

House File 2196 - Introduced

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BY BEST

A BILL FOR

1 An Act relating to insurance coverage for the maintenance and
2 repair of complex rehabilitation technology wheelchairs.
3 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1 Section 1. NEW SECTION. 514M.1 Definitions.

2 For purposes of this chapter, unless the context otherwise
3 requires:

4 1. "*Commissioner*" means the commissioner of insurance.

5 2. "*Complex rehabilitation technology wheelchair*" means
6 a complex rehabilitation manual or power wheelchair that is
7 individually configured for a consumer to meet the consumer's
8 specific and unique medical, physical, and functional needs
9 and capacities for basic activities of daily living and
10 instrumental activities of daily living identified as medically
11 necessary, and includes the options and accessories related to
12 the complex rehabilitation manual or power wheelchair.

13 3. "*Consumer*" means a covered person or a patient who uses a
14 complex rehabilitation technology wheelchair.

15 4. "*Covered person*" means a policyholder, subscriber, or
16 other person participating in a policy, contract, or plan that
17 provides for third-party payment or prepayment of health or
18 medical expenses.

19 5. "*Department*" means the department of health and human
20 services.

21 6. "*Health care professional*" means the same as defined in
22 section 514J.102.

23 7. "*Health carrier*" means an entity subject to the
24 insurance laws and regulations of this state, or subject
25 to the jurisdiction of the commissioner, including an
26 insurance company offering sickness and accident plans, a
27 health maintenance organization, a nonprofit health service
28 corporation, a plan established pursuant to chapter 509A
29 for public employees, or any other entity providing a plan
30 of health insurance, health care benefits, or health care
31 services.

32 8. "*Medical assistance*" means the same as defined in section
33 249A.2.

34 9. "*Patient*" means an individual who resides in the
35 state, who is a recipient, and who has a diagnosis or medical

1 condition that results in significant physical impairment or
2 functional limitation.

3 10. *"Preventative maintenance"* means the regular and
4 routine maintenance of a complex rehabilitation technology
5 wheelchair, as described in the owner's manual, to ensure the
6 complex rehabilitation technology wheelchair maintains its
7 original design quality, function, and utility. *"Preventative*
8 *maintenance"* may include but is not limited to:

9 a. An assessment and evaluation of the working condition of
10 the complex rehabilitation technology wheelchair.

11 b. Any necessary adjustment or repairs, including necessary
12 replacement parts, to the complex rehabilitation technology
13 wheelchair.

14 11. *"Qualified complex rehabilitation technology*
15 *professional"* means an individual who is certified as an
16 assistive technology professional by the rehabilitation
17 engineering and assistive technology society of North America.

18 12. *"Qualified complex rehabilitation technology wheelchair*
19 *supplier"* or *"qualified supplier"* means an entity that meets all
20 of the following criteria:

21 a. The entity is accredited by a recognized accrediting
22 organization as a supplier of complex rehabilitation technology
23 wheelchairs.

24 b. The entity employs at least one qualified complex
25 rehabilitation technology professional to analyze the needs and
26 capacities of a consumer in consultation with the consumer's
27 prescribing health care professional, to participate in the
28 selection of an appropriate complex rehabilitation technology
29 wheelchair for the needs and capacities of the consumer,
30 and to provide training in the proper use of the complex
31 rehabilitation technology wheelchair.

32 c. The entity has the capability to provide service and
33 repairs, performed by trained technicians, for all complex
34 rehabilitation technology wheelchairs sold by the qualified
35 supplier.

1 *d.* At the time of delivery of a complex rehabilitation
2 technology wheelchair to a consumer, the entity provides
3 written information that explains how the consumer may receive
4 service, repairs, and annual preventative maintenance for the
5 complex rehabilitation technology wheelchair.

6 13. "*Recipient*" means a person who receives medical
7 assistance under chapter 249A.

8 14. "*Third-party payor*" means health carriers and
9 other entities that provide, administer, or perform prior
10 authorization or claims processing for a plan of health
11 insurance or health care benefits.

12 Sec. 2. NEW SECTION. 514M.2 **Complex rehabilitation**
13 **technology wheelchairs — service and repairs.**

14 1. Beginning January 1, 2025, a qualified complex
15 rehabilitation technology wheelchair supplier that provides
16 a complex rehabilitation technology wheelchair to a consumer
17 shall be required to provide service and repairs of the
18 complex rehabilitation technology wheelchair as requested
19 by the consumer, or the consumer's prescribing health care
20 professional, in accordance with the consumer's health
21 carrier coverage and payment policies, except in the following
22 circumstances:

23 *a.* The consumer moves out of the service area after
24 receiving the complex rehabilitation technology wheelchair.

25 *b.* The consumer presents a safety risk to the qualified
26 supplier.

27 2. A third-party payor shall not require any of the
28 following in order for a qualified complex rehabilitation
29 technology wheelchair supplier to provide service and repairs
30 under this section:

31 *a.* Prior authorization.

32 *b.* Documentation of continued medical necessity by a health
33 care professional.

34 3. Documentation of all service and repairs completed by a
35 qualified complex rehabilitation technology wheelchair supplier

1 under this section shall be maintained by the qualified
2 supplier.

3 **Sec. 3. NEW SECTION. 514M.3 Complex rehabilitation**
4 **technology wheelchairs — annual preventative maintenance.**

5 1. Beginning July 1, 2025, a qualified complex
6 rehabilitation technology wheelchair supplier that provides
7 a complex rehabilitation technology wheelchair to a consumer
8 may offer annual preventative maintenance on the complex
9 rehabilitation technology wheelchair in accordance with
10 manufacturer guidelines.

