WEST VIRGINIA LEGISLATURE

2024 REGULAR SESSION

Introduced

House Bill 5218

By Delegates E. Pritt, Chiarelli, Kump, Bridges, Sheedy, Dean, and Adkins

[Introduced January 26, 2024; Referred to the Committee on Banking and Insurance then the Judiciary]

A BILL to amend and reenact §33-15-23 of the Code of West Virginia, 1931, as amended, relating to insurance copayments for certain services; and capping copays at $500 a year for insureds who are terminally ill until death.

Be it enacted by the Legislature of West Virginia:

ARTICLE 15. ACCIDENT AND SICKNESS INSURANCE.

§33-15-23. Copayments for certain services; cap on copays for terminally ill insureds.

(a) A policy, provision, contract, plan, or agreement subject to this article may not impose a copayment, coinsurance, or office visit deductible amount charged to the insured for services rendered for each date of service by a licensed occupational therapist, licensed occupational therapist assistant, licensed speech-language pathologist, licensed speech-language pathologist assistant, licensed physical therapist, or a licensed physical therapist assistant that is greater than the copayment, coinsurance, or office visit deductible amount charged to the insured for the services of a primary care physician or an osteopathic physician.

(b) The policy, provision, contract, plan, or agreement shall clearly state the availability of occupational therapy, speech-language therapy, and physical therapy coverage and all related limitations, conditions, and exclusions.

(c) Notwithstanding any other provision of law to the contrary, a policy, provision, contract, plan, or agreement subject to this article, or any other article in this code specifically relating to sickness insurance, may not impose a copayment, coinsurance, or office visit deductible amount charged to the insured who has been diagnosed with a "terminal illness" for services rendered for each date of service by a licensed occupational therapist, licensed occupational therapist assistant, licensed speech-language pathologist, licensed speech-language pathologist assistant, licensed physical therapist, or a licensed physical therapist assistant that is greater than the copayment, coinsurance, or office visit deductible amount charged to the insured for the services of a primary care physician or an osteopathic physician or that exceeds $500 for an entire year of such services. For the purposes of this subdivision, "terminal illness" means an illness, disease or condition which cannot be cured and will likely lead to the insured's death. The limitation on the amount of copay shall continue annually and cease at the time of death of the insured.

NOTE: The purpose of this bill is to cap insurance copayments for certain services at $500 a year for insureds who are terminally ill until death.

Strike-throughs indicate language that would be stricken from a heading or the present law and underscoring indicates new language that would be added.