

SENATE BILL 603

C3

11r1949
CF HB 446

By: **Senator Raskin**

Introduced and read first time: February 4, 2011

Assigned to: Finance

A BILL ENTITLED

1 AN ACT concerning

2 **Health Insurance – Coverage for Preventive Physical Therapy – Required**

3 FOR the purpose of requiring certain individual or group health insurance policies and
4 contracts to include coverage for certain preventive physical therapy provided to
5 an insured or enrollee who is diagnosed with multiple sclerosis; providing that
6 the coverage provided by a certain policy or contract is subject to the same
7 deductibles, coinsurance requirements, calendar year maximums, waiting
8 periods, treatment limitations, and any other requirements or limitations that
9 are imposed for certain other benefits under the policy or contract; applying
10 certain provisions of this Act to health maintenance organizations; defining a
11 certain term; providing for the application of this Act; and generally relating to
12 requiring coverage for preventive physical therapy under health insurance
13 policies and contracts.

14 BY adding to

15 Article – Health – General
16 Section 19–706(kkkk)
17 Annotated Code of Maryland
18 (2009 Replacement Volume and 2010 Supplement)

19 BY adding to

20 Article – Insurance
21 Section 15–845
22 Annotated Code of Maryland
23 (2006 Replacement Volume and 2010 Supplement)

24 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
25 MARYLAND, That the Laws of Maryland read as follows:

26 **Article – Health – General**

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 19-706.

2 (KKKK) THE PROVISIONS OF § 15-845 OF THE INSURANCE ARTICLE
3 APPLY TO HEALTH MAINTENANCE ORGANIZATIONS.

4 Article – Insurance

5 15-845.

6 (A) IN THIS SECTION, “PREVENTIVE PHYSICAL THERAPY” MEANS
7 PHYSICAL THERAPY THAT:

8 (1) IS PRESCRIBED BY A PHYSICIAN LICENSED TO PRACTICE
9 MEDICINE UNDER THE HEALTH OCCUPATIONS ARTICLE;

10 (2) HAS AS ITS PURPOSE THE TREATMENT OF PARTS OF THE BODY
11 AFFECTED BY MULTIPLE SCLEROSIS;

12 (3) HAS REASONABLY DEFINED GOALS, INCLUDING
13 MAINTENANCE OF AN INDIVIDUAL’S LEVEL OF FUNCTIONING; AND

14 (4) INCLUDES PERIODIC EVALUATION OF THE EFFICACY OF THE
15 THERAPY IN ACHIEVING THE DEFINED GOALS.

16 (B) THIS SECTION APPLIES TO EACH:

17 (1) INDIVIDUAL OR GROUP HEALTH INSURANCE POLICY OR
18 CONTRACT THAT IS DELIVERED OR ISSUED FOR DELIVERY IN THE STATE BY AN
19 INSURER OR NONPROFIT HEALTH SERVICE PLAN; AND

20 (2) INDIVIDUAL OR GROUP CONTRACT THAT IS DELIVERED OR
21 ISSUED FOR DELIVERY IN THE STATE BY A HEALTH MAINTENANCE
22 ORGANIZATION.

23 (C) EACH POLICY OR CONTRACT SUBJECT TO THIS SECTION SHALL
24 INCLUDE COVERAGE FOR MEDICALLY NECESSARY PREVENTIVE PHYSICAL
25 THERAPY PROVIDED TO AN INSURED OR ENROLLEE WHO IS DIAGNOSED WITH
26 MULTIPLE SCLEROSIS.

27 (D) THE COVERAGE PROVIDED BY A POLICY OR CONTRACT UNDER
28 SUBSECTION (C) OF THIS SECTION SHALL BE SUBJECT TO THE SAME
29 DEDUCTIBLES, COINSURANCE REQUIREMENTS, CALENDAR YEAR MAXIMUMS,
30 WAITING PERIODS, TREATMENT LIMITATIONS, AND ANY OTHER REQUIREMENTS
31 OR LIMITATIONS THAT ARE IMPOSED FOR OTHER PHYSICAL OR

1 REHABILITATIVE THERAPY BENEFITS PROVIDED UNDER THE POLICY OR
2 CONTRACT.

3 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall apply to all
4 policies and contracts issued, delivered, or renewed in the State on or after October 1,
5 2011.

6 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect
7 October 1, 2011.