

HCS HB 1134 -- INSURANCE COVERAGE FOR OCCUPATIONAL, SPEECH, AND PHYSICAL THERAPY SERVICES

SPONSOR: Scharnhorst

COMMITTEE ACTION: Voted "do pass" by the Committee on Small Business by a vote of 21 to 0.

This substitute prohibits a health insurer from imposing a greater copayment, coinsurance, or deductible to an insured for covered services provided by a licensed occupational, speech, or physical therapist than that charged for the same covered services provided by a licensed primary care physician or an osteopath. A health insurer must clearly state the availability of occupational, speech, and physical therapy coverage under its plan and all related limitations, conditions, and exclusions.

FISCAL NOTE: No impact on General Revenue Fund in FY 2013, FY 2014, and FY 2015. Estimated Net Income on Other State Funds of Up to \$5,000 in FY 2013, \$0 in FY 2014, and \$0 in FY 2015.

PROPONENTS: Supporters say that despite the fact physical therapists are the front-line provider of medically necessary care, insurance companies consider them as specialists and charge the higher co-payment. Therapists get prescriptions from doctors to provide services for patients. High co-pays are severely decreasing physical therapy utilization which has been demonstrated by the increased use of medication, hospitalization, diagnostics, and surgery. As co-payments become increasingly higher, patients do not seek needed services or stop therapy before they are done. Physical therapy saves patients money and increases patient outcomes. Physical therapy rates paid by insurance providers have decreased. It is difficult for therapists to negotiate with the insurance industry.

Testifying for the bill were Representative Scharnhorst; Chris Marsh and Paula Burnett, Missouri Physical Therapy Association; Phil Threatt, Sport and Spine Rehab; Dawn Standley, American Physical Therapy; Robert Shawn Tucker; and Phillip Menendez.

OPPONENTS: Those who oppose the bill say that health insurance is very competitive, and insurance providers work with employers to try to provide coverage that they can afford for their employees. Employers choose the amount of co-pay, coinsurance, and deductibles based on price. An employer is looking at how to maximize its cost benefit for insurance. Since the employer is the one paying the bill, three things determine cost: cost share, employer premium, and employee premium. The more mandates created by the General Assembly that are put on the insurance industry, the higher the costs will go for insurance. For every

1% increase in insurance costs, 5,000 people cannot afford health insurance coverage.

Testifying against the bill were Coventry Health Care of Kansas, Incorporated; America's Health Insurance Plans; Missouri Insurance Coalition; Anthem Blue Cross Blue Shield of Missouri; Blue Cross Blue Shield of Kansas City; and Humana Incorporated.