HOUSE BILL 667

C3 7lr2916
HB 113/16 – HGO

By: **Delegates Carr, Angel, Frick, Gutierrez, Hill, Jalisi, A. Miller, Robinson, Sophocleus, and K. Young**
Introduced and read first time: February 1, 2017
Assigned to: Health and Government Operations

A BILL ENTITLED

AN ACT concerning

Health Insurance – Coverage for Lymphedema Diagnosis, Evaluation, and Treatment

FOR the purpose of requiring insurers, nonprofit health service plans, and health maintenance organizations that provide certain health insurance benefits under certain insurance policies or contracts to provide coverage for certain diagnosis, evaluation, and treatment of lymphedema; providing that the required coverage may be subject to certain deductibles, copayments, and coinsurance; providing for the application of this Act; defining a certain term; and generally relating to coverage for lymphedema diagnosis, evaluation, and treatment under health insurance.

BY adding to
Article – Insurance
Section 15–850
Annotated Code of Maryland
(2011 Replacement Volume and 2016 Supplement)

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:

Article – Insurance

15–850.

(A) (1) IN THIS SECTION, "GRADIENT COMPRESSION GARMENT" MEANS A GARMENT THAT:

(I) IS USED FOR THE TREATMENT OF LYMPHEDEMA;

EXPLANATION: **CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.**
[Brackets**]** indicate matter deleted from existing law.

(II) REQUIRES A PRESCRIPTION; AND

(III) IS CUSTOM FIT FOR THE INDIVIDUAL FOR WHOM IT IS PRESCRIBED.

(2) "GRADIENT COMPRESSION GARMENT" DOES NOT INCLUDE DISPOSABLE MEDICAL SUPPLIES, INCLUDING OVER–THE–COUNTER COMPRESSION OR ELASTIC KNEE–HIGH OR OTHER STOCKING PRODUCTS.

(B) THIS SECTION APPLIES TO:

(1) INSURERS AND NONPROFIT HEALTH SERVICE PLANS THAT PROVIDE HOSPITAL, MEDICAL, OR SURGICAL BENEFITS TO INDIVIDUALS OR GROUPS ON AN EXPENSE–INCURRED BASIS UNDER HEALTH INSURANCE POLICIES OR CONTRACTS THAT ARE ISSUED OR DELIVERED IN THE STATE; AND

(2) HEALTH MAINTENANCE ORGANIZATIONS THAT PROVIDE HOSPITAL, MEDICAL, OR SURGICAL BENEFITS TO INDIVIDUALS OR GROUPS UNDER CONTRACTS THAT ARE ISSUED OR DELIVERED IN THE STATE.

(C) AN ENTITY SUBJECT TO THIS SECTION SHALL PROVIDE COVERAGE FOR THE MEDICALLY NECESSARY DIAGNOSIS, EVALUATION, AND TREATMENT OF LYMPHEDEMA, INCLUDING EQUIPMENT, SUPPLIES, COMPLEX DECONGESTIVE THERAPY, GRADIENT COMPRESSION GARMENTS, AND SELF–MANAGEMENT TRAINING AND EDUCATION.

(D) (1) SUBJECT TO PARAGRAPH (2) OF THIS SUBSECTION, THE COVERAGE REQUIRED UNDER THIS SECTION MAY BE SUBJECT TO THE ANNUAL DEDUCTIBLES, COPAYMENTS, OR COINSURANCE REQUIREMENTS IMPOSED BY AN ENTITY SUBJECT TO THIS SECTION FOR SIMILAR COVERAGES UNDER THE SAME HEALTH INSURANCE POLICY OR CONTRACT.

(2) THE ANNUAL DEDUCTIBLES, COPAYMENTS, OR COINSURANCE REQUIREMENTS IMPOSED UNDER PARAGRAPH (1) OF THIS SUBSECTION FOR THE COVERAGE REQUIRED UNDER THIS SECTION MAY NOT BE GREATER THAN THE ANNUAL DEDUCTIBLES, COPAYMENTS, OR COINSURANCE REQUIREMENTS IMPOSED BY THE ENTITY FOR SIMILAR COVERAGES.

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall apply to all policies, contracts, and health benefit plans issued, delivered, or renewed in the State on or after October 1, 2017.

SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2017.