

## Prosthetic Parity Bills Considered in Connecticut

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### Issue

Summarize the bills considered by the Insurance and Real Estate Committee in 2009 and 2011 concerning prosthetic parity and indicate the history of each.

### Summary

The Insurance and Real Estate Committee considered one bill concerning prosthetic parity in 2009 ([HB 5093](#)) and one in 2011 ([SB 17](#)).

In 2009, the committee held a hearing on [HB 5093](#), *An Act Concerning Prosthetic Parity*, and reported out a substitute bill. The House referred the substitute bill to the Appropriations Committee, which reported it to the House without any changes. The bill died on the House calendar.

In 2011, the committee held a public hearing on [SB 17](#), *An Act Concerning Wellness Programs and Expansion of Health Insurance Coverage*. [SB 17](#) was an omnibus bill. The prosthetic parity requirements were Sections 3 & 4 of the bill. A motion to report the bill to the floor failed in committee.

Both bills require certain health insurers to cover prosthetic devices, and repairs or replacements to them, subject to specified conditions described below. The bills' provisions differ in two respects: the definition of prosthetic device and the bill's applicability.

Under both bills, a “prosthetic device” is an artificial device to replace all or part of an arm or leg but excludes a device designed exclusively for athletic purposes. [sHB 5093](#) also excludes a device containing a microprocessor, whereas [SB 17](#) explicitly includes a device with a microprocessor if the patient’s health care provider determines it is medically necessary.

Both bills apply to individual and group health insurance policies delivered issued, renewed, amended, or continued in Connecticut that cover (1) basic hospital expenses; (2) basic medical-surgical expenses; (3) major medical expenses; and (4) hospital or medical services, including those provided under an HMO plan. But [sHB 5093](#) also applies to government-issued medical benefits, including Medicaid. (According to the bill’s fiscal note, Medicaid already provides prosthetic coverage that meets the bill’s requirements.)

## **Prosthetic Parity Bills**

Both [sHB 5093](#) and [SB 17](#) are identical in the respects described below.

### ***Coverage Required***

The bills require the specified health insurance policies to cover prosthetic devices. Coverage must be at least equivalent to the coverage Medicare provides for such devices. (Medicare generally covers 80% of the cost of prostheses, after the patient pays his or her annual deductible.) Coverage may be limited to a device that the patient’s health care provider determines is most appropriate to meet his or her medical needs.

Under the bills, policies also must cover repairs to or replacements of prosthetic devices that the patient’s health care provider determines are medically necessary, excluding repairs or replacements needed because of misuse or loss of the device.

### ***Out-of-Pocket Expenses***

Under the bills, a policy cannot impose a coinsurance, copayment, deductible, or other out-of-pocket expense for a prosthetic device that is more restrictive than that imposed on most other policy benefits. This does not apply to high-deductible health plans designed to be compatible with federal qualified health savings accounts.

### ***Durable Medical Equipment***

The bills prohibit a policy from considering a prosthetic device as durable medical equipment (DME). (Thus, the amount covered cannot count toward a DME maximum.)

### ***Prior Authorization***

The bills allow a carrier's policy to require prior authorization for prosthetic devices, but only in the same manner and to the same extent as prior authorization is required for other policy benefits.

### ***Appeal to Insurance Commissioner***

Under both bills, a person who is denied coverage for a prosthetic device, or device repair or replacement, may file an appeal with the insurance commissioner requesting an external, independent review.

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