

**HOUSE BILL NO. 219**

IN THE LEGISLATURE OF THE STATE OF ALASKA

TWENTIETH LEGISLATURE - FIRST SESSION

BY REPRESENTATIVE KOTT

Introduced: 4/1/97

Referred: Health, Education and Social Services

**A BILL**

**FOR AN ACT ENTITLED**

1 "An Act relating to chiropractic health care services provided by a health  
2 maintenance organization."

3 **BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:**

4 \* **Section 1.** AS 21.86 is amended by adding a new section to read:

5 **Sec. 21.86.065. Chiropractic health care services.** (a) An enrollee may use  
6 the services of a licensed chiropractor of the enrollee's choosing and may not be  
7 required to obtain the prior approval of the enrollee's health maintenance organization,  
8 a gatekeeper, or primary care physician. Within 10 days after an enrollee's first visit,  
9 a chiropractor shall transmit a report containing the enrollee's primary complaint,  
10 related history, examination findings, initial diagnosis, and treatment plan to the  
11 enrollee's health maintenance organization. If the enrollee and the enrollee's  
12 chiropractor determine that the condition of the enrollee has not improved within 30  
13 days after the initial treatment, the chiropractor shall refer the enrollee back to the  
14 enrollee's health maintenance organization for examination and possible concurrent

1 care.

2 (b) If the enrollee's chiropractor recommends chiropractic treatment beyond  
3 30 days, the chiropractor shall conduct a second examination and transmit the findings  
4 to the enrollee's health maintenance organization. The transmitted information must  
5 include the enrollee's current status regarding the primary complaint, the progress of  
6 a revised treatment plan, and the objectives for continued care.

7 (c) After receiving a 30-day treatment report from a chiropractor under (b) of  
8 this section, the enrollee's health maintenance organization may request a review by  
9 another chiropractor. The reviewing chiropractor shall conduct a physical examination  
10 of the enrollee. The findings of the reviewing chiropractor must be disclosed to the  
11 enrollee and the enrollee's chiropractor. Charges for additional chiropractic care  
12 recommended by the reviewing chiropractor must be included as covered health care  
13 services provided by the health maintenance organization.

14 (d) If the enrollee's treating chiropractor and the reviewing chiropractor  
15 determine that the enrollee's condition has stabilized, ongoing preventative or  
16 maintenance care is limited to two chiropractic visits a month. If the treating  
17 chiropractor and the reviewing chiropractor disagree on the enrollee's continued  
18 treatment, the enrollee and the health maintenance organization shall jointly select a  
19 third chiropractor to review the enrollee's chiropractic treatment. Selection of a third  
20 chiropractor must occur not more than 60 days after the date of the enrollee's initial  
21 treatment by the enrollee's treating chiropractor. Until the third chiropractor's opinion  
22 is received in writing by the enrollee and the health maintenance organization, the  
23 enrollee may receive chiropractic treatment recommended by the treating chiropractor.  
24 The opinion of the third chiropractor as to continued chiropractic treatment is binding  
25 on the enrollee and the health maintenance organization. This subsection does not  
26 apply if a new documented injury or a substantial exacerbation of the enrollee's  
27 previous primary complaint occurs.