MAINE STATE LEGISLATURE

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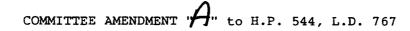
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	L.D. 767
2	DATE: 4/27/05 (Filing No. H-211)
4 6	INSURANCE AND FINANCIAL SERVICES
8	
10	Reproduced and distributed under the direction of the Clerk of the House.
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14	STATE OF MAINE HOUSE OF REPRESENTATIVES 122ND LEGISLATURE
16	FIRST SPECIAL SESSION
18	COMMITTEE AMENDMENT "A" to H.P. 544, L.D. 767, Bill, "Ar
20	Act To Improve the Affordability of Health Insurance"
22	Amend the bill by striking out everything after the enacting clause and before the summary and inserting in its place the
24	following:
26	'Sec. 1. 24-A MRSA §2752, sub-§3, ¶B, as amended by PL 2001, c. 258, Pt. I, §1, is further amended to read:
28 30	B. The financial impact of mandating the benefit, including:
	(1) The extent to which the proposed insurance
32	coverage would increase or decrease the cost of the treatment or service over the next 5 years;
34	
36	(2) The extent to which the proposed coverage might increase the appropriate or inappropriate use of the
	treatment or service over the next 5 years;
38	(3) The extent to which the mandated treatment or
40	service might serve as an alternative for more
42	expensive or dess expensive treatment or service;
42	(4) The methods that will be instituted to manage the
44	utilization and costs of the proposed mandate;
46	(5) The extent to which the insurance coverage may affect the number and types of providers of the

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mandated treatment or service over the next 5 years;

COMMITTEE AMENDMENT



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4	health care service or provider may be reasonably expected to increase or decrease the insurance premium and administrative expenses of policyholders;
6 8	(7) The impact of indirect costs, which are costs other than premiums and administrative costs, on the question of the costs and benefits of coverage;
10	- ·
12	(8) The impact of this coverage on the total cost of health care, including potential benefits and savings to insurers and employers because the proposed mandated
14	treatