

SENATE BILL No. 285

AN ACT concerning payments for providing vision care services; pertaining to limitations imposed by insurance plans and discount plans.

*Be it enacted by the Legislature of the State of Kansas:*

Section 1. No contract issued or renewed on or after the effective date of this act between any insurer, health insurer or any other entity that writes vision care insurance or a vision care discount plan and a vision care provider shall contain any provisions which requires the vision care provider to:

(a) Provide services or materials to an insured under such vision care insurance or health benefit plan or to a subscriber to a vision care discount plan at a fee limited or set by such vision care insurance plan or health benefit plan or vision care discount plan unless the services or materials are reimbursed as covered services under the contract; or

(b) participate in a vision care insurance or a vision care discount plan as a condition to participate in any other health benefit plan or vision care plan, regardless of whether such vision care plan is a plan of insurance or a vision care discount program which is not an insurance plan.

Sec. 2. No vision care provider shall charge more for services and materials that are not covered services under either vision care insurance or a vision care discount plan than such vision care provider's usual and customary rate for those services and materials.

Sec. 3. (a) No vision care insurance policy or vision care discount plan contract covered by this act shall change the terms, discounts or rates provided therein without the concurrence and agreement at the time of such change by the vision care provider.

(b) No vision care insurance policy or vision care discount plan that provides covered services for materials shall have the effect, directly or indirectly, of limiting the choice of sources and suppliers of materials by a patient of a vision care provider.

Sec. 4. No provision of this act shall prohibit the use of a discount card by a patient or client of a vision care provider if:

(a) Enrollment by the vision care provider is:

(1) Completely voluntary; and

(2) not conditioned upon the vision care provider's participation in any other discount card with different provider terms and conditions or insurance program; and

(b) the discount card program does not make or include any coverage or payment to the vision care provider.

Sec. 5. For the purposes of this act:

(a) (1) "Covered service" means any service or material for which:

(A) Reimbursement from the vision care insurance or health benefit plan is provided for by an insured's vision care insurance plan or health benefit plan contract subject to the application of the vision care insurance or health benefit plan's deductibles, copayments or coinsurance; or

(B) a reimbursement would be available subject to the application of any contractual limitations of deductibles or copayments required under the vision care discount plan coinsurance.

(2) "Covered services" does not include any services or materials covered or provided at a nominal or de minimus rate.

(b) "Contractual discount" means a percentage reduction from a vision care provider's usual and customary rate for providing covered services and materials required under a participating provider agreement.

(c) "Discount card" shall have the meaning ascribed to such term in K.S.A. 50-1,100, and amendments thereto.

(d) "Health benefit plan" shall have the meaning ascribed to such term in K.S.A. 40-4602, and amendments thereto.

(e) "Health insurer" shall have the meaning ascribed to such term in K.S.A. 40-4602, and amendments thereto.

(f) "Material" includes, but is not limited to, lenses, devices containing lenses, prisms, lens treatments and coatings, contact lenses, orthoptics, vision training and any prosthetic device necessary to correct, relieve, or treat any defect or abnormal condition of the human eye or its adnexa.

(g) "Participating provider agreement" includes a health benefit plan, vision care insurance or a vision care discount plan.

(h) "Participating provider" shall have the meaning ascribed to such term in K.S.A. 40-4602, and amendments thereto.

(i) "Vision care insurance" means an integrated health benefit plan

or vision care insurance policy or contract which provides vision benefits pertaining to the provision of covered services or materials.

(j) "Vision care provider" means an optometrist licensed by the board of examiners in optometry or an ophthalmologist licensed by the state board of healing arts.

(k) "Vision care discount plan" means any entity governed by K.S.A. 50-1,100, and amendments thereto, which has been specifically authorized by the vision care providers to provide discounts to patients.

Sec. 6. Sections 1 through 6, and amendments thereto, shall be known and may be cited as the vision care services act.

Sec. 7. This act shall take effect and be in force from and after its publication in the Kansas register.

I hereby certify that the above BILL originated in the SENATE, and passed that body

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SENATE concurred in  
HOUSE amendments \_\_\_\_\_

\_\_\_\_\_  
*President of the Senate.*

\_\_\_\_\_  
*Secretary of the Senate.*

Passed the HOUSE  
as amended \_\_\_\_\_

\_\_\_\_\_  
*Speaker of the House.*

\_\_\_\_\_  
*Chief Clerk of the House.*

APPROVED \_\_\_\_\_

\_\_\_\_\_  
*Governor.*