IAN 18 2023

A BILL FOR AN ACT

RELATING TO INSURANCE.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

- 1 SECTION 1. Section 431:10C-103.5, Hawaii Revised Statutes,
- 2 is amended by amending subsection (a) to read as follows:
- 3 "(a) Personal injury protection benefits, with respect to
- 4 any accidental harm, means all appropriate and reasonable
- 5 treatment and expenses necessarily incurred as a result of the
- 6 accidental harm and which are substantially comparable to the
- 7 requirements for prepaid health care plans, including medical,
- 8 hospital, surgical, professional, nursing, advanced practice
- 9 nursing licensed pursuant to chapter 457, dental, optometric,
- 10 naturopathic medicine, chiropractic, ambulance, prosthetic
- 11 services, medical equipment and supplies, products and
- 12 accommodations furnished, x-ray, psychiatric, physical therapy
- 13 pursuant to prescription by a medical doctor [-] or chiropractor,
- 14 occupational therapy, rehabilitation, and therapeutic massage by
- 15 a licensed massage therapist when prescribed by a medical
- 16 doctor[-] or chiropractor."



- 1 SECTION 2. Section 431:10C-103.6, Hawaii Revised Statutes,
- 2 is amended to read as follows:
- 3 "§431:10C-103.6 Personal injury protection benefits tied
- 4 to prepaid health care plan for description of coverage only.
- 5 (a) The benefits provided under section 431:10C-103.5 shall be
- 6 substantially comparable to the requirements for prepaid health
- 7 care plans, as provided in chapter 393 and rules of the
- 8 department of labor and industrial relations, pertaining to the
- 9 Prepaid Health Care Act. The reference to the Prepaid Health
- 10 Care Act is only for purposes of describing the coverages and
- 11 exclusions, without regard to any specific insurer or plan, and
- 12 shall not be construed to transfer coverage to the prepaid
- 13 health care plans. The precise charges and utilization rates
- 14 shall be as contained in the workers' compensation schedules as
- 15 provided under section 431:10C-308.5, unless modified by the
- 16 commissioner by rule under chapter 91.
- 17 (b) Chiropractic treatments shall be allowed for [not more
- 18 than the lesser of the following:
- 19 (1) Thirty visits at no more than \$75 a visit, | plus no
- 20 more than five x-rays at no more than \$50 each; or



- 1 (2) Treatment as defined by the Hawaii State Chiropractic
 2 Association guidelines in effect on January 25, 1997.
- 3 visits in a number not to exceed that which is deemed medically
- 4 necessary. The charges for chiropractic treatments under this
- 5 section shall be tied to the charges, and any subsequent
- 6 increases in charges, permissible under the workers'
- 7 compensation supplemental medical fee schedule.
- 8 (c) Acupuncture treatments shall be allowed for [no] not
- 9 more than thirty visits. The charges for acupuncture treatments
- 10 under this section shall be tied to the charges, and any
- 11 subsequent increases in charges, permissible under the workers'
- 12 compensation supplemental medical fee schedule.
- 13 (d) Naturopathic treatments shall be allowed for [ne] not
- 14 more than thirty visits at [no] not more than \$75 a visit.
- 15 [(e) The combined total of naturopathic, chiropractic, and
- 16 acupuncture treatments may not exceed thirty visits.
- 17 $\frac{\text{(e)}}{\text{(e)}}$ The benefits under section 431:10C-103.5 may be
- 18 with copayment, and shall be subject to and apply the
- 19 utilization requirements applicable under prepaid health care
- 20 plans, under chapter 393."

