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HOUSE BILL NO. 914

Offered January 24, 2000

A BILL to amend and reenact § 38.2-3411.1 and § 38.2-4319, as it is effective and as it will become effective, of the Code of Virginia and to amend the Code of Virginia by adding a section numbered 38.2-3411.3, relating to health care coverage; childhood immunizations.

Patrons—Bryant, Byron, Callahan, Clement, Hall, Hargrove, Johnson, Jones, J.C., Jones, S.C., Kilgore, Morgan, Parrish, Plum, Purkey, Scott, Shuler, Tata and Woodrum

Referred to Committee on Corporations, Insurance and Banking

Be it enacted by the General Assembly of Virginia:

1. That § 38.2-3411.1 and § 38.2-4319, as it is effective and as it will become effective, of the Code of Virginia are amended and reenacted, and that the Code of Virginia is amended by adding a section numbered 38.2-3411.3 as follows:

§ 38.2-3411.1. Coverage for child health supervision services.

A. Every individual or group accident and sickness insurance policy, subscription contract providing coverage under a health services plan, or evidence of coverage of a health care plan delivered or issued for delivery in the Commonwealth or renewed, reissued, or extended if already issued, shall offer and make available coverage under such policy or plan for child health supervision services to provide for the periodic examination of children covered under such policy or plan.

B. As used in this section, the term "child health supervision services" means the periodic review of a child's physical and emotional status by a licensed and qualified physician or pursuant to a physician's supervision. A review shall include but not be limited to a history, complete physical examination, developmental assessment, anticipatory guidance, ~~appropriate immunizations~~, and laboratory tests in keeping with prevailing medical standards.

C. Each such policy or plan, offering and making available such coverage, shall, at a minimum, provide benefits for child health supervision services at approximately the following age intervals: birth, two months, four months, six months, nine months, twelve months, fifteen months, eighteen months, two years, three years, four years, five years, and six years. A policy or plan may provide that child health supervision services which are rendered during a periodic review shall only be covered to the extent that such services are provided by or under the supervision of a single physician during the course of one visit.

D. Benefits for coverage for child health supervision services shall be exempt from any copayment, coinsurance, deductible, or other dollar limit provision in the policy or plan. Such exemption shall be expressly stated on the policy, plan, rider, endorsement, or other attachment providing such coverage.

E. The premiums for such coverage shall take into consideration (i) the cost of providing such coverage, (ii) cost savings realized or likely to be realized as a consequence of such coverage, (iii) a reasonable profit for the insurer, and (iv) any other relevant information or data the Commission deems appropriate.

F. This section shall not apply to any insurer or health services plan having fewer than 1,000 covered individuals insured or covered in Virginia or less than \$500,000 in premiums in Virginia as of its last annual statement nor to specified disease, hospital indemnity or other limited benefit policies issued to provide supplemental benefits to a policy providing primary care benefits.

§ 38.2-3411.3. Coverage for childhood immunizations.

A. *Notwithstanding the provisions of § 38.2-3419, each insurer proposing to issue individual or group accident and sickness insurance policies providing hospital, medical and surgical, or major medical coverage on an expense-incurred basis; each corporation providing individual or group accident and sickness subscription contracts; and each health maintenance organization providing a health care plan for health care services shall provide coverage for all routine and necessary immunizations for newborn children under such policy, contract or plan delivered, issued for delivery or renewed in this Commonwealth on and after July 1, 2000.*

B. *The required benefits shall apply to immunizations administered to each newborn child from birth to thirty-six months of age.*

C. *The required benefits shall not be subject to any deductible, copayment, coinsurance or other dollar limit provision in the policy or plan. Such exemption shall be expressly stated on the policy, plan, rider, endorsement, or other attachment providing such coverage.*

D. *For the purpose of this section, "routine and necessary immunizations" means immunizations against diphtheria, pertussis, tetanus, polio, hepatitis B, measles, mumps, rubella, and other such*

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60 immunizations as may be prescribed by the Commissioner of Health.

61 *E. The provisions of this section shall not apply to short-term travel, accident-only, limited or*
62 *specified disease policies, or contracts designed for issuance to persons eligible for coverage under Title*
63 *XVIII of the Social Security Act, known as Medicare, or any other similar coverage under state or*
64 *federal governmental plans, or to short-term nonrenewable policies of not more than six months'*
65 *duration.*

66 § 38.2-4319. (Effective until July 1, 2004) Statutory construction and relationship to other laws.

67 A. No provisions of this title except this chapter and, insofar as they are not inconsistent with this
68 chapter, §§ 38.2-100, 38.2-200, 38.2-203, 38.2-210 through 38.2-213, 38.2-218 through 38.2-225,
69 38.2-229, 38.2-232, 38.2-305, 38.2-316, 38.2-322, 38.2-400, 38.2-402 through 38.2-413, 38.2-500
70 through 38.2-515, 38.2-600 through 38.2-620, Chapter 9 (§ 38.2-900 et seq.), §§ 38.2-1057, 38.2-1306.2
71 through 38.2-1309, Articles 4 (§ 38.2-1317 et seq.) and 5 (§ 38.2-1322 et seq.) of Chapter 13, Articles 1
72 (§ 38.2-1400 et seq.) and 2 (§ 38.2-1412 et seq.) of Chapter 14, §§ 38.2-1800 through 38.2-1836,
73 38.2-3401, 38.2-3405, 38.2-3405.1, 38.2-3407.2 through 38.2-3407.6:1, 38.2-3407.9 through
74 38.2-3407.16, 38.2-3411.2, 38.2-3411.3, 38.2-3412.1:01, 38.2-3414.1, 38.2-3418.1 through 38.2-3418.11,
75 38.2-3419.1, 38.2-3430.1 through 38.2-3437, 38.2-3500, 38.2-3514.1, 38.2-3514.2, §§ 38.2-3522.1
76 through 38.2-3523.4, 38.2-3525, 38.2-3542, 38.2-3543.2, Chapter 53 (§ 38.2-5300 et seq.), Chapter 58
77 (§ 38.2-5800 et seq.) and Chapter 59 (§ 38.2-5900 et seq.) of this title shall be applicable to any health
78 maintenance organization granted a license under this chapter. This chapter shall not apply to an insurer
79 or health services plan licensed and regulated in conformance with the insurance laws or Chapter 42
80 (§ 38.2-4200 et seq.) of this title except with respect to the activities of its health maintenance
81 organization.

82 B. Solicitation of enrollees by a licensed health maintenance organization or by its representatives
83 shall not be construed to violate any provisions of law relating to solicitation or advertising by health
84 professionals.

85 C. A licensed health maintenance organization shall not be deemed to be engaged in the unlawful
86 practice of medicine. All health care providers associated with a health maintenance organization shall
87 be subject to all provisions of law.

88 D. Notwithstanding the definition of an eligible employee as set forth in § 38.2-3431, a health
89 maintenance organization providing health care plans pursuant to § 38.2-3431 shall not be required to
90 offer coverage to or accept applications from an employee who does not reside within the health
91 maintenance organization's service area.

92 § 38.2-4319. (Effective July 1, 2004) Statutory construction and relationship to other laws.

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100 38.2-3407.16, 38.2-3411.2, 38.2-3411.3, 38.2-3414.1, 38.2-3418.1 through 38.2-3418.11, 38.2-3419.1,
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