A BILL FOR AN ACT

RELATING TO NATUROPATHIC PHYSICIANS.

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

- 1 SECTION 1. Chapter 431, Hawaii Revised Statutes, is
- 2 amended by adding a new section to article 10A to be
- 3 appropriately designated and to read as follows:
- 4 "§431:10A- Coverage for services by a naturopathic
- 5 physician. (a) Effective July 1, 2011, each policy of accident
- 6 and health or sickness insurance delivered or issued for
- 7 delivery in this State that includes a rider to provide coverage
- 8 for complementary or alternative medicine shall provide coverage
- 9 under the rider for services for purposes of health maintenance,
- 10 diagnosis, or treatment provided by a naturopathic physician
- 11 licensed pursuant to section 455 and practicing within the scope
- 12 of licensure.
- (b) The reimbursement rate for services provided pursuant
- 14 to this section shall be the reimbursement rate for medical and
- 15 rehabilitation benefits calculated pursuant to part II of
- 16 chapter 386."

1 SECTION 2. Chapter 432, Hawaii Revised Statutes, is 2 amended by adding a new section to article 1 to be appropriately 3 designated and to read as follows: 4 "§432:1- Coverage for services by a naturopathic 5 physician. (a) Effective July 1, 2011, each policy of accident 6 and health or sickness insurance delivered or issued for 7 delivery in this State by a mutual benefit society that includes 8 a rider to provide coverage for complementary or alternative 9 medicine shall provide coverage under the rider for services for 10 purposes of health maintenance, diagnosis, or treatment provided 11 by a naturopathic physician licensed pursuant to section 455 and 12 practicing within the scope of licensure. 13 (b) The reimbursement rate for services provided pursuant 14 to this section shall be the reimbursement rate for medical and rehabilitation benefits calculated pursuant to part II of 15 16 chapter 386." 17 SECTION 3. Chapter 432, Hawaii Revised Statutes, is 18 amended by adding a new section to article 2, to be 19 appropriately designated and to read as follows: 20 "§432:2- Coverage for services by a naturopathic 21 physician. (a) Effective July 1, 2011, each policy of accident

and health or sickness insurance delivered or issued for

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- 1 delivery in this State by a fraternal benefit society that
- 2 includes a rider to provide coverage for complementary or
- 3 alternative medicine shall provide coverage under the rider for
- 4 services for purposes of health maintenance, diagnosis, or
- 5 treatment provided by a naturopathic physician licensed pursuant
- 6 to section 455 and practicing within the scope of licensure.
- 7 (b) The reimbursement rate for services provided pursuant
- 8 to this section shall be the reimbursement rate for medical and
- 9 rehabilitation benefits calculated pursuant to part II of
- 10 chapter 386."
- 11 SECTION 4. Section 431:10A-115.5, Hawaii Revised Statutes,
- 12 is amended by amending subsection (e) to read as follows:
- "(e) For the purposes of this section, "child health
- 14 supervision services" means [physician-delivered, physician-
- 15 supervised, physician assistant-delivered, or nurse-delivered
- 16 services as defined by section 457-2 ("registered nurse")]
- 17 services supervised by a physician or osteopathic physician
- 18 licensed pursuant to chapter 453 or services delivered by a
- 19 physician or osteopathic physician licensed pursuant to chapter
- 20 453, a naturopathic physician licensed pursuant to chapter 455,
- 21 or a registered nurse licensed pursuant to chapter 457 which

1 shall include as the minimum benefit coverage for services 2 delivered at intervals and scope stated in this section." 3 SECTION 5. Section 431:10A-116, Hawaii Revised Statutes, 4 is amended to read as follows: 5 "\$431:10A-116 Coverage for specific services. Every 6 person insured under a policy of accident and health or sickness 7 insurance delivered or issued for delivery in this State shall 8 be entitled to the reimbursements and coverages specified below: 9 Notwithstanding any provision to the contrary, (1) 10 whenever a policy, contract, plan, or agreement provides for reimbursement for any visual or 11 12 optometric service[7] which is within the lawful scope 13 of practice of a duly licensed optometrist, the person 14 entitled to benefits or the person performing the 15 services shall be entitled to reimbursement whether 16 the service is performed by a licensed physician or by 17 a licensed optometrist. Visual or optometric services shall include eye or visual examination [, or both,] 18 19 or a correction of any visual or muscular anomaly $[\tau]$ 20 and the supplying of ophthalmic materials, lenses, 21 contact lenses, spectacles, eyeglasses, and 22 appurtenances thereto;

