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STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2024

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A N A C T

RELATING TO INSURANCE -- ACCIDENT AND SICKNESS INSURANCE POLICIES

Introduced By: Representatives Tanzi, Carson, Cruz, Cortvriend, Speakman, Boylan,  
Kislak, Hull, Cotter, and Donovan

Date Introduced: March 04, 2024

Referred To: House Health & Human Services

It is enacted by the General Assembly as follows:

1 SECTION 1. Chapter 27-18 of the General Laws entitled "Accident and Sickness Insurance  
2 Policies" is hereby amended by adding thereto the following section:

3 **27-18-95. Community health workers.**

4 (a) As used in this section, "community health worker" means a trained professional  
5 providing services that are considered medically necessary for patients with one or more chronic  
6 health, including behavioral health, conditions, patients who are at risk for a chronic health  
7 condition, and/or who face barriers meeting their health or health-related social needs. Services  
8 that can be provided by community health workers can include, but are not limited to:

9 (1) Health and promotion coaching;

10 (2) Health education and training;

11 (3) Health system navigation and resource coordination services;

12 (4) Care planning; and

13 (5) Follow-up care recommendations.

14 (b)(1) Every individual or group health insurance contract, or every individual or group  
15 hospital or medical expense insurance policy, plan, or group policy delivered, issued for delivery,  
16 or renewed in this state on or after January 1, 2025, shall provide coverage for the services of a  
17 community health worker in accordance with each health insurer's respective principles and  
18 mechanisms of reimbursement, credentialing, and contracting, if the services are within the  
19 community health worker's area of professional competence as defined by the community health

1 worker certification standard developed and maintained by the Rhode Island certification board in  
2 collaboration with the department of health, and are currently reimbursed when rendered by any  
3 other healthcare provider.

4 (2) No insurer or hospital or medical service corporation may require supervision,  
5 signature, or referral by any other healthcare provider as a condition of reimbursement, except when  
6 those requirements are also applicable to other categories of healthcare providers.

7 (3) No insurer or hospital or medical service corporation or patient may be required to pay  
8 for duplicate services actually rendered by both a community health worker and any other  
9 healthcare provider.

10 (c) Every individual or group health insurance contract, or every individual or group  
11 hospital or medical expense insurance policy, plan, or group policy delivered, issued for delivery,  
12 or renewed in this state that is required to cover perinatal doula services as defined in subsections  
13 (a) and (b) of this section, shall report utilization and cost information related to community health  
14 worker services to the office of the health insurance commissioner on or before July 1, 2026 and  
15 each July 1 thereafter. The office of the health insurance commissioner shall define the utilization  
16 and cost information required to be reported.

17 (d) This section shall not apply to insurance coverage providing benefits for:

18 (1) Hospital confinement indemnity;

19 (2) Disability income;

20 (3) Accident only;

21 (4) Long-term care;

22 (5) Medicare supplement;

23 (6) Limited benefit health;

24 (7) Specified disease indemnity;

25 (8) Sickness or bodily injury or death by accident or both; and

26 (9) Other limited benefit policies.

27 SECTION 2. Chapter 27-19 of the General Laws entitled "Nonprofit Hospital Service  
28 Corporations" is hereby amended by adding thereto the following section:

29 **27-19-87. Community health workers.**

30 (a) As used in this section, "community health worker" means a trained professional  
31 providing services that are considered medically necessary for patients with one or more chronic  
32 health, including behavioral health, conditions, patients who are at risk for a chronic health  
33 condition, and/or who face barriers meeting their health or health-related social needs. Services  
34 that can be provided by community health workers can include, but are not limited to:

- 1           (1) Health and promotion coaching;
- 2           (2) Health education and training;
- 3           (3) Health system navigation and resource coordination services;
- 4           (4) Care planning; and
- 5           (5) Follow-up care recommendations.

