**South Carolina General Assembly**

120th Session, 2013-2014

**H. 4228**

**STATUS INFORMATION**

General Bill

Sponsors: Rep. Gambrell

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Introduced in the House on May 23, 2013

Currently residing in the House Committee on **Labor, Commerce and Industry**

Summary: Health Insurance

**HISTORY OF LEGISLATIVE ACTIONS**

Date Body Action Description with journal page number

5/23/2013 House Introduced and read first time ([House Journal‑page 68](file:///h:\HJ%20Archive\2013\05-23-13.docx))

5/23/2013 House Referred to Committee on **Labor, Commerce and Industry** ([House Journal‑page 68](file:///h:\HJ%20Archive\2013\05-23-13.docx))

**VERSIONS OF THIS BILL**

[5/23/2013](file:///p:\pprever\2013-14\4228_20130523.docx)

**A** **BILL**

TO AMEND THE CODE OF LAWS OF SOUTH CAROLINA, 1976, BY ADDING SECTION 38‑71‑295 SO AS TO PROVIDE THAT THE PROVIDER OF HEALTH INSURANCE MAY NOT IMPOSE A COPAYMENT, COINSURANCE, OR OFFICE VISIT DEDUCTIBLE AMOUNT CHARGED TO AN INSURED FOR SERVICE RENDERED ON EACH DATE OF SERVICE BY AN OCCUPATIONAL THERAPIST OR PHYSICAL THERAPIST, TO PROVIDE FOR THE APPLICABLE SCOPE OF THE ARTICLE, AND TO PROVIDE NECESSARY DEFINITIONS.

Be it enacted by the General Assembly of the State of South Carolina:

SECTION 1. Article 1, Chapter 71, Title 38 of the 1976 Code is amended by adding:

“Section 38‑71‑295. (A) This section applies to an individual health plan, a group health plan, a health benefit plan, including the State Health Plan, a multiple employer self‑insured health plan, and a health maintenance organization contract that is delivered, issued for delivery, or renewed in this State and which provides health insurance coverage.

(B) For the purposes of this section:

(1) ‘Copayment’ or ‘deductible’ means the amount specified in the evidence of coverage that the enrollee shall pay directly to the provider for covered health care services, which may be stated in either specific dollar amounts or as a percentage of the negotiated rate or lesser charge of the provider.

(2) ‘Coinsurance’ means a stipulation or requirement that the insured undertakes to be his own insurer to the extent that he fails to maintain insurance of a given percentage of the value of the property against loss or damage.

(3) ‘Occupational therapist’ means a person licensed to practice occupational therapy in this State by the Board of Occupational Therapy pursuant to the provisions of Chapter 36, Title 40.

(4) ‘Physical therapist’ means a person licensed to practice physical therapy in this State by the Board of Physical Therapy Examiners pursuant to the provisions of Chapter 45, Title 40.

(5) ‘Primary care physician’ means a doctor of medicine or doctor of osteopathic medicine licensed by the South Carolina Board of Medical Examiners pursuant to Chapter 47, Title 40 and who supervises, coordinates, and provides initial and basic care to patients, and initiates their referral for specialist care and maintains continuity of patient care.

(C) An insurer:

(1) may not impose a copayment, coinsurance, or office visit deductible amount charged to the insured for service rendered for each date of service by an occupational therapist or physical therapist that exceeds the copayment, coinsurance, or office visit deductible amount charged to the insured for the services of a primary care physician or primary care osteopathic physician; and

(2) shall state clearly in writing the availability of physical therapy under a plan or contract to which this section is applicable.”

SECTION 2. This act takes effect ninety days following approval by the Governor.

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