A bill for an act

relating to health; requiring coverage for prosthetic devices; proposing coding for new law in Minnesota Statutes, chapter 62A.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

Section 1. **[62A.251] COVERAGE FOR ORTHOTIC AND PROSTHETIC DEVICES.**

Subdivision 1. **Definitions.** The following definitions have the meanings given for purposes of this section.

(a) "Prosthesis" means an external medical device that is not surgically implanted and that is used to replace a missing limb, appendage, or other external human body part including an artificial limb, hand, or foot, and is deemed medically necessary. For purposes of this section, prosthesis includes any repair or replacement of the device and may be furnished only by an accredited provider in comprehensive prosthetic services, or a credentialed clinician who is certified or licensed.

(b) "Prosthetics" means the science and practice of evaluation, measuring, designing, fabricating, assembling, fitting, aligning, adjusting, or servicing, as well as providing the initial training necessary to accomplish the fitting of, a prosthesis through the replacement of external parts of a human body lost due to amputation or congenital deformities or absences. The practice of prosthetics also includes the generation of an image, form, or mold that replicates the patient's body segment and that requires rectification of dimensions, contours, and volumes for use in the design and fabrication of a socket to accept a residual anatomic limb to, in turn, create an artificial appendage that is designed either to support body weight or to improve or restore function or anatomical appearance, or both. Involved in the practice of prosthetics is observational gait analysis and clinical

assessment of the requirements necessary to refine and mechanically fix the relative position of various parts of the prosthesis to maximize function, stability, and safety of the patient. The practice of prosthetics includes providing and continuing patient care in order to assess the prosthetic device's effect on the patient's tissues and to assure proper fit and function of the prosthetic device by periodic evaluation.

(c) "Orthosis" means:

(1) an external medical device that is custom-fabricated or custom-fitted to a specific patient based on the patient's unique physical condition and is applied to a part of the body to correct a deformity, provide support and protection, restrict motion, improve function, or relieve symptoms of a disease, syndrome, injury, or postoperative condition and is deemed medically necessary; and

(2) any repair or replacement of the device that is furnished by an accredited facility in comprehensive orthotic services, or by a credentialed clinician who is certified or licensed.

(d) "Orthotics" means:

(1) the science and practice of evaluating, measuring, designing, fabricating, assembling, fitting, adjusting, or servicing and providing the initial training necessary to accomplish the fitting of an orthotic device for the support, correction, or alleviation of a neuromuscular or musculoskeletal dysfunction, disease, injury, or deformity;

(2) evaluation, treatment, and consultation;

(3) basic observation of gait and postural analysis;

(4) assessing and designing orthosis to maximize function and provide support and alignment necessary to prevent or correct a deformity or to improve the safety and efficiency of mobility and locomotion;

(5) continuing patient care to assess the effect on the patient's tissues; and

(6) proper fit and function of the orthotic device by periodic evaluation.

For purposes of orthotic device coverage, this section specifically excludes the following categories: items that are available over-the-counter without a prescription, such as soft goods, immobilizers, soft collars, corsets, sleeves, wraps, and other items not requiring modification or adjustment and can be fitted with minimum expertise.

(e) "Accredited provider" means any provider that is accredited by the American Board for Certification in Orthotics Prosthetics and Pedorthics (ABC), by the Board for Orthotist/Prosthetist Certification (BOC), by the Joint Commission (JC), or by the Commission on Accreditation of Rehabilitation Facilities (CARF) and that provides comprehensive orthotic and prosthetic devices or services.

Subd. 2. **Coverage.** (a) A health plan shall provide coverage for orthotic and prosthetic devices, supplies, and services to the extent that coverage is provided under federal laws for health insurance for the aged and disabled under sections 1832, 1833, 1834, Social Security Act (United States Code, title 42, sections 1395k, 1395l, and 1395m), but only to the extent consistent with this section. Coverage may be limited to the orthotic or prosthetic devices, supplies, and services that are the most appropriate model that is determined medically necessary and includes the design, fabrication, material and component selection, and measurements, fittings, static and dynamic alignments and device maintenance, including repair of the device to restore or maintain the ability to complete activities of daily living and essential job-related activities and that is not solely for comfort, convenience, or recreation.

(b) Orthotic and prosthetic device coverage under this section may only be subject to the annual or lifetime dollar maximums, deductibles, and coinsurance that apply generally to all terms and services covered under the plan.

(c) Reimbursement for orthotic and prosthetic devices, supplies, and services must be equal to the reimbursement of other contracted medical services between an accredited provider and a health plan or state-funded medical insurance plan.

Subd. 3. **Prior authorization.** A health plan may require prior authorization for orthotic and prosthetic devices, supplies, and services in the same manner and to the same extent as prior authorization is required for any other covered benefit.

Subd. 4. **Repair or replacement.** The coverage under this section shall include repair or replacement of an orthotic or prosthetic device that is medically necessary to restore or maintain the ability to complete activities of daily living or essential job-related activities and that is not solely for comfort, convenience, or recreation. Repair or replacement due to the covered individual's neglect, misuse, or abuse is not covered.

Subd. 5. **Accredited provider.** Orthotic and prosthetic devices, supplies, and services must be provided by an accredited provider in comprehensive orthotic or prosthetic services and prescribed by a licensed physician or licensed health care provider who has the authority in this state to prescribe orthotic and prosthetic devices, supplies, and services.

EFFECTIVE DATE. This section is effective August 1, 2010, and applies to all health plans issued or renewed to provide coverage for Minnesota residents on or after that date.