6           (b)(1) Every individual or group health insurance contract, or every individual or group  
7 hospital or medical expense insurance policy, plan, or group policy delivered, issued for delivery,  
8 or renewed in this state on or after January 1, 2025, shall provide coverage for the services of a  
9 community health worker in accordance with each health insurer's respective principles and  
10 mechanisms of reimbursement, credentialing, and contracting, if the services are within the  
11 community health worker's area of professional competence as defined by the community health  
12 worker certification standard developed and maintained by the Rhode Island certification board in  
13 collaboration with the department of health, and are currently reimbursed when rendered by any  
14 other healthcare provider.

15           (2) No insurer or hospital or medical service corporation may require supervision,  
16 signature, or referral by any other healthcare provider as a condition of reimbursement, except when  
17 those requirements are also applicable to other categories of healthcare providers.

18           (3) No insurer or hospital or medical service corporation or patient may be required to pay  
19 for duplicate services actually rendered by both a community health worker and any other  
20 healthcare provider.

21           (c) Every individual or group health insurance contract, or every individual or group  
22 hospital or medical expense insurance policy, plan, or group policy delivered, issued for delivery,  
23 or renewed in this state that is required to cover perinatal doula services as defined in subsections  
24 (a) and (b) of this section, shall report utilization and cost information related to community health  
25 worker services to the office of the health insurance commissioner on or before July 1, 2026 and  
26 each July 1 thereafter. The office of the health insurance commissioner shall define the utilization  
27 and cost information required to be reported.

28           (d) This section shall not apply to insurance coverage providing benefits for:

- 29           (1) Hospital confinement indemnity;
- 30           (2) Disability income;
- 31           (3) Accident only;
- 32           (4) Long-term care;
- 33           (5) Medicare supplement;
- 34           (6) Limited benefit health;

1           (7) Specified disease indemnity;

2           (8) Sickness or bodily injury or death by accident or both; and

3           (9) Other limited benefit policies.

4           SECTION 3. Chapter 27-20 of the General Laws entitled "Nonprofit Medical Service  
5 Corporations" is hereby amended by adding thereto the following section:

6           **27-20-83. Community health workers.**

7           (a) As used in this section, "community health worker" means a trained professional  
8 providing services that are considered medically necessary for patients with one or more chronic  
9 health, including behavioral health, conditions, patients who are at risk for a chronic health  
10 condition, and/or who face barriers meeting their health or health-related social needs. Services  
11 that can be provided by community health workers can include, but are not limited to:

12           (1) Health and promotion coaching;

13           (2) Health education and training;

14           (3) Health system navigation and resource coordination services;

15           (4) Care planning; and

16           (5) Follow-up care recommendations.

17           (b)(1) Every individual or group health insurance contract, or every individual or group  
18 hospital or medical expense insurance policy, plan, or group policy delivered, issued for delivery,  
19 or renewed in this state on or after January 1, 2025, shall provide coverage for the services of a  
20 community health worker in accordance with each health insurer's respective principles and  
21 mechanisms of reimbursement, credentialing, and contracting, if the services are within the  
22 community health worker's area of professional competence as defined by the community health  
23 worker certification standard developed and maintained by the Rhode Island certification board in  
24 collaboration with the department of health, and are currently reimbursed when rendered by any  
25 other healthcare provider.

26           (2) No insurer or hospital or medical service corporation may require supervision,  
27 signature, or referral by any other healthcare provider as a condition of reimbursement, except when  
28 those requirements are also applicable to other categories of healthcare providers.

29           (3) No insurer or hospital or medical service corporation or patient may be required to pay  
30 for duplicate services actually rendered by both a community health worker and any other  
31 healthcare provider.

32           (c) Every individual or group health insurance contract, or every individual or group  
33 hospital or medical expense insurance policy, plan, or group policy delivered, issued for delivery,  
34 or renewed in this state that is required to cover perinatal doula services as defined in subsections

1 (a) and (b) of this section, shall report utilization and cost information related to community health  
2 worker services to the office of the health insurance commissioner on or before July 1, 2026 and  
3 each July 1 thereafter. The office of the health insurance commissioner shall define the utilization  
4 and cost information required to be reported.

