

CHAPTER 299
HB 1281-FN – FINAL VERSION

12Mar2014... 0832h
05/01/14 1508s
05/01/14 1595s
4Jun2014... 1988CofC

2014 SESSION

14-2370
01/04

HOUSE BILL ***1281-FN***

AN ACT relative to copayments for certain providers.

SPONSORS: Rep. D. Sullivan, Hills 42; Rep. Sapareto, Rock 6; Rep. Major, Rock 14;
Rep. Weyler, Rock 13; Sen. Woodburn, Dist 1; Sen. Larsen, Dist 15; Sen. Bradley,
Dist 3; Sen. Soucy, Dist 18

COMMITTEE: Commerce and Consumer Affairs

AMENDED ANALYSIS

This bill declares that insurers issuing or renewing individual or group policies pursuant to the Patient Protection and Affordable Care Act of 2009 shall not charge copayments, coinsurance, or office deductibles for chiropractors and physical therapists that are greater than such amounts charged for the services of primary care physicians licensed under RSA 329. This bill requires the insurance commissioner to compile certain data on member cost sharing and to make certain reports.

Explanation: Matter added to current law appears in ***bold italics***.
Matter removed from current law appears [~~in brackets and struck through.~~]
Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

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STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Fourteen

AN ACT relative to copayments for certain providers.

Be it Enacted by the Senate and House of Representatives in General Court convened:

1 299:1 New Section; Insurance; Individual; Copayments for Certain Providers. Amend RSA 415
2 by inserting after section 6-r the following new section:

3 415:6-s Copayments, Coinsurance, or Office Visit Deductibles for Certain Providers.

4 I. Each insurer that issues or renews any 2014 Patient Protection and Affordable Care Act of
5 2009, Public Law 111-148 - compliant individual policy, plan, or contract of accident or health
6 insurance that constitutes health coverage for the services of chiropractors licensed under RSA 316-
7 A, or physical therapists licensed under RSA 328-A, shall not charge a copayment, coinsurance, or
8 office visit deductible that is greater than the copayment, coinsurance, or office visit deductible
9 amount charged to the insured for the services of a primary care physician licensed under RSA 329.

10 II. The commissioner shall compile available data and prepare reports concerning member
11 cost sharing and the impact on utilization of services for physical therapy and chiropractic care. The
12 first report shall be due by December 1, 2014, and shall analyze all New Hampshire insurance
13 markets and identify differences in cost sharing and utilization of health services for the purpose of
14 determining if there is a statistical association between the use of physical therapy and chiropractic
15 care services and copayment amounts. The commissioner shall also seek to determine whether the
16 overall costs of patients that utilize chiropractic care or physical therapists are less when the patient
17 has lower copayment amounts for these services, and if any observed lower overall patient costs are
18 caused by reductions in other health care services and better health care outcomes, not patient
19 health status.

20 III. A second report shall be due October 1, 2017, with requirements to provide the same
21 information, but using the most current data available.

22 IV. The insurance department shall consult with providers in preparing the scope of this
23 study and gathering research for the study. Data shall include, but not be limited to, the costs for all
24 physician services, medication, imaging, hospitalization, and procedures, such as spinal injections.
25 For purposes of ensuring a more complete comparison, the top 50 ICD codes for diagnosis treated by
26 physical therapists and chiropractors shall be analyzed and a comparison of the total cost of low
27 copay plans and high copay plans shall be conducted.

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1 V. The commissioner shall make the reports, together with any recommendations for
2 legislation, to the president of the senate, the speaker of the house of representatives, the governor,
3 and the chairs of the house and senate commerce committees.

4 299:2 New Section; Insurance; Group; Copayments for Certain Providers. Amend RSA 415 by
5 inserting after section 18-w the following new section:

6 415:18-x Copayments, Coinsurance, or Office Visit Deductibles for Certain Providers. Each
7 insurer that issues or renews any 2014 Patient Protection and Affordable Care Act of 2009, Public
8 Law 111-148 - compliant small group policy of group or blanket accident or health insurance that
9 constitutes health coverage for the services of chiropractors licensed under RSA 316-A, or physical
10 therapists licensed under RSA 328-A, shall offer an optional plan which shall not charge a
11 copayment, coinsurance, or office visit deductible that is greater than the copayment, coinsurance, or
12 office visit deductible amount charged to the insured for the services of a primary care physician
13 licensed under RSA 329.

14 II. The commissioner shall compile available data and prepare reports concerning member
15 cost sharing and the impact on utilization of services for physical therapy and chiropractic care. The
16 first report shall be due by December 1, 2014, and shall analyze all New Hampshire insurance
17 markets and identify differences in cost sharing and utilization of health services for the purpose of
18 determining if there is a statistical association between the use of physical therapy and chiropractic
19 care services and copayment amounts. The commissioner shall also seek to determine whether the
20 overall costs of patients that utilize chiropractic care or physical therapists are less when the patient
21 has lower copayment amounts for these services, and if any observed lower overall patient costs are
22 caused by reductions in other health care services and better health care outcomes, not patient
23 health status.

24 III. A second report shall be due October 1, 2017, with requirements to provide the same
25 information, but using the most current data available.

26 IV. The insurance department shall consult with providers in preparing the scope of this
27 study and gathering research for the study. Data shall include, but not be limited to, the costs for all
28 physician services, medication, imaging, hospitalization, and procedures, such as spinal injections.
29 For purposes of ensuring a more complete comparison, the top 50 ICD codes for diagnosis treated by
30 physical therapists and chiropractors shall be analyzed and a comparison of the total cost of low
31 copay plans and high copay plans shall be conducted.

