

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 PROSTHETIC DEVICES.**

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

(a) "Prosthesis" means an artificial 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. The term does not include artificial eyes, ears,
noses, dental appliances, ostomy products, or devices such as eyelashes or wigs.

(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 cosmesis, 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) "Private insurance company" means any insurance company, or management company hired by an insurance company, who is based in the state of Minnesota or provides coverage for citizens for the state of Minnesota; or allows subscribing patients to seek prosthetic services in the state of Minnesota. Every individual or group health insurance contract, plan, or policy delivered, issued for delivery, or renewed in this state on or after, which provides medical coverage that includes coverage for physician services in a physician's office and every policy, which provides major medical or similar comprehensive type coverage shall provide coverage for benefits for prosthetic devices that equal those benefits provided for under federal laws for health insurance for the aged and disabled.

(d) "Accredited facility" means any entity that is accredited by the American Board for Certification in Orthotics Prosthetics and Pedorthics (ABC) or by the Board for Orthotist/Prosthetist Certification (BOC) and that provides prosthetic devices or prosthetic services.

Subd. 2. Coverage. (a) A health insurance plan shall provide coverage for prosthetic devices in all health plans to the extent that coverage is provided by the federal insurance programs, including those covering federal employees, Medicare, and Veterans Administration programs, but only to the extent consistent with this section. Coverage may be limited to the prosthetic device that is the most appropriate model that is medically necessary to meet the patient's medical needs. Any dispute between the insured and the carrier concerning coverage and the application of this section shall be subject to independent external review.

(b) A health insurance plan shall not impose any annual or lifetime dollar maximum on coverage for prosthetics that is less than the annual or lifetime dollar maximum that applies generally to all terms and services covered under the plan.

(c) The coverage required may not be subject to a deductible, co-payment, or coinsurance provision that is less favorable to a covered individual than the deductible, co-payment, or coinsurance provisions that apply generally to other nonprimary care items and services under the health plan.

Subd. 3. Prior authorization. A health insurance plan may require prior authorization for prosthetic devices 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 any repair or replacement of a prosthetic device that is determined medically necessary by

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- 3.1 a prescribing physician to restore or maintain the ability to complete activities of daily
3.2 living or essential job-related activities and that is not solely for comfort or convenience.
- 3.3 Subd. 5. **Accredited facility.** Prosthetic devices must be provided by an accredited
3.4 facility. Prosthetic services must be prescribed by a licensed physician and provided
3.5 by an accredited facility.