

LEGISLATURE OF NEBRASKA  
ONE HUNDRED THIRD LEGISLATURE  
FIRST SESSION  
**LEGISLATIVE BILL 228**

Introduced by Nordquist, 7.

Read first time January 15, 2013

Committee: Banking, Commerce and Insurance

A BILL

1 FOR AN ACT relating to insurance; to provide requirements for  
2 insurers relating to copayments, coinsurance, and  
3 deductibles; and to provide a duty for the Revisor of  
4 Statutes.

5 Be it enacted by the people of the State of Nebraska,

1           Section 1. (1) An insurer shall not charge an insured a  
2 copayment, coinsurance, or deductible for services under a health  
3 benefit plan rendered for each date of service by a physical  
4 therapist, occupational therapist, audiologist, or speech-language  
5 pathologist licensed under the Uniform Credentialing Act that is  
6 greater than the copayment, coinsurance, or deductible charged to the  
7 insured for the services of a primary care physician or an osteopath  
8 licensed under the act for such services. An insurer shall state  
9 clearly the availability of physical therapy, occupational therapy,  
10 audiology, and speech-language pathology coverage under the health  
11 benefit plan and all related limitations, conditions, and exclusions.

12                   (2) For purposes of this section:

13                   (a) Health benefit plan means any individual or group  
14 sickness and accident insurance policy or subscriber contract,  
15 nonprofit hospital or medical service policy or plan contract, or  
16 health maintenance organization contract and any self-funded employee  
17 benefit plan to the extent not preempted by federal law or exempted  
18 by state law. Health benefit plan does not mean one or more, or any  
19 combination, of the following:

20                   (i) Coverage only for accident or disability income  
21 insurance, or any combination thereof;

22                   (ii) Credit-only insurance;

23                   (iii) Coverage for specified disease or illness;

24                   (iv) Limited-scope dental or vision benefits;

25                   (v) Coverage issued as a supplement to liability

1 insurance;

2 (vi) Automobile medical payment insurance or homeowners  
3 medical payment insurance;

4 (vii) Insurance under which benefits are payable with or  
5 without regard to fault and which is statutorily required to be  
6 contained in any liability policy or equivalent self-insurance  
7 coverage; or

8 (viii) Hospital indemnity or other fixed indemnity  
9 insurance; and

10 (b) Insurer means an insurer delivering, issuing for  
11 delivery, or renewing in this state a health benefit plan.

12 (3) This section shall apply to all health benefit plans  
13 delivered or issued for delivery or renewed on or after January 1,  
14 2014.

15 Sec. 2. The Revisor of Statutes shall assign section 1 of  
16 this act to Chapter 44, article 7.