(2)	Notwithstanding any provision to the contrary, for all
	policies, contracts, plans, or agreements issued on or
	after May 30, 1974, whenever provision is made for
	reimbursement or indemnity for any service related to
	surgical or emergency procedures, which is within the
	lawful scope of practice of any practitioner licensed
	to practice medicine in this State, reimbursement or
	indemnification under [such] the policy, contract,
	plan, or agreement shall not be denied when [such] the
	services are performed by a dentist acting within the
	lawful scope of the dentist's license;

- (3) Notwithstanding any provision to the contrary, whenever the policy provides reimbursement or payment for any service[7] which is within the lawful scope of practice of a psychologist licensed in this State, the person entitled to benefits or performing the service shall be entitled to reimbursement or payment[7] whether the service is performed by a licensed physician or licensed psychologist;
- (4) Notwithstanding any provision to the contrary, each policy, contract, plan, or agreement issued on or after February 1, 1991, except for policies that only

provide coverage for specified diseases or other
limited benefit coverage, but including policies
issued by companies subject to chapter 431, article
10A, part II and chapter 432, article 1 shall provide
coverage for screening by low-dose mammography for
occult breast cancer as follows:

- (A) For women forty years of age and older, an annual mammogram; and
- (B) For a woman of any age with a history of breast cancer or whose mother or sister has had a history of breast cancer, a mammogram upon the recommendation of the woman's physician.

The services provided in this paragraph are subject to any coinsurance provisions that may be in force in these policies, contracts, plans, or agreements.

For the purpose of this paragraph, the term "low-dose mammography" means the x-ray examination of the breast using equipment dedicated specifically for mammography, including but not limited to the x-ray tube, filter, compression device, screens, films, and cassettes, with an average radiation exposure delivery

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of less than one rad mid-breast, with two views for each breast. An insurer may provide the services required by this paragraph through contracts with providers; provided that the contract is determined to be a cost-effective means of delivering the services without sacrifice of quality and meets the approval of the director of health;

(5) Notwithstanding any provision to the (A) (i) contrary, whenever a policy, contract, plan, or agreement provides coverage for the children of the insured, that coverage shall also extend to the date of birth of any newborn child to be adopted by the insured; provided that the insured gives written 15 notice to the insurer of the insured's intent to adopt the child prior to the 17 child's date of birth [or], within thirty days after the child's birth, or within the time period required for enrollment of a natural born child under the policy,

contract, plan, or agreement of the insured,

whichever period is longer; provided further

1			that if the adoption proceedings are not
2			successful, the insured shall reimburse the
3			insurer for any expenses paid for the child;
4			and
5		(ii)	Where notification has not been received by
6			the insurer prior to the child's birth or
7			within the specified period following the
8			child's birth, insurance coverage shall be
9			effective from the first day following the
10			insurer's receipt of legal notification of
11			the insured's ability to consent for
12			treatment of the infant for whom coverage is
13			sought; and
14	(B)	When	the insured is a member of a health
15		main	tenance organization [(HMO)], coverage of an
16	•	adop	ted newborn is effective:
17		(i)	From the date of birth of the adopted
18			newborn when the newborn is treated from
19			birth pursuant to a provider contract with
20			the health maintenance organization, and
21			written notice of enrollment in accord with
22			the health maintenance organization's usual

1			enrollment process is provided within thirty
2			days of the date the insured notifies the
3			health maintenance organization of the
4			insured's intent to adopt the infant for
5			whom coverage is sought; or
6		(ii)	From the first day following receipt by the
7			health maintenance organization of written
8			notice of the insured's ability to consent
9			for treatment of the infant for whom
10			coverage is sought and enrollment of the
11			adopted newborn in accord with the health
12			maintenance organization's usual enrollment
13			process if the newborn has been treated from
14			birth by a provider not contracting or
15			affiliated with the health maintenance
16			organization; and
17	(6)	Notwithsta	anding any provision to the contrary, any
18		policy, co	ontract, plan, or agreement issued or renewed
19		in this St	tate shall provide reimbursement for services
20		within the	e respective allowable scope of practice
21		provided l	by advanced practice registered nurses
22		recognize	d pursuant to chapter 457[\div] and naturopathic

