

SECOND REGULAR SESSION

HOUSE BILL NO. 1226

93RD GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVES PORTWOOD (Sponsor), WRIGHT (137),
SMITH (14), AVERY AND LEMBKE (Co-sponsors).

Pre-filed January 3, 2006 and copies ordered printed.

STEPHEN S. DAVIS, Chief Clerk

3880L.01I

AN ACT

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

Be it enacted by the General Assembly of the state of Missouri, as follows:

Section A. Chapter 376, RSMo, is amended by adding thereto one new section, to be
2 known as section 376.388, to read as follows:

**376.388. 1. Notwithstanding any provision of any policy or contract of insurance
2 or health benefits issued by a health carrier, as defined in section 376.1350, whenever a
3 policy or contract provides for payment or reimbursement for any clinically appropriate
4 service and such service may be legally performed by a chiropractor licensed in this state,
5 such payment or reimbursement under such policy or contract shall not be denied if such
6 services are rendered by a licensed chiropractor within the health carrier's network.**
7 **2. A health carrier shall not impose upon an insured as a limitation on treatment
8 or level of coverage a co-payment amount for chiropractic services that is higher than the
9 co-payment amount charged to the insured for the services of any other licensed primary
10 care physician for the same clinically appropriate treatment or condition; except that, a
11 health carrier may impose a greater co-payment for out-of-network services provided the
12 co-payment made is not greater than the reimbursement from the health carrier.**

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

13 **3. A health carrier shall be reimbursed for clinically appropriate services rendered**
14 **by an out-of-network chiropractor if the health carrier provides out-of-network coverage**
15 **for conditions chiropractors are licensed to treat.**

16 **4. No health carrier shall require a participating provider to pay a portion of their**
17 **fees from each patient encounter as a condition or a prerequisite to becoming or remaining**
18 **a provider for any health carrier.**

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

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