FINAL BILL REPORT ESB 5518

C 181 L 18

Synopsis as Enacted

Brief Description: Requiring fair reimbursement for chiropractic services.

Sponsors: Senators Miloscia, Cleveland, Keiser, O'Ban and Fortunato.

Senate Committee on Health Care Senate Committee on Ways & Means House Committee on Health Care & Wellness

Background: Legislation passed in 2008 placed limitations on health insurance carriers' payment methodologies for chiropractic services. Health carriers may not use a payment method that pays chiropractors less than another type of provider for the same physical medicine and rehabilitation code or evaluation and management code. The carrier may not circumvent the requirement by creating a chiropractor-specific code not listed in the nationally recognized code book otherwise used by the carrier for provider payment.

Summary: Beginning January 1, 2019, regulated health insurance carriers must not pay a chiropractor less than another type of provider for the same or substantially similar physical medicine and rehabilitation code, evaluation and management code, or spinal manipulation code.

The section does not affect a carrier's authority to pay a chiropractor less based on differences in maintaining a practice or carrying malpractice insurance, under a nationally accepted payment methodology.

The Office of the Insurance Commissioner may adopt rules to implement this requirement.

Votes on Final Passage:

Senate 45 3

House 86 12 (House amended) Senate 49 0 (Senate concurred)

Effective: June 7, 2018

January 1, 2019 (Section 1)

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

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