32 V. The commissioner shall make the reports, together with any recommendations for
33 legislation, to the president of the senate, the speaker of the house of representatives, the governor,
34 and the chairs of the house and senate commerce committees.

35 299:3 Health Service Corporations; Copayments for Certain Specialists. Amend RSA 420-A:2 to
36 read as follows:

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1 420-A:2 Applicable Statutes. Every health service corporation shall be governed by this chapter
2 and the relevant provisions of RSA 161-H, and shall be exempt from this title except for the
3 provisions of RSA 400-A:39, RSA 401-B, RSA 402-C, RSA 404-F, RSA 415-A, RSA 415-F, RSA 415:6,
4 II(4), RSA 415:6-g, RSA 415:6-k, RSA 415:6-m, RSA 415:6-o, RSA 415:6-r, **RSA 415:6-s**, RSA 415:18,
5 V, RSA 415:18, VII(g), RSA 415:18, XVI and XVII, RSA 415:18, VII-a, RSA 415:18-a, RSA 415:18-j,
6 RSA 415:18-o, RSA 415:18-r, RSA 415:18-t, RSA 415:18-u, RSA 415:18-v, RSA 415:18-w,
7 **RSA 415:18-x**, RSA 415:22, RSA 417, RSA 417-E, RSA 420-J, and all applicable provisions of title
8 XXXVII wherein such corporations are specifically included. Every health service corporation and
9 its agents shall be subject to the fees prescribed for health service corporations under RSA 400-A:29,
10 VII.

11 299:4 Health Maintenance Corporations; Copayments for Certain Specialists. Amend RSA 420-
12 B:20, III to read as follows:

13 III. The requirements of RSA 400-A:39, RSA 401-B, RSA 402-C, RSA 404-F, RSA 415:6-g,
14 RSA 415:6-m, RSA 415:6-o, RSA 415:6-r, **RSA 415:6-s**, RSA 415:18, VII(g), RSA 415:18, VII-a,
15 RSA 415:18, XVI and XVII, RSA 415:18-j, RSA 415:18-r, RSA 415:18-t, RSA 415:18-u, RSA 415:18-v,
16 RSA 415:18-w, **RSA 415:18-x**, RSA 415-A, RSA 415-F, RSA 420-G, and RSA 420-J shall apply to
17 health maintenance organizations.

18 299:5 Applicability; Effective Date. The provisions of sections 1 and 2 of this act shall take effect
19 and apply January 1, 2015 to health insurance plans effective on or after January 1, 2015 and sold
20 exclusively off the federally-facilitated exchange. For health insurance plans sold through the
21 federally-facilitated exchange and those same plans sold off the federally-facilitated exchange, the
22 provisions of sections 1 and 2 shall take effect and apply January 1, 2016.

23 299:6 Health Services Corporations; Copayments for Certain Specialists. RSA 420-A:2 is
24 repealed and reenacted to read as follows:

25 420-A:2 Applicable Statutes. Every health service corporation shall be governed by this chapter
26 and the relevant provisions of RSA 161-H, and shall be exempt from this title except for the
27 provisions of RSA 400-A:39, RSA 401-B, RSA 402-C, RSA 404-F, RSA 415-A, RSA 415-F, RSA 415:6,
28 II(4), RSA 415:6-g, RSA 415:6-k, RSA 415:6-m, RSA 415:6-o, RSA 415:6-r, RSA 415:18, V,
29 RSA 415:18, VII(g), RSA 415:18, XVI and XVII, RSA 415:18, VII-a, RSA 415:18-a, RSA 415:18-j,
30 RSA 415:18-o, RSA 415:18-r, RSA 415:18-t, RSA 415:18-u, RSA 415:18-v, RSA 415:18-w, RSA 415:22,
31 RSA 417, RSA 417-E, RSA 420-J, and all applicable provisions of title XXXVII wherein such
32 corporations are specifically included. Every health service corporation and its agents shall be
33 subject to the fees prescribed for health service corporations under RSA 400-A:29, VII.

34 299:7 Health Maintenance Corporations; Copayments for Certain Specialists. RSA 420-B:20, III
35 is repealed and reenacted to read as follows:

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1 III. The requirements of RSA 400-A:39, RSA 401-B, RSA 402-C, RSA 404-F, RSA 415:6-g,
2 RSA 415:6-m, RSA 415:6-o, RSA 415:6-r, RSA 415:18, VII(g), RSA 415:18, VII-a, RSA 415:18, XVI
3 and XVII, RSA 415:18-j, RSA 415:18-r, RSA 415:18-t, RSA 415:18-u, RSA 415:18-v, RSA 415:18-w,
4 RSA 415-A, RSA 415-F, RSA 420-G, and RSA 420-J shall apply to health maintenance organizations.

5 299:8 Repeal. The following are repealed:

6 I. RSA 415:6-s, relative to copayments for certain providers.

7 II. RSA 415:18-x, relative to copayments for certain providers.

8 299:9 Effective Date.

9 I. Sections 1 and 2 of this act shall take effect as provided in section 5 of this act.

10 II. Sections 6-8 of this act shall take effect October 1, 2017.

11 III. The remainder of this act shall take effect 60 days after its passage.

12
13 Approved: August 1, 2014

14 Effective Date: I. Sections 1 and 2 shall take effect as provided in section 5.

15 II. Sections 6-8 shall take effect October 1, 2017.

16 III. Remainder shall take effect September 30, 2014.