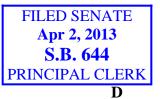
GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2013



SENATE DRS15225-ME-61E (03/13)

Short Title:	Prohibit Insurance Co. Fixing Optometry Fees.	(Public)
Sponsors:	Senators Hartsell and Wade (Primary Sponsors).	
Referred to:		

1	A BILL TO BE ENTITLED	
2	AN ACT TO PROHIBIT INSURERS AND HEALTH BENEFIT PLANS FROM LIMITING	
3	OR FIXING THE FEE AN OPTOMETRIST MAY CHARGE PATIENTS FOR	
4	SERVICES UNLESS THE SERVICES ARE COVERED BY REIMBURSEMENT	
5	UNDER THE PLAN OR INSURER CONTRACT WITH THE OPTOMETRIST.	
6	The General Assembly of North Carolina enacts:	
7	SECTION 1. G.S. 58-50-290 reads as rewritten:	
8	"§ 58-50-290. Health benefit plans or insurers contracting for provision of dental or	
9 <u>vision</u> services; no limitation on fees for noncovered services.		
10	(a) No agreement between an insurer or an entity that writes stand-alone dental	
11	insurance and a dentist for the provision of dental services on a preferred or in-network basis to	
12	plan members or insurance subscribers in connection with coverage under a stand-alone dental	
13	plan, but not in connection with or incidental to coverage under a medical plan or health	
14	insurance policy, may require that a dentist provide services at a fee limited or set by the plan	
15	or insurer, unless the services are reimbursed as covered services under the contract.	
16	(b) <u>No agreement between an insurer or an entity that writes stand-alone vision</u>	
17	insurance and an optometrist for the provision of vision services on a preferred or in-network	
18	basis to plan members or insurance subscribers in connection with coverage under a	
19	stand-alone vision plan, but not in connection with or incidental to coverage under a medical	
20	plan or health insurance policy, may require that an optometrist provide services and materials	
21	at a fee limited or set by the plan or insurer, unless the services are reimbursed as covered	
22	services under the contract.	
23	(c) For purposes of this section, "covered services" means a service for which	
24	reimbursement is available under an insurer's policy, without regard to contractual limitations	
25	by a deductible, copayment, coinsurance, waiting period, annual or lifetime maximum,	
26	frequency limitation, alternative benefit payment, or other limitation. For purposes of this	
27	section, "materials" means lenses, devices containing lenses, prisms, contact lenses, orthoptics,	
28	vision training, and prosthetic devices to correct, relieve, or treat defects or abnormal	
29	conditions of the human eye or its adnexa."	
30	SECTION 2. This act becomes effective October 1, 2013, and applies to contracts	
31	entered into, amended, or renewed on or after that date.	



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