

FEB 11 1999

COMMERCE AND REGULATION

HOUSE FILE 264
BY BLODGETT

Passed House, Date _____ Passed Senate, Date _____
Vote: Ayes _____ Nays _____ Vote: Ayes _____ Nays _____
Approved _____

A BILL FOR

1 An Act relating to third-party payment of health care coverage
2 costs for treatment of bones or joints of the skeletal
3 structure.

4 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

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HF 264

1 Section 1. NEW SECTION. 514C.14 TREATMENT COVERAGE FOR
2 BONES OR JOINTS OF SKELETAL STRUCTURE.

3 1. Notwithstanding section 514C.6, a policy or contract
4 providing for third-party payment or prepayment of health or
5 medical expenses for diagnostic or surgical procedures
6 involving a bone or joint of the skeletal structure shall
7 provide coverage for the same diagnostic or surgical
8 procedure, excluding intraoral prosthetic devices, involving a
9 bone or joint of the face, neck, or head, if under the
10 accepted standards of practice of the provider rendering such
11 services, the procedure is medically necessary to treat a
12 condition caused by congenital deformity, disease, or injury.

13 2. This section applies to the following classes of third-
14 party payment provider contracts or policies delivered, issued
15 for delivery, continued, or renewed in this state on or after
16 July 1, 1999:

17 a. Individual or group accident and sickness insurance
18 providing coverage on an expense-incurred basis.

19 b. An individual or group hospital or medical service
20 contract issued pursuant to chapter 509, 514, or 514A.

21 c. An individual or group health maintenance organization
22 contract regulated under chapter 514B.

23 d. An individual or group Medicare supplemental policy,
24 unless coverage pursuant to such policy is preempted by
25 federal law.

26 e. Any other entity engaged in the business of insurance,
27 risk transfer, or risk retention, which is subject to the
28 jurisdiction of the commissioner.

29 f. An organized delivery system licensed by the director
30 of public health.

31 EXPLANATION

32 This bill provides that a policy or contract providing for
33 third-party payment or prepayment of health or medical
34 expenses for diagnostic or surgical procedures involving a
35 bone or joint of the skeletal structure shall provide coverage

1 for the same diagnostic or surgical procedure, excluding
2 intraoral prosthetic devices, involving a bone or joint of the
3 face, neck, or head, if under the accepted standards of
4 practice of the provider rendering such services, the
5 procedure is medically necessary to treat a condition caused
6 by congenital deformity, disease, or injury. The bill
7 provides that the required coverage applies to third-party
8 payment provider contracts or policies delivered, issued for
9 delivery, continued, or renewed in this state on or after July
10 1, 1999.

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