

**GENERAL ASSEMBLY OF NORTH CAROLINA
SESSION 2007**

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HOUSE BILL 1307

Short Title: Reenact Chiropractic Provision. (Public)

Sponsors: Representatives Parmon, Rapp, Sutton, Holliman (Primary Sponsors); Allred, Braxton, Brown, Bryant, Carney, Church, Coates, Cole, Coleman, Cunningham, Farmer-Butterfield, Fisher, Goforth, Hall, T. Harrell, Hurley, Insko, Jones, Kiser, Lucas, McAllister, McGee, McLawhorn, Mobley, Owens, Pate, Pierce, Ross, Saunders, Setzer, Tarleton, Tucker, Underhill, Wainwright, Walker, E. Warren, Williams, Womble, Wray, and Wright.

Referred to: Insurance, if favorable, Health.

April 5, 2007

A BILL TO BE ENTITLED
AN ACT TO REENACT A LAW CONCERNING HEALTH BENEFIT PLAN
CO-PAYMENTS FOR CHIROPRACTIC SERVICES.

The General Assembly of North Carolina enacts:

SECTION 1. G.S. 58-50-30(a3) reads as rewritten:

"(a3) Whenever any health benefit plan, subscriber contract, or policy of insurance issued by a health maintenance organization, hospital or medical service corporation, or insurer governed by Articles 1 through 67 of this Chapter provides coverage for medically necessary treatment, the insurer shall not impose any limitation on treatment or levels of coverage if performed by a duly licensed chiropractor acting within the scope of the chiropractor's practice as defined in G.S. 90-151 unless a comparable limitation is imposed on the medically necessary treatment if performed or authorized by any other duly licensed physician. An insurer shall not impose as a limitation on treatment or level of coverage a co-payment amount charged to the insured for chiropractic services that is higher than the co-payment amount charged to the insured for the services of a duly licensed primary care physician for a comparable medically necessary treatment or condition."

SECTION 3. This act becomes effective October 1, 2007, and applies to policies issued or renewed on or after that date. For the purposes of this act, renewal of a health benefit plan is presumed to occur on each anniversary of the date on which coverage was first effective on the person or persons covered by the health benefit plan.