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Legislation Introduced to Improve Access to Chiropractic, Occupational and Physical Therapy Services by Limiting Patient Cost-Sharing Requirements

Representatives Jeff LaRe and Monica Robb-Blasdel today introduced House Bill No. 141, that seeks to prohibit health benefit plans from imposing excessive cost-sharing requirements on chiropractic, occupational and physical therapy services.

Under this legislation, a health benefit plan cannot impose patient cost-sharing requirements on these services that are greater than the cost-sharing for an office visit to a primary care physician or osteopathic physician. This measure aims to ensure that patients have access to essential non-pharmacological services without increased financial burden.

In addition, the bill requires health plan issuers to clearly state on their website and all relevant literature that coverage for chiropractic, occupational and physical therapy is available, along with any limitations that may apply. This provision aims to promote transparency and ensure that patients are aware of the coverage available to them.

“Chiropractic, occupational and physical therapy are crucial healthcare services that can significantly improve patients’ quality of life. However, the high cost-sharing requirements often make it difficult for patients to utilize these services. This bill aims to address this issue and ensure that patients have access to these essential services”, said Dr. Brandy Spaulding, Executive Director of the Ohio State Chiropractic Association.