1		physicians licensed pursuant to chapter 455. Services
2	. •	rendered by advanced practice registered nurses and
3		naturopathic physicians are subject to the same policy
4		limitations generally applicable to health care
5		providers within the policy, contract, plan, or
6		agreement."
7	SECT	ION 6. Section 431:10A-120, Hawaii Revised Statutes,
8	is amende	d to read as follows:
9	"§43	1:10A-120 Medical foods and low-protein modified food
10	products;	treatment of inborn error of metabolism; notice. (a)
11	Each poli	cy of accident and health or sickness insurance, other
12	than life	insurance, disability income insurance, and long-term
13	care insu	rance, issued or renewed in this State, each employer
14	group hea	lth policy, contract, plan, or agreement issued or
15	renewed i	n this State, all accident and health or sickness
16	insurance	policies issued or renewed in this State, all policies
17	providing	family coverages as defined in section 431:10A-103,
18	and all po	olicies providing reciprocal beneficiary family
19	coverage	as defined in section 431:10A-601, shall contain a
20	provision	for coverage for medical foods and low-protein
21	modified	food products for the treatment of an inborn error of
22	metabolis	m for its policyholders or dependents of the

- 1 policyholder in this State; provided that the medical food or
- 2 low-protein modified food product is:
- 3 (1) Prescribed as medically necessary for the therapeutic
- 4 treatment of an inborn error of metabolism; and
- 5 (2) Consumed or administered enterally under the
- 6 supervision of a physician or osteopathic physician
- 7 licensed under chapter 453[-] or a naturopathic
- 8 physician licensed under chapter 455.
- 9 Coverage shall be for at least eighty per cent of the cost of
- 10 the medical food or low-protein modified food product prescribed
- 11 and administered pursuant to this subsection.
- 12 (b) Every insurer shall provide notice to its
- 13 policyholders regarding the coverage required by this section.
- 14 The notice shall be in writing and prominently placed in any
- 15 literature or correspondence sent to policyholders and shall be
- 16 transmitted to policyholders during calendar year 2000 when
- 17 annual information is made available to policyholders, or in any
- 18 other mailing to policyholders, but in no case later than
- 19 December 31, 2000.
- (c) For the purposes of this section:
- "Inborn error of metabolism" means a disease caused by an
- 22 inherited abnormality of the body chemistry of a person that is



- 1 characterized by deficient metabolism, originating from
- 2 congenital defects or defects arising shortly after birth, of
- 3 amino acid, organic acid, carbohydrate, or fat.

of metabolism; and

- 4 "Low-protein modified food product" means a food product
- 5 that:

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- (1) Is specially formulated to have less than one gram ofprotein per serving;
- (2) Is prescribed or ordered by a physician or osteopathic
 physician, or a naturopathic physician as medically
 necessary for the dietary treatment of an inborn error
- 12 (3) Does not include a food that is naturally low in protein.
- "Medical food" means a food that is formulated to be
- 15 consumed or administered enterally under the supervision of a
- 16 physician or osteopathic physician, or a naturopathic physician
- 17 and is intended for the specific dietary management of a disease
- 18 or condition for which distinctive nutritional requirements,
- 19 based on recognized scientific principles, are established by
- 20 medical evaluation."
- 21 SECTION 7. Section 431:10A-206.5, Hawaii Revised Statutes,
- 22 is amended by amending subsection (e) to read as follows:

