



# Senate

General Assembly

February Session, 2000

**File No. 168**

Senate Bill No. 406

*Senate, March 22, 2000*

The Committee on Insurance and Real Estate reported through SEN. BOZEK of the 6<sup>th</sup> Dist., Chairperson of the Committee on the part of the Senate, that the bill ought to pass.

## ***An Act Concerning Pain Management.***

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

1 Section 1. (NEW) (a) Each individual health insurance policy  
2 providing coverage of the type specified in subdivisions (1), (2), (4),  
3 (10), (11) and (12) of section 38a-469 of the general statutes delivered,  
4 issued for delivery, renewed, amended or continued in this state on or  
5 after October 1, 2000, shall provide coverage for pain treatment and  
6 access to a pain specialist who may use all means necessary to make a  
7 diagnosis and develop a treatment plan including the use of necessary  
8 medications and procedures. As used in this section, "pain" means a  
9 more or less localized sensation of discomfort, distress or agony.

10 (b) No insurer, hospital or medical service corporation, health care  
11 center, fraternal benefit society, or other entity may terminate the  
12 services of, require additional documentation from, require additional  
13 utilization review, reduce payments or otherwise penalize or provide  
14 financial disincentives to any attending health care provider on the

15 basis that the provider orders care consistent with the provisions of  
16 this section.

17 Sec. 2. (NEW) Each group health insurance policy providing  
18 coverage of the type specified in subdivisions (1), (2), (4), (10), (11) and  
19 (12) of section 38a-469 of the general statutes delivered, issued for  
20 delivery, renewed, amended or continued in this state on or after  
21 October 1, 2000, shall provide coverage for pain treatment and access  
22 to a pain specialist who may use all means necessary to make a  
23 diagnosis and develop a treatment plan including the use of necessary  
24 medications and procedures. As used in this section, "pain" means a  
25 more or less localized sensation of discomfort, distress or agony.

26 (b) No insurer, hospital or medical service corporation, health care  
27 center, fraternal benefit society, or other entity may terminate the  
28 services of, require additional documentation from, require additional  
29 utilization review, reduce payments or otherwise penalize or provide  
30 financial disincentives to any attending health care provider on the  
31 basis that the provider orders care consistent with the provisions of  
32 this section.

**INS Committee Vote:** Yea 15 Nay 3 JF

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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:

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### **OFA Fiscal Note**

**State Impact:** Potential Future Cost

**Affected Agencies:** Department of Insurance, State Comptroller

**Municipal Impact:** Potential Cost

### **Explanation**

**State Impact:**

The bill requires individual and group health insurance policies to provide coverage for treatment by a pain treatment specialist.

The bill may require coverage for services not currently provided by the state employee health insurance plans. To the extent that additional pain treatment is covered when the state's policies are renewed, there would be future state costs that cannot be determined at this time.

**Municipal Impact:**

To the extent that pain management is not covered by a municipality's 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.

**OLR Bill Analysis**

SB 406

***AN ACT CONCERNING PAIN MANAGEMENT.*****SUMMARY:**

Beginning October 1, 2000, this bill requires certain individual and group health insurance policies that are delivered, issued for delivery, renewed, amended, or continued in Connecticut to cover treatment for pain and access to pain specialists. The coverage must allow pain specialists to use whatever means necessary to (1) make a diagnosis and (2) develop a treatment plan, including the use of medications and procedures. The bill defines "pain" to mean a more or less localized sensation of discomfort, distress, or agony.

The bill prohibits insurers, hospital and medical service corporations, HMOs, fraternal benefit societies, or other entities from (1) terminating services, (2) requiring additional documentation or utilization reviews, (3) reducing payment, (4) providing financial disincentives, or (5) otherwise penalizing attending health care providers because they order pain treatment consistent with the bill's requirements.

The requirement applies to 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, (4) limited benefit expense, and (5) hospital or medical expense.

EFFECTIVE DATE: October 1, 2000

**COMMITTEE ACTION**

Insurance and Real Estate Committee

Joint Favorable Report

Yea 15    Nay 3

