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State of Minnesota
HOUSE OF REPRESENTATIVES

**EIGHTY-SIXTH
SESSION**

HOUSE FILE No. 286

January 26, 2009

Authored by Clark, Abeler, Hosch, Kahn, Carlson and others

The bill was read for the first time and referred to the Committee on Health Care and Human Services Policy and Oversight

March 12, 2009

Committee Recommendation and Adoption of Report:

To Pass and re-referred to the Committee on Commerce and Labor

March 26, 2009

Committee Recommendation and Adoption of Report:

To Pass

Read Second Time

1.1 A bill for an act
1.2 relating to insurance; providing equal access to acupuncture and a memorial to
1.3 Edith R. Davis, Minnesota's pioneer acupuncturist; requiring equal access to
1.4 acupuncture services by certain group policies and subscriber contracts; requiring
1.5 claim determinations regarding acupuncture services to be made or reviewed
1.6 by acupuncture practitioners; requiring reporting on referrals to acupuncture
1.7 practitioners and reimbursement rates; amending Minnesota Statutes 2008,
1.8 section 62A.15, subdivision 4, by adding a subdivision; proposing coding for
1.9 new law in Minnesota Statutes, chapter 62D.

1.10 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.11 Section 1. Minnesota Statutes 2008, section 62A.15, is amended by adding a
1.12 subdivision to read:

1.13 Subd. 3b. **Acupuncture services.** (a) This subdivision, subdivision 4, and section
1.14 62D.107 may be cited as the Equal Access to Acupuncture Act and as a memorial to Edith
1.15 R. Davis, Minnesota's pioneer acupuncturist.

1.16 (b) All benefits provided by a policy or contract referred to in subdivision 1 relating
1.17 to expenses for acupuncture services that are provided by a physician must also include
1.18 acupuncture treatment and services of a licensed acupuncture practitioner to the extent that
1.19 the acupuncture services and treatment are within the scope of acupuncture practitioner
1.20 licensure.

1.21 This subdivision is intended to provide equal access to benefits for insureds and
1.22 subscribers who choose to directly obtain treatment for illness or injury from a licensed
1.23 acupuncture practitioner, as long as the treatment falls within the scope of practice of the
1.24 licensed acupuncture practitioner.

1.25 This subdivision is not intended to change or add to the benefits provided for in
1.26 these policies or contracts.

2.1 **EFFECTIVE DATE.** This section is effective August 1, 2009, and applies to
 2.2 coverage issued; renewed; or continued as defined in Minnesota Statutes, section 60A.02,
 2.3 subdivision 2a; on or after that date.

2.4 Sec. 2. Minnesota Statutes 2008, section 62A.15, subdivision 4, is amended to read:

2.5 Subd. 4. **Denial of benefits.** (a) No carrier referred to in subdivision 1 may, in the
 2.6 payment of claims to employees in this state, deny benefits payable for services covered
 2.7 by the policy or contract if the services are lawfully performed by a licensed chiropractor,
 2.8 licensed optometrist, ~~or~~ a registered nurse meeting the requirements of subdivision 3a, or a
 2.9 licensed acupuncture practitioner.

2.10 (b) When carriers referred to in subdivision 1 make claim determinations concerning
 2.11 the appropriateness, quality, or utilization of chiropractic health care for Minnesotans, any
 2.12 of these determinations that are made by health care professionals must be made by, or
 2.13 under the direction of, or subject to the review of licensed doctors of chiropractic.

2.14 (c) When a carrier referred to in subdivision 1 makes a denial of payment claim
 2.15 determination concerning the appropriateness, quality, or utilization of acupuncture
 2.16 services for individuals in this state performed by a licensed acupuncture practitioner, a
 2.17 denial of payment claim determination that is made by a health professional must be made
 2.18 by, under the direction of, or subject to the review of a licensed acupuncture practitioner.

2.19 **EFFECTIVE DATE.** This section is effective August 1, 2009, and applies to
 2.20 coverage issued; renewed; or continued as defined in Minnesota Statutes, section 60A.02,
 2.21 subdivision 2a; on or after that date.

2.22 Sec. 3. **[62D.107] EQUAL ACCESS TO ACUPUNCTURE SERVICES.**

2.23 Subdivision 1. **Coverage.** All benefits provided by a health maintenance contract
 2.24 relating to expenses incurred for acupuncture services that are provided by a physician
 2.25 must also include acupuncture treatment and services of a licensed acupuncture
 2.26 practitioner to the extent that the acupuncture services and treatment are within the scope
 2.27 of acupuncture practitioner licensure. This subdivision ensures equal access to benefits for
 2.28 enrollees who choose to directly obtain treatment for illness and injury from a licensed
 2.29 acupuncture practitioner, as long as the treatment falls within the scope of practice of the
 2.30 licensed acupuncture practitioner.

2.31 This subdivision is not intended to change or add to the benefits provided for in
 2.32 these policies or contracts.

2.33 Subd. 2. **Denial of benefits.** (a) In the payment of claims for enrollees in this state,
 2.34 no health maintenance organization may deny payment for acupuncture services covered

3.1 by an enrollee's health maintenance contract if the services are lawfully performed by a
3.2 licensed acupuncture practitioner.

3.3 (b) When a health maintenance organization makes a denial of payment claim
3.4 determination concerning the appropriateness, quality, or utilization of acupuncture
3.5 services for enrollees in this state performed by a licensed acupuncture practitioner, the
3.6 determination must be made by, under the direction of, or subject to the review of a
3.7 licensed acupuncture practitioner.

3.8 **EFFECTIVE DATE.** This section is effective August 1, 2009, and applies to
3.9 coverage issued; renewed; or continued as defined in Minnesota Statutes, section 60A.02,
3.10 subdivision 2a; on or after that date.