

MAR 8 2005  
COMMERCE, REGULATION & LABOR

HOUSE FILE 638  
BY JOCHUM

Passed House, Date \_\_\_\_\_ Passed Senate, Date \_\_\_\_\_  
Vote: Ayes \_\_\_\_\_ Nays \_\_\_\_\_ Vote: Ayes \_\_\_\_\_ Nays \_\_\_\_\_  
Approved \_\_\_\_\_

**A BILL FOR**

1 An Act relating to patient access to providers under certain  
2 managed care health plans or indemnity plans.  
3 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

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HF 638

1 Section 1. NEW SECTION. 514C.22 PROVIDER ACCESS UNDER  
2 MANAGED CARE HEALTH PLAN OR INDEMNITY PLAN WITH LIMITED  
3 PROVIDER NETWORK.

4 1. A managed care health plan or indemnity plan with a  
5 limited provider network shall provide patients direct access  
6 to providers licensed under chapter 147, 148, 148A, 148C, 149,  
7 150, 150A, 151, 152, 153, 154, 154B, or 155A. Access to such  
8 provider shall not be made conditional upon a referral by a  
9 provider licensed under another chapter. Referral to a  
10 specialist may be conditioned upon referral by a primary care  
11 provider licensed under the same chapter. Access to a class  
12 of providers licensed under one chapter shall not be subject  
13 to a copayment, deductible, or premium rate different than  
14 provided for access to a class of providers licensed under  
15 another chapter. Access to a specialist may be subject to a  
16 different copayment or deductible than access to a primary  
17 care provider. Access to a nonparticipating provider may be  
18 restricted, or may be subject to different copayments,  
19 deductibles, or premium rates.

20 2. For purposes of this section, "managed care health plan  
21 or indemnity plan with a limited provider network" means a  
22 health maintenance organization, accountable health plan,  
23 preferred provider organization, exclusive provider  
24 organization, point of service plan, or similar health plan.

25 3. This section does not apply if an employer offers  
26 employees a choice of health plans, either directly or  
27 indirectly through a health insurance purchasing cooperative,  
28 provided that the offered choices include at least one  
29 indemnity plan which includes an unrestricted choice of  
30 providers, or at least one managed care health plan or  
31 indemnity plan with a limited provider network which provides  
32 access as otherwise required by this section.

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EXPLANATION

34 New Code section 514C.22 provides that a managed care  
35 health plan or indemnity plan with a limited provider network

1 must provide patients direct access to certain licensed  
2 physicians, physical and occupational therapists, physician  
3 assistants, podiatrists, osteopathic physicians,  
4 chiropractors, nurses, dietitians, dentists, optometrists,  
5 psychologists, and pharmacists. The Code section does not  
6 apply if an employer offers employees a choice of health  
7 plans, either directly or indirectly through a health  
8 insurance purchasing cooperative, provided that the offered  
9 choices include at least one indemnity plan which includes an  
10 unrestricted choice of provider, or at least one managed care  
11 health plan or indemnity plan with a limited provider network  
12 which provides access as otherwise required by this section.

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