1 SECTION 3. Section 431:10C-302, Hawaii Revised Statutes, 2 is amended by amending subsection (a) to read as follows: In addition to the motor vehicle insurance coverages 3 described in section 431:10C-301, every insurer issuing a motor 4 5 vehicle insurance policy shall make available to the insured the following optional insurance under the following conditions. Every insurer issuing a commercial motor vehicle insurance 7 8 policy shall make available to the insured the following 9 optional insurance, except for those benefits under paragraphs 10 (4), (5), (9), (10), and (11) under the following conditions: 11 At the option of the insured, provisions covering loss (1) 12 resulting from damage to the insured's motor vehicle 13 with [such] deductibles, including but not limited to 14 collision and comprehensive deductibles of \$50, \$100, 15 \$250, \$500, \$1,000, \$1,500, and \$2,000, at 16 appropriately reduced premium rates, as the 17 commissioner, by rule, shall provide; 18 (2) At the option of the insured, compensation to the 19 insured, the insured's spouse, any dependents, or any 20 occupants of the insured's vehicle for damages not 21 covered by personal injury protection benefits;

Ţ	(3)	Additional coverages and benefits with respect to any
2		injury or any other loss from motor vehicle accidents
3		or from operation of a motor vehicle for which the
4		insurer may provide for aggregate limits with respect
5		to such additional coverage so long as the basic
6		liability coverages provided are not less than those
7		required by section 431:10C-301(b)(1) and (2);
8	(4)	At the option of the insured, an option in writing for
9		coverage for wage loss benefits for monthly earnings
10		loss for injury arising out of a motor vehicle
11		accident. Any change in the wage loss benefits
12		coverage selected by an insured shall apply only to
13		benefits arising out of motor vehicle accidents
14		occurring after the date the change becomes effective.
15		Coverage shall be offered in multiples of \$500 a
16		month/\$3,000 per accident per person, from \$500 a
17		month/\$3,000 per accident to \$2,000 a month/\$12,000
18		per accident; however, nothing shall prevent an
19		insurer from making available higher limits of
20		coverage;

1	(5)	An option in writing for minimum coverage for death
2		benefits for death arising out of a motor vehicle
3		accident in an amount of \$25,000, to be paid to the
4		surviving spouse, for the benefit of the spouse and
5		dependent children, or if there are no surviving
6		spouse or dependent children, then to the estate.
7		Coverage shall also be made available for increased
8		death benefits in increments of \$25,000 up to
9		\$100,000; however, nothing shall prevent an insurer
10		from making available higher limits of coverage. At
11		the option of the insured, coverage for funeral
12		expenses of \$2,000 shall be made available;
13	(6)	Terms, conditions, exclusions, and deductible clauses
14		coverages, and benefits which:
15		(A) Are consistent with the required provisions of
16		the policy;
17		(B) Limit the variety of coverage available so as to
18		give buyers of insurance reasonable opportunity
19		to compare the cost of insuring with various
20		insurers; and

1	(C)	Are	approved	рÀ	the	commissioner	as	fair	and
2		equ:	itable;						

- applicable only to claims of an insured in the amounts of \$100, \$300, \$500, and \$1,000 from all personal injury protection benefits otherwise payable; provided that if two or more insureds to whom the deductible is applicable under the contract of insurance are injured in the same accident, the aggregate amount of the deductible applicable to all of them shall not exceed the specified deductible, which amount where necessary shall be allocated equally among them;
 - (8) Every insurer shall fully disclose the availability of all required and optional coverages and deductibles, including the nature and amounts, at the issuance or delivery of the policy; or, for a policy already issued on January 1, 1998, disclosure shall be made at the first renewal after January 1, 1998. The insurer shall also disclose at issuance or renewal, as applicable, the effect on premium rates and savings of each option and deductible. Further offers or

1		disclosures thereafter shall be required to be
2		included with every other renewal or replacement
3		policy. All elections of coverages, options, and
4		deductibles by a named insured shall be binding upon
5		additional insureds covered under the named insured's
6		policy. The purpose of this paragraph is to inform
7		insureds or prospective insureds of the coverages
8		under this article;
9	(9)	(A) An insurer may make available, and provide at the
10		option of the named insured, the benefits
11		described in section 431:10C-103.5(a) through
12		managed care providers such as a health
13		maintenance organization or a preferred provider
14		organization. The option may include conditions
15		and limitations to coverage, including
16		deductibles and coinsurance requirements, as
17		approved by the commissioner. The commissioner
18		shall approve those conditions and limitations
19		[which] that are substantially comparable to or
20		exceed the coverage provided under section

