

FIRST REGULAR SESSION

[PERFECTED]

HOUSE SUBSTITUTE FOR

HOUSE COMMITTEE SUBSTITUTE FOR

# HOUSE BILL NO. 121

92ND GENERAL ASSEMBLY

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Taken up for Perfection April 15, 2003. House Substitute for House Committee Substitute for House Bill No. 121 ordered Perfected and printed.

STEPHEN S. DAVIS, Chief Clerk

0311L.07P

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## AN ACT

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

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*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  
2 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,  
2 shall provide coverage for chiropractic care delivered by a licensed chiropractor acting  
3 within the scope of his or her practice as defined in chapter 331, RSMo. The coverage shall  
4 include initial diagnosis and clinically appropriate and medically necessary services and  
5 supplies required to treat the diagnosed disorder, subject to the terms and conditions of  
6 the policy. The coverage may be limited to chiropractors within the health carrier's  
7 network, and nothing in this section shall be construed to require a health carrier to  
8 contract with a chiropractor not in the carrier's network nor shall a carrier be required  
9 to reimburse for services rendered by a nonnetwork chiropractor unless prior approval  
10 has been obtained from the carrier by the enrollee. An enrollee may access chiropractic  
11 care within the network for a total of twenty chiropractic physician office visits per policy  
12 period, but may be required to provide the health carrier with notice prior to any  
13 additional visit as a condition of coverage. A health carrier may require prior  
14 authorization or notification before any follow-up diagnostic tests are ordered by a  
15 chiropractor or for any office visits for treatment in excess of twenty in any policy period.

16 **The certificate of coverage for any health benefit plan issued by a health carrier shall**  
17 **clearly state the availability of chiropractic coverage under the policy and any limitations,**  
18 **conditions, and exclusions.**

19 **2. The provisions of this section shall not apply to benefits provided under the**  
20 **Medicaid program.**

21 **3. The provisions of this section shall not apply to a supplemental insurance policy,**  
22 **including a life care contract, accident-only policy, specified disease policy, hospital policy**  
23 **providing a fixed daily benefit only, Medicare supplement policy, long-term care policy,**  
24 **short-term major medical policy of six months' or less duration, or any other similar**  
25 **supplemental policy.**

**376.1231. A health benefit plan shall provide coverage for treatment of a**  
2 **chiropractic care condition and shall not establish any rate, term, or condition that places**  
3 **a greater financial burden on an insured for access to treatment for a chiropractic care**  
4 **condition than for access to treatment for another physical health condition. Any**  
5 **deductible or out-of-pocket limits required by a health carrier or health benefit plan shall**  
6 **be comprehensive for coverage of all health conditions.**