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- "(e) For the purposes of this section, "child health ['] 1 supervision services" means [physician-delivered, physician-2 supervised, or nurse-delivered services as defined by section 3 4 457-2 ("registered nurse")] services supervised by a physician 5 or osteopathic physician licensed pursuant to chapter 453 or 6 services delivered by a physician or osteopathic physician licensed pursuant to chapter 453, a naturopathic physician 7 licensed pursuant to chapter 455, or a registered nurse licensed 8 9 pursuant to chapter 457 which shall include as the minimum benefit coverage for services delivered at intervals and scope **10** 11 stated in this section." SECTION 8. Section 432:1-609, Hawaii Revised Statutes, is 12 13 amended to read as follows: 14 "§432:1-609 Medical foods and low-protein modified food products; treatment of inborn error of metabolism; notice. 15 16 All individual and group hospital and medical service plan 17 contracts and medical service corporation contracts under this chapter shall provide coverage for medical foods and low-protein 18 modified food products for the treatment of an inborn error of 19 20 metabolism for its members or dependents of the member in this 21 State; provided that the medical food or low-protein modified 22 food product is:
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1	(1)	Prescribed as medically necessary for the therapeutic
2		treatment of an inborn error of metabolism; and
3	(2)	Consumed or administered enterally under the
4		supervision of a physician or osteopathic physician
5		licensed under chapter 453[-] or a naturopathic
6		physician licensed under chapter 455.
7	Coverage	shall be for at least eighty per cent of the cost of
8	the medic	al food or low-protein modified food product prescribed
9	and admin	istered pursuant to this subsection.
10	(b)	Every mutual benefit society shall provide notice to
11	its membe	rs regarding the coverage required by this section.
12	The notic	e shall be in writing and prominently placed in any
13	literatur	e or correspondence sent to members and shall be
14	transmitt	ed to members during calendar year 2000 when annual

- 17 (c) For the purposes of this section:
- "Inborn error of metabolism" means a disease caused by an inherited abnormality of the body chemistry of a person that is characterized by deficient metabolism, originating from congenital defects or defects arising shortly after birth, of

information is made available to members, or in any other

mailing to members, but in no case later than December 31, 2000.

22 amino acid, organic acid, carbohydrate, or fat.

1	"Low	-protein modified food product" means a food product			
2	that:				
3	(1)	Is specially formulated to have less than one gram of			
4		protein per serving;			
5	(2)	Is prescribed or ordered by a physician or osteopathic			
6		physician, or a naturopathic physician as medically			
7		necessary for the dietary treatment of an inherited			
8		metabolic disease; and			
9	(3)	Does not include a food that is naturally low in			
10		protein.			
11	"Med	ical food" means a food that is formulated to be			
12	consumed	or administered enterally under the supervision of a			
13	physician or osteopathic physician, or a naturopathic physician				
14	and is intended for the specific dietary management of a disease				
15	or condition for which distinctive nutritional requirements,				
16	based on recognized scientific principles, are established by				
17	medical evaluation."				
18	SECTION 9. Section 432D-1, Hawaii Revised Statutes, is				
19	amended by amending the definition of "provider" to read as				
20	follows:				
21	""Provider" means any physician, hospital, or other person				
22	including	g a naturopathic physician practicing within the scope			

- 1 of licensure, licensed or otherwise authorized to furnish health
 2 care services."
- 3 SECTION 10. All health insurers subject to article 10A of
- 4 chapter 431, Hawaii Revised Statutes, all mutual benefit
- 5 societies and fraternal benefit societies subject to chapter
- 6 432, Hawaii Revised Statutes, and all health maintenance
- 7 organizations subject to chapter 432D, Hawaii Revised Statutes,
- 8 shall work collaboratively with the Board of Naturopathic
- 9 Medicine to establish standards and criteria for certifying
- 10 naturopathic physicians licensed pursuant to chapter 455 and
- 11 practicing within the scope of licensure as participating
- 12 providers under a contract to provide health care services to
- insureds or members no later than January 1, 2012, or the first
- 14 open enrollment period after January 1, 2012. A health insurer,
- 15 mutual benefit society, fraternal benefit society, or health
- 16 maintenance organization shall retain the right to determine
- 17 standards and criteria for certifying participating providers;
- 18 provided that standards and criteria for certifying
- 19 participating providers shall not categorically exclude
- 20 naturopathic physicians practicing within the scope of
- 21 licensure.

S.B. NO. 522 S.D. 1

SECTION 11. Statutory material to be repealed is bracketed and stricken. New statutory material is underscored.

SECTION 12. This Act shall take effect upon its approval; provided that sections 4 through 9 of this Act shall take effect on January 1, 2012.

Report Title:

Naturopathic Physician; Insurance

Description:

Specifies requirements for coverage of services provided by naturopathic physicians by health insurers, mutual benefit societies, fraternal benefit societies, and health maintenance organizations; makes conforming amendments. (SD1)

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