431:10C-103.6;

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1	(B)	An insurer may make available, and provide at the
2		option of the named insured, deductible and
3		coinsurance arrangements whereby the recipient of
4		care, treatment, services, products, expenses, or
5		accommodations shares in the payment obligation;
6	(C)	No deductible or coinsurance under a policy
7		covered under [section 431:10C-302(a)(9)(A)]
8		paragraph (9)(A) or (B) shall be applied with
9		respect to care, treatment, services, products,
10		or accommodation provided or expenses incurred by
11		an insured during the first twenty-four hours in
12		which emergency treatment has been provided or
13		until the insured patient's emergency medical
14		condition is stabilized, whichever is longer;
15	(D)	(i) The optional coverage prescribed in [section
16		431:10C-302(a)(9)(A)] paragraph (9)(A) and
17		(B) shall apply only to the named insured,
18		resident spouse, or resident relative; and
19		(ii) "Resident relative" means a person who, at
20		the time of the accident, is related by
21		blood, marriage, or adoption to the named

1		insured or resident spouse and who resides
2		in the named insured's household, even if
3		temporarily living elsewhere, and any ward
4		or foster child who usually resides with the
5		named insured, even if living elsewhere;
6	(E)	An agreement made under [section 431:10C
7		302(a)(9)] paragraph (9) must be a voluntary
8		agreement between the insured and the insurer,
9		and no insurer shall require an insured to agree
10		to those policy provisions as a condition of
11		providing insurance coverage. Requiring an
12		agreement as a precondition to the provision of
13		insurance shall constitute an unfair insurance
14		practice and shall be subject to the provisions,
15		remedies, and penalties provided in article 13;
16		and
17	(F)	An insurer providing the coverages authorized in
18		[section 431:10C 302(a)(9)(A)] paragraph (9)(A)
19		and (B) shall demonstrate in rate filings
20		submitted to the commissioner the savings to the
21		insured to be realized under the plan;

1	(10)	An i	nsurer shall make available optional coverage for
2		natu	ropathic, acupuncture, nonmedical remedial care,
3		and	treatment rendered in accordance with the
4		teac	hings, faith, or belief of any group which relies
5		upon	spiritual means through prayer for healing; and
6	(11)	An i	nsurer may make available optional coverage for
7		chir	opractic treatment in addition to chiropractic
8		trea	tment provided under section 431:10C-103.6 [for
9		not	more than the lesser of the following:
10		(A)	Thirty additional visits at no more than \$75 a
11			visit; or
12		(B)	Treatment as defined by the Hawaii Chiropractic
13			Association guidelines in effect on January 25,
14			1997].
15	The	commi	ssioner shall adopt rules, including policy
16	limits, t	erms,	and conditions as necessary to implement the
17	requireme	nts o	f this section."
18	SECT	ION 4	. Statutory material to be repealed is bracketed
19	and stric	ken.	New statutory material is underscored.
20			

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1 SECTION 5. This Act shall take effect upon its approval.

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INTRODUCED BY:

Report Title:

Motor Vehicle Insurance; Chiropractor; Naturopathic, Chiropractic, and Acupuncture Treatment; Physical Therapy; Therapeutic Massage

Description:

Authorizes prescriptions made by chiropractors for physical therapy and therapeutic massage treatment to qualify as a motor vehicle insurance personal injury protection benefit. Replaces the existing cap on the number of chiropractic treatment visits that qualify for motor vehicle insurance coverage with a number of visits that are deemed medically necessary. Amends the reimbursement amount for chiropractic treatment from \$75 per visit to an amount tied to the charges, and any subsequent increases in charges, permissible under the workers' compensation supplemental medical fee schedule. Repeals the thirty-visit cap on combined naturopathic, chiropractic, and acupuncture treatments.

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