304.17A-171 Requirements for health benefit plans that include chiropractic benefits.

A health benefit plan that includes chiropractic benefits shall:

- (1) Include all primary chiropractic providers who are selected by covered persons of the plan for the provision of all chiropractic benefits provided by the plan which fall within the statutory scope of practice of the respective primary chiropractic provider.
- (2) Permit any licensed chiropractor who agrees to abide by the terms, conditions, reimbursement rates, and standards of quality of the health benefit plan to serve as a participating primary chiropractic provider to any person covered by the plan.
- (3) Guarantee that all covered persons who are eligible for chiropractic benefits under a health benefit plan shall have direct access to the primary chiropractic provider of their choice independent of, and without referral from, any other provider or entity.
- (4) Assure that those plans utilizing a gatekeeper system shall designate the primary chiropractic provider within the scope of practice as the gatekeeper, who shall provide basic patient care and coordinate diagnostic testing, indicated treatment, and specialty referral for those covered persons in the provision of chiropractic benefits. Nothing in KRS 304.17A-170 or this section shall prevent a covered person from having direct access to that person's primary care provider (gatekeeper) for treatment and being reimbursed in accordance with the terms and fee schedule of the health benefit plan.
- (5) Not discriminate between individual providers or classes of providers in the amount of reimbursement, copayment, or other financial compensation for the same or essentially similar services provided by the health benefit plan.
- (6) Not promote or recommend any individual provider or class of providers to a covered person by any method or means.
- (7) Assure that an adequate number of primary chiropractic providers are included as participating chiropractic providers to guarantee reasonable accessibility, timeliness of care, convenience, and continuity of care to covered persons.
- (8) Make available to covered persons a listing of all participating primary chiropractic providers, their practice location and telephone number on a regular, timely basis.

Effective: July 15, 1996

History: Created 1996 Ky. Acts ch. 187, sec. 2, effective July 15, 1996.