11 2. At a minimum, a third-party payor shall provide coverage
12 and payment for complex rehabilitation technology wheelchair
13 preventative maintenance services on an annual basis, including
14 any labor, part, diagnostic evaluation, travel, or other
15 related costs.

16 3. A third-party payor shall not require prior
17 authorization or medical necessity documentation to cover the
18 cost of preventative maintenance services for a consumer's
19 complex rehabilitation technology wheelchair.

20 4. Documentation of all preventative maintenance services
21 performed by a qualified complex rehabilitation technology
22 wheelchair supplier pursuant to this section shall be
23 maintained by the qualified supplier.

24 5. All preventative maintenance shall be performed by a
25 trained technician who is an employee of the qualified complex
26 rehabilitation technology wheelchair supplier.

27 **Sec. 4. NEW SECTION. 514M.4 Third-party payors —**
28 **applicability.**

29 1. This chapter applies to the following classes of
30 third-party payor contracts, policies, or plans delivered,
31 issued for delivery, continued, or renewed in this state on or
32 after January 1, 2025:

33 *a.* Individual or group accident and sickness insurance
34 providing coverage on an expense-incurred basis.

35 *b.* An individual or group hospital or medical service

1 contract issued pursuant to chapter 509, 514, or 514A.

2 *c.* An individual or group health maintenance organization
3 contract regulated under chapter 514B.

4 *d.* A plan established for public employees pursuant to
5 chapter 509A.

6 *e.* The medical assistance program under chapter 249A
7 including all managed care organizations acting pursuant to a
8 contract with the department of health and human services to
9 administer the medical assistance program.

10 2. This chapter shall not apply to accident-only,
11 specified disease, short-term hospital or medical, hospital
12 confinement indemnity, credit, dental, vision, Medicare
13 supplement, long-term care, basic hospital and medical-surgical
14 expense coverage as defined by the commissioner, disability
15 income insurance coverage, coverage issued as a supplement
16 to liability insurance, workers' compensation or similar
17 insurance, or automobile medical payment insurance.

18 **Sec. 5. NEW SECTION. 514M.5 Task force — reimbursement**
19 **rates.**

20 1. The division and the department shall form a task
21 force whose members shall include the commissioner or the
22 commissioner's designee, the director or the director's
23 designee, two representatives from qualified complex
24 rehabilitation technology wheelchair suppliers, two
25 representatives from rehabilitation technology wheelchair
26 manufacturers, two consumers or the consumers' legal
27 representatives, and two representatives from third-party
28 payors. All members of the task force shall be reimbursed for
29 all actual and necessary expenses incurred in the performance
30 of duties as a member of the task force.

31 2. The task force shall annually review and determine all
32 of the following:

33 *a.* The coverage and reimbursement of service and repairs
34 under section 514M.2. The coverage and reimbursement shall
35 include all related diagnostic and evaluation time, related

1 labor, necessary parts, and reasonable travel time.

2 *b.* The reimbursement for preventative maintenance under
3 section 514M.3. The reimbursement shall include all related
4 diagnostic and evaluation time, related labor, necessary parts,
5 and reasonable travel time.

6 *c.* The scope of the preventative maintenance required under
7 section 514M.3.

8 **Sec. 6. NEW SECTION. 514M.6 Rules.**

9 The division and the department shall adopt joint rules
10 pursuant to chapter 17A as necessary to administer this
11 chapter.

12 **EXPLANATION**

13 The inclusion of this explanation does not constitute agreement with
14 the explanation's substance by the members of the general assembly.

15 This bill relates to insurance coverage for the maintenance
16 and repair of complex rehabilitation technology wheelchairs.

17 Beginning January 1, 2025, the bill requires a qualified
18 complex rehabilitation technology wheelchair supplier
19 (qualified supplier) that provides a complex rehabilitation
20 technology wheelchair (wheelchair) to a consumer to provide
21 service and repairs on the wheelchair as requested by
22 the consumer, or the consumer's prescribing health care
23 professional, except in the circumstances detailed in the bill.
24 "Qualified supplier", "consumer", and "complex rehabilitation
25 technology wheelchair" are defined in the bill.

26 The bill prohibits a third-party payor from requiring prior
27 authorization or documentation of continued medical necessity
28 in order for a qualified supplier to provide service and
29 repairs under the bill. "Third-party payor" is defined in the
30 bill.

31 Documentation of all service and repairs completed by a
32 qualified supplier under the bill shall be maintained by the
33 qualified supplier.

34 Beginning July 1, 2025, a qualified supplier that provides
35 a wheelchair to a consumer may offer annual preventative

1 maintenance (PM) on the wheelchair, in accordance with
2 manufacturer guidelines. A third-party payor shall not
3 require prior authorization or documentation of continued
4 medical necessity in order for a qualified supplier to perform
5 annual PM. Documentation of all PM shall be maintained by the
6 qualified supplier.

7 The bill applies to third-party payment providers enumerated
8 in the bill, including the medical assistance program (program)
9 under Code chapter 249A and managed care organizations acting
10 pursuant to a contract with the department of health and human
11 services (HHS) to administer the program. The bill specifies
12 the types of specialized health-related insurance which are not
13 subject to the bill.

14 The bill requires the division of insurance (division) and
15 HHS to form a task force made up of members as detailed in the
16 bill. All members of the task force shall be reimbursed for
17 all actual and necessary expenses incurred in the performance
18 of duties as a member of the task force. The task force shall
19 annually review and determine the coverage and reimbursement
20 for service and repairs completed under the bill, and the rates
21 shall include all related evaluation and diagnostic time,
22 labor, necessary parts, and reasonable travel time.

23 The division and HHS shall adopt joint rules as necessary to
24 administer the bill.