



House of Representatives

File No. 632

General Assembly

February Session, 2000

(Reprint of File No. 57)

House Bill No. 5120
As Amended by House
Amendment Schedules "A" and "B"

Approved by the Legislative Commissioner
April 14, 2000

An Act Concerning Insurance Coverage For Care And Treatment Of Patients With An Ostomy.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. (NEW) Each individual health insurance policy providing
2 coverage of the type specified in subdivisions (1), (2), (4), (11) and (12)
3 of section 38a-469 of the general statutes delivered, issued for delivery,
4 renewed or continued in this state on or after October 1, 2000, that
5 provides coverage for ostomy surgery shall include coverage, up to
6 one thousand dollars annually, for medically necessary appliances and
7 supplies relating to an ostomy including, but not limited to, collection
8 devices, irrigation equipment and supplies, skin barriers and skin
9 protectors. As used in this section, "ostomy" includes colostomy,
10 ileostomy and urostomy. Payments under this section shall not be
11 applied to any policy maximums for durable medical equipment.
12 Nothing in this section shall be deemed to decrease policy benefits in
13 excess of the limits in this section.

14 Sec. 2. (NEW) Each group health insurance policy providing
15 coverage of the type specified in subdivisions (1), (2), (4), (11) and (12)

16 of section 38a-469 of the general statutes delivered, issued for delivery,
17 renewed or continued in this state on or after October 1, 2000, that
18 provides coverage for ostomy surgery shall include coverage, up to
19 one thousand dollars annually, for medically necessary appliances and
20 supplies relating to an ostomy including, but not limited to, collection
21 devices, irrigation equipment and supplies, skin barriers and skin
22 protectors. As used in this section, "ostomy" includes colostomy,
23 ileostomy and urostomy. Payments under this section shall not be
24 applied to any policy maximums for durable medical equipment.
25 Nothing in this section shall be deemed to decrease policy benefits in
26 excess of the limits in this section.

The following fiscal impact statement and bill analysis are prepared for the benefit of members of the General Assembly, solely for the purpose of information, summarization, and explanation, and do not represent the intent of the General Assembly or either House thereof for any purpose:

OFA Fiscal Note

State Impact: None

Affected Agencies: State Comptroller's Office, Department of Insurance

Municipal Impact: Potential Cost

Explanation

State Impact:

The bill requires individual and group health insurance policies that cover ostomy surgery to cover related appliances and supplies, skin barriers, and protectors. Ostomy must be covered in policies delivered, issued for delivery or renewed in the state beginning October 1, 2000. The bill is not anticipated to have any fiscal impact on the state employee health insurance account. The state employee health insurance accounts provide coverage for the services mandated by the bill.

Municipal Impact:

To the extent that ostomy is not covered by a municipality's employee health insurance policy, there may be increased municipal costs to provide it. The bill's impact on municipal health insurance costs will vary by municipality depending on the current coverage and cannot be determined at this time.

House "A" is technical in nature and has no fiscal impact.

House " B " is technical in nature and has no fiscal impact.

OLR Bill Analysis

HB 5120 (as amended by House "A" and "B")*

AN ACT CONCERNING INSURANCE COVERAGE FOR CARE AND TREATMENT OF PATIENTS WITH AN OSTOMY.**SUMMARY:**

This bill requires certain individual and group health insurance policies that are delivered, issued for delivery, renewed or continued in Connecticut beginning October 1, 2000 to cover, up to \$1,000 annually, medically necessary ostomy-related appliances and supplies, including collection devices, irrigation equipment and supplies, and skin barriers and protectors. Policies that cover ostomy, colostomy, ileostomy, or urostomy surgery must include this benefit.

The bill prohibits the application of any such payments towards any durable medical equipment benefit maximum. It also specifies that payments may not be used to decrease policy benefits in excess of the \$1,000 limit.

The benefit requirement applies to individual and group hospital and medical service plans offered by HMOs and health insurance policies that offer the following types of coverage: (1) basic hospital expense, (2) basic medical-surgical expense, (3) major medical expense, and (4) hospital or medical expense.

An ostomy is a surgically formed artificial opening in the bowel or intestine. A colostomy is an artificial opening in the colon, an ileostomy an artificial opening in the small intestine or ileum, and an urostomy an artificial opening in the tubes that run from the kidney to the bladder.

*House Amendment "A" limits coverage to (1) medically necessary appliances and supplies and (2) \$1,000 annually.

*House Amendment "B" prohibits any ostomy appliance or supply payment from being applied towards any durable equipment policy maximum or used to decrease benefits beyond the \$1,000 annual limit.

EFFECTIVE DATE: October 1, 2000

COMMITTEE ACTION

Insurance and Real Estate Committee

Joint Favorable

Yea 17 Nay 0