5 (d) This section shall not apply to insurance coverage providing benefits for:

6 (1) Hospital confinement indemnity;

7 (2) Disability income;

8 (3) Accident only;

9 (4) Long-term care;

10 (5) Medicare supplement;

11 (6) Limited benefit health;

12 (7) Specified disease indemnity;

13 (8) Sickness or bodily injury or death by accident or both; and

14 (9) Other limited benefit policies.

15 SECTION 4. Chapter 27-41 of the General Laws entitled "Health Maintenance  
16 Organizations" is hereby amended by adding thereto the following section:

17 **27-41-100. Community health workers.**

18 (a) As used in this section, "community health worker" means a trained professional  
19 providing services that are considered medically necessary for patients with one or more chronic  
20 health, including behavioral health, conditions, patients who are at risk for a chronic health  
21 condition, and/or who face barriers meeting their health or health-related social needs. Services  
22 that can be provided by community health workers can include, but are not limited to:

23 (1) Health and promotion coaching;

24 (2) Health education and training;

25 (3) Health system navigation and resource coordination services;

26 (4) Care planning; and

27 (5) Follow-up care recommendations.

28 (b)(1) Every individual or group health insurance contract, or every individual or group  
29 hospital or medical expense insurance policy, plan, or group policy delivered, issued for delivery,  
30 or renewed in this state on or after January 1, 2025, shall provide coverage for the services of a  
31 community health worker in accordance with each health insurer's respective principles and  
32 mechanisms of reimbursement, credentialing, and contracting, if the services are within the  
33 community health worker's area of professional competence as defined by the community health  
34 worker certification standard developed and maintained by the Rhode Island certification board in

1 collaboration with the department of health, and are currently reimbursed when rendered by any  
2 other healthcare provider.

3 (2) No insurer or hospital or medical service corporation may require supervision,  
4 signature, or referral by any other healthcare provider as a condition of reimbursement, except when  
5 those requirements are also applicable to other categories of healthcare providers.

6 (3) No insurer or hospital or medical service corporation or patient may be required to pay  
7 for duplicate services actually rendered by both a community health worker and any other  
8 healthcare provider.

9 (c) Every individual or group health insurance contract, or every individual or group  
10 hospital or medical expense insurance policy, plan, or group policy delivered, issued for delivery,  
11 or renewed in this state that is required to cover perinatal doula services as defined in subsections  
12 (a) and (b) of this section, shall report utilization and cost information related to community health  
13 worker services to the office of the health insurance commissioner on or before July 1, 2026 and  
14 each July 1 thereafter. The office of the health insurance commissioner shall define the utilization  
15 and cost information required to be reported.

16 (d) This section shall not apply to insurance coverage providing benefits for:

17 (1) Hospital confinement indemnity;

18 (2) Disability income;

19 (3) Accident only;

20 (4) Long-term care;

21 (5) Medicare supplement;

22 (6) Limited benefit health;

23 (7) Specified disease indemnity;

24 (8) Sickness or bodily injury or death by accident or both; and

25 (9) Other limited benefit policies.

26 SECTION 5. This act shall take effect upon passage.

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EXPLANATION  
BY THE LEGISLATIVE COUNCIL  
OF  
A N A C T  
RELATING TO INSURANCE -- ACCIDENT AND SICKNESS INSURANCE POLICIES

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1           This act would require insurance coverage for all community health workers' services to  
2 include, but not be limited to, health and promotion coaching, health education and training, health  
3 system navigation and resource coordination services, care planning and follow-up care  
4 recommendations. Coverage would not be provided for insurance coverage providing benefits for  
5 hospital confinement indemnity, disability income, accident only, long-term care, Medicare  
6 supplement, limited benefit health, specified disease indemnity, sickness or bodily injury or death  
7 by accident, or both, and other limited benefit policies.

8           This act would take effect upon passage.

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