1	H. B. 4422
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3 4 5 6	(By Delegates Manchins Caputo, Longstreth, Fragale, Jones, Diserio, Pethtel, Manypenny, Ferro, D. Poling and Marcum)
7	[Introduced February 6, 2014; referred to the
8	Committee on Health & Human Resources then the
9	Judiciary.]
10	A BILL to amend the Code of West Virginia, 1931, as amended, by
11	adding thereto a new section, designated §5-16-7f; to amend
12	said code by adding thereto a new section, designated
13	$\S 33-15-22$; to amend said code by adding thereto a new section,
14	designated §33-16-18; to amend said code by adding thereto a
15	new section, designated §33-16D-17; to amend said code by
16	adding thereto a new section, designated §33-24-71; to amend
17	said code by adding thereto a new section, designated
18	§33-25-8i; and to amend said code by adding thereto a new
19	section, designated §33-25A-8k, all relating to copayments
20	required in certain policies, provisions, contracts, plans or
21	agreements to provide health care benefits; providing that a
22	copayment imposed for services rendered by a licensed
23	occupational therapist, licensed speech-language pathologist
24	or licensed physical therapist may not exceed a copayment
25	imposed for the services of a primary care physician or an

- 1 osteopathic physician; and prohibiting discrimination based
- 2 upon the manner or cause of injury or condition.
- 3 Be it enacted by the Legislature of West Virginia:
- 4 That the Code of West Virginia, 1931, as amended, be amended
- 5 by adding thereto a new section, designated §5-16-7F; to amend said
- 6 code by adding thereto a new section, designated §33-15-22; to
- 7 amend said code by adding thereto a new section designated
- 8 §33-16-18; to amend said code by adding thereto a new section,
- 9 designated §33-16D-17; to amend said code by adding thereto a new
- 10 section designated §33-24-71; to amend said code by adding thereto
- 11 a new section designated §33-25-8i; and to amend said code by
- 12 adding thereto a new section designated §33-25A-8k, all to read as
- 13 follows:
- 14 CHAPTER 5. GENERAL POWERS AND AUTHORITY OF THE GOVERNOR, SECRETARY
- OF STATE AND ATTORNEY GENERAL; BOARD OF PUBLIC WORKS;
- MISCELLANEOUS AGENCIES, COMMISSIONS, OFFICES,
- 17 PROGRAMS, ETC.
- 18 ARTICLE 16. WEST VIRGINIA PUBLIC EMPLOYEES INSURANCE ACT.
- 19 **§5-16-7f**. Copayments.
- 20 (a) A policy, provision, contract, plan or agreement subject
- 21 to this article may not impose a copayment upon an individual for
- 22 services rendered by a licensed occupational therapist, licensed
- 23 speech-language pathologist or a licensed physical therapist that

- 1 is in excess of a copayment imposed upon an individual for the
- 2 services of a primary care physician or an osteopathic physician.
- 3 (b) As used in this section, "copayment" means a specific
- 4 dollar amount that the covered individual must pay as a share of
- 5 the cost of the services upon receipt of the covered services.
- 6 (c) The policy, provision, contract, plan or agreement shall
- 7 clearly state the availability of occupational therapy, speech
- 8 language therapy and physical therapy coverage and all related
- 9 limitations, conditions and exclusions.
- 10 (d) A healthcare provider may not discriminate against or
- 11 refuse treatment to a patient based upon the manner or cause of
- 12 injury or condition necessitating the healthcare treatment sought.
- 13 CHAPTER 33. INSURANCE.
- 14 ARTICLE 15. ACCIDENT AND SICKNESS INSURANCE.
- 15 **§33-15-22**. Copayments.
- 16 (a) A policy, contract, plan or agreement subject to this
- 17 article may not impose a copayment upon an insured for services
- 18 rendered by a licensed occupational therapist, licensed
- 19 speech-language pathologist or a licensed physical therapist that
- 20 is in excess of a copayment imposed upon the insured for the
- 21 services of a primary care physician or an osteopathic physician.
- 22 (b) As used in this section, "copayment" means a specific
- 23 dollar amount that the insured or subscriber must pay as a share of
- 24 the cost of the services upon receipt of the covered services.

- 1 (c) The policy or plan shall clearly state the availability of
- 2 occupational therapy, speech language therapy and physical therapy
- 3 coverage and all related limitations, conditions and exclusions.
- 4 (d) A healthcare provider may not discriminate against or
- 5 refuse treatment to a patient based upon the manner or cause of
- 6 injury or condition necessitating the healthcare treatment sought.
- 7 ARTICLE 16. GROUP ACCIDENT AND SICKNESS INSURANCE.
- 8 <u>\$33-16-18</u>. Copayments.
- 9 (a) A group health plan, health benefit plan or network plan
- 10 subject to this article may not impose a copayment upon an insured
- 11 for services rendered by a licensed occupational therapist,
- 12 licensed speech-language pathologist or a licensed physical
- 13 therapist that is in excess of a copayment imposed upon the
- 14 insured for the services of a primary care physician or an
- 15 osteopathic physician.
- 16 (b) As used in this section, "copayment" means a specific
- 17 dollar amount that the insured or subscriber must pay as a share of
- 18 the cost of the services upon receipt of the covered services.
- 19 (c) The policy or plan shall clearly state the availability of
- 20 occupational therapy, speech language therapy and physical therapy
- 21 coverage and all related limitations, conditions and exclusions.
- 22 (d) A healthcare provider may not discriminate against or
- 23 refuse treatment to a patient based upon the manner or cause of
- 24 injury or condition necessitating the healthcare treatment sought.

- 1 ARTICLE 16D. MARKETING AND RATE PRACTICES FOR SMALL EMPLOYER
- 2 ACCIDENT AND SICKNESS INSURANCE POLICIES.
- 3 **§33-16D-17**. Copayments.
- 4 (a) A group health plan, health benefit plan or network plan
- 5 subject to this article may not impose a copayment upon an insured
- 6 for services rendered by a licensed occupational therapist,
- 7 <u>licensed</u> speech-language pathologist or a licensed physical
- 8 therapist that is in excess of a copayment imposed upon the
- 9 insured for the services of a primary care physician or an
- 10 osteopathic physician.
- 11 (b) As used in this section, "copayment" means a specific
- 12 dollar amount that the insured or subscriber must pay as a share of
- 13 the cost of the services upon receipt of the covered services.
- 14 (c) The group health plan, health benefit plan or network plan
- 15 shall clearly state the availability of occupational therapy,
- 16 speech language therapy and physical therapy coverage under its
- 17 plan and all related limitations, conditions and exclusions.
- 18 (d) A healthcare provider may not discriminate against or
- 19 refuse treatment to a patient based upon the manner or cause of
- 20 injury or condition necessitating the healthcare treatment sought.
- 21 ARTICLE 24. HOSPITAL SERVICE CORPORATIONS, MEDICAL SERVICE
- 22 CORPORATIONS, DENTAL SERVICE CORPORATIONS AND
- 23 **HEALTH SERVICE CORPORATIONS.**

1 §33-24-71. Copayments.

- 2 (a) A policy, provision, contract, plan or agreement subject
- 3 to this article may not impose a copayment upon a subscriber for
- 4 services rendered by a licensed occupational therapist, licensed
- 5 speech-language pathologist or a licensed physical therapist that
- 6 is in excess of a copayment imposed upon a subscriber for the
- 7 services of a primary care physician 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 share of
- 10 the cost of the services upon receipt of the covered services.
- 11 (c) The policy, provision, contract, plan or agreement shall
- 12 clearly state the availability of occupational therapy, speech
- 13 language therapy and physical therapy coverage and all related
- 14 limitations, conditions and exclusions.
- 15 (d) A healthcare provider may not discriminate against or
- 16 refuse treatment to a patient based upon the manner or cause of
- 17 injury or condition necessitating the healthcare treatment sought.
- 18 ARTICLE 25. HEALTH CARE CORPORATIONS.
- 19 **§33-25-8i**. Copayments.
- 20 (a) A policy, provision, contract, plan or agreement subject
- 21 to this article may not impose a copayment upon a subscriber or
- 22 member for services rendered by a licensed occupational therapist,
- 23 licensed speech-language pathologist or a licensed physical
- 24 therapist that is in excess of a copayment imposed upon a

- 1 subscriber or member for the services of a primary care physician
- 2 or an osteopathic physician.
- 3 (b) As used in this section, "copayment" means a specific
- 4 dollar amount that the subscriber or member must pay as a share of
- 5 the cost of the services upon receipt of the covered services.
- 6 (c) The policy, provision, contract, plan or agreement shall
- 7 clearly state the availability of occupational therapy, speech
- 8 language therapy and physical therapy coverage and all related
- 9 limitations, conditions and exclusions.
- 10 (d) A healthcare provider may not discriminate against or
- 11 refuse treatment to a patient based upon the manner or cause of
- 12 injury or condition necessitating the healthcare treatment sought.
- 13 ARTICLE 25A. HEALTH MAINTENANCE ORGANIZATION ACT.
- 14 **§33-25A-8k**. Copayments.
- 15 (a) A policy, provision, contract, plan or agreement subject
- 16 to this article may not impose a copayment upon a subscriber or
- 17 member for services rendered by a licensed occupational therapist,
- 18 licensed speech-language pathologist or a licensed physical
- 19 therapist that is in excess of a copayment imposed upon a
- 20 subscriber or member for the services of a primary care physician
- 21 or an osteopathic physician.
- 22 (b) As used in this section, "copayment" means a specific
- 23 dollar amount that the subscriber or member must pay as a share of
- 24 the cost of the services upon receipt of the covered services.

- 1 (c) The policy, provision, contract, plan or agreement shall
- 2 clearly state the availability of occupational therapy, speech
- 3 language therapy and physical therapy coverage and all related
- 4 limitations, conditions and exclusions.
- 5 (d) A healthcare provider may not discriminate against or
- 6 refuse treatment to a patient based upon the manner or cause of
- 7 injury or condition necessitating the healthcare treatment sought.

NOTE: The purpose of this bill is to require that a copayment to a licensed occupational therapist, licensed speech-language pathologist or a licensed physical therapist be the same as to a physician or osteopath. The bill also prohibits health care providers from discriminating against or refusing treatment to a patient based upon the manner or cause of injury or condition necessitating the treatment sought.

All sections in this bill are new; therefore, they have been completely underscored.