

GENERAL ASSEMBLY OF NORTH CAROLINA
SESSION 2013

FILED SENATE
Apr 2, 2013
S.B. 644
PRINCIPAL CLERK

S

D

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 **vision 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) No agreement between an insurer or an entity that writes stand-alone vision
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.

