia, 1931, as amended, by adding thereto a new section, designated §5-16-7f; to amend said code by adding thereto a new section, designated §33-15-22; to amend said code by adding thereto a new section, designated §33-16-18; to amend said code by adding thereto a new section, designated §33-16D-17; to amend said code by adding thereto a new section, designated §33-24-71; to amend said code by adding thereto a new section, designated §33-25-8i; and to amend said code by adding thereto a new Com. Sub. for H. B. 4426] 2

section, designated §33-25A-8k, all relating to copayments required in certain policies, provisions, contracts, plans or agreements to provide health care benefits; providing that a copayment imposed for services rendered by a licensed occupational therapist, licensed speech-language pathologist or licensed physical therapist may not exceed a copayment imposed for the services of a primary care physician or an osteopathic physician.

Be it enacted by the Legislature of West Virginia:

That the Code of West Virginia, 1931, as amended, be amended by adding thereto a new section, designated §5-16-7F; to amend said code by adding thereto a new section, designated §33-15-22; to amend said code by adding thereto a new section designated §33-16-18; to amend said code by adding thereto a new section, designated §33-16D-17; to amend said code by adding thereto a new section designated §33-24-71; to amend said code by adding thereto a new section designated §33-25-8i; and to amend said code by adding thereto a new section designated §33-25A-8k, all to read as follows:

CHAPTER 5. GENERAL POWERS AND AUTHORITY OF THE GOVERNOR, SECRETARY OF STATE AND ATTORNEY GENERAL; BOARD OF PUBLIC WORKS; MISCELLANEOUS AGENCIES, COMMISSIONS, OFFICES, PROGRAMS, ETC.

ARTICLE 16. WEST VIRGINIA PUBLIC EMPLOYEES INSURANCE ACT.

§5-16-7f. Copayments.

- 1 (a) A policy, provision, contract, plan or agreement
- 2 <u>subject to this article may not impose a copayment upon an</u>
- 3 individual for services rendered by a licensed occupational
- 4 therapist, licensed speech-language pathologist or a licensed
- 5 physical therapist that is in excess of a copayment imposed
- 6 upon an individual for the services of a primary care
- 7 physician or an osteopathic physician.
- 8 (b) As used in this section, "copayment" means a specific
- 9 dollar amount that the covered individual must pay as a share
- 10 of the cost of the services upon receipt of the covered
- 11 services.
- 12 (c) The policy, provision, contract, plan or agreement
- 13 shall clearly state the availability of occupational therapy,

Com. Sub. for H. B. 4426] 4

- 14 speech language therapy and physical therapy coverage and
- 15 <u>all related limitations, conditions and exclusions.</u>

CHAPTER 33. INSURANCE.

ARTICLE 15. ACCIDENT AND SICKNESS INSURANCE. §33-15-22. Copayments.

(a) A policy, contract, plan or agreement subject to this 1 2 article may not impose a copayment upon an insured for services rendered by a licensed occupational therapist, 3 4 licensed speech-language pathologist or a licensed physical therapist that is in excess of a copayment imposed upon the 5 insured for the services of a primary care physician or an 6 7 osteopathic physician. 8 (b) As used in this section, "copayment" means a specific dollar amount that the insured or subscriber must pay as a share 9 10 of the cost of the services upon receipt of the covered services. 11 (c) The policy or plan shall clearly state the availability of occupational therapy, speech language therapy and 12 physical therapy coverage and all related limitations, 13 14 conditions and exclusions.

ARTICLE 16. GROUP ACCIDENT AND SICKNESS INSURANCE.

§33-16-18. Copayments.

- (a) A group health plan, health benefit plan or network 1 2 plan subject to this article may not impose a copayment upon 3 an insured for services rendered by a licensed occupational 4 therapist, licensed speech-language pathologist or a licensed physical therapist that is in excess of a copayment imposed 5 6 upon the insured for the services of a primary care physician 7 or an osteopathic physician. (b) As used in this section, "copayment" means a specific 8 9 dollar amount that the insured or subscriber must pay as a 10 share of the cost of the services upon receipt of the covered 11 services.
- (c) The policy or plan shall clearly state the availability
 of occupational therapy, speech language therapy and
 physical therapy coverage and all related limitations,
 conditions and exclusions.

5

[Com. Sub. for H. B. 4426

Com. Sub. for H. B. 4426] 6

ARTICLE 16D. MARKETING AND RATE PRACTICES FOR SMALL EMPLOYER ACCIDENT AND SICKNESS INSURANCE POLICIES.

§33-16D-17. Copayments.

- 1 (a) A group health plan, health benefit plan or network
- 2 plan subject to this article may not impose a copayment upon
- 3 <u>an insured for services rendered by a licensed occupational</u>
- 4 <u>therapist, licensed speech-language pathologist or a licensed</u>
- 5 physical therapist that is in excess of a copayment imposed
- 6 upon the insured for the services of a primary care physician
- 7 or an osteopathic physician.
- 8 (b) As used in this section, "copayment" means a specific
- 9 dollar amount that the insured or subscriber must pay as a
- 10 share of the cost of the services upon receipt of the covered
- 11 services.
- 12 (c) The group health plan, health benefit plan or network
- 13 plan shall clearly state the availability of occupational
- 14 therapy, speech language therapy and physical therapy
- 15 <u>coverage under its plan and all related limitations, conditions</u>
- 16 and exclusions.

ARTICLE 24. HOSPITAL SERVICE CORPORATIONS, MEDICAL SERVICE CORPORATIONS, DENTAL SERVICE CORPORATIONS A N D H E A L T H S E R V I C E CORPORATIONS.

§33-24-71. Copayments.

- 1 (a) A policy, provision, contract, plan or agreement
- 2 <u>subject to this article may not impose a copayment upon a</u>
- 3 <u>subscriber for services rendered by a licensed occupational</u>
- 4 therapist, licensed speech-language pathologist or a licensed
- 5 physical therapist that is in excess of a copayment imposed
- 6 upon a subscriber for the services of a primary care physician
- 7 or an osteopathic physician.
- 8 (b) As used in this section, "copayment" means a specific
- 9 dollar amount that the insured or subscriber must pay as a
- 10 share of the cost of the services upon receipt of the covered
- 11 services.
- 12 (c) The policy, provision, contract, plan or agreement
- 13 shall clearly state the availability of occupational therapy,
- 14 speech language therapy and physical therapy coverage and
- 15 <u>all related limitations, conditions and exclusions.</u>

Com. Sub. for H. B. 4426] 8 ARTICLE 25. HEALTH CARE CORPORATIONS.

§33-25-8i. Copayments.

1	(a) A policy, provision, contract, plan or agreement
2	subject to this article may not impose a copayment upon a
3	subscriber or member for services rendered by a licensed
4	occupational therapist, licensed speech-language pathologist
5	or a licensed physical therapist that is in excess of a
6	copayment imposed upon a subscriber or member for the
7	services of a primary care physician or an osteopathic
8	physician.
9	(b) As used in this section, "copayment" means a specific
10	dollar amount that the subscriber or member must pay as a
11	share of the cost of the services upon receipt of the covered
12	services.
13	(c) The policy, provision, contract, plan or agreement
14	shall clearly state the availability of occupational therapy.
15	speech language therapy and physical therapy coverage and

16 <u>all related limitations, conditions and exclusions.</u>

ARTICLE 25A. HEALTH MAINTENANCE ORGANIZATION ACT.

§33-25A-8k. Copayments.

1	(a) A policy, provision, contract, plan or agreement
2	subject to this article may not impose a copayment upon a
3	subscriber or member for services rendered by a licensed
4	occupational therapist, licensed speech-language pathologist
5	or a licensed physical therapist that is in excess of a
6	copayment imposed upon a subscriber or member for the
7	services of a primary care physician or an osteopathic
8	physician.
9	(b) As used in this section, "copayment" means a specific
10	dollar amount that the subscriber or member must pay as a
11	share of the cost of the services upon receipt of the covered
12	services.
13	(c) The policy, provision, contract, plan or agreement
14	shall clearly state the availability of occupational therapy,
15	speech language therapy and physical therapy coverage and

16 all related limitations, conditions and exclusions.

9

[Com. Sub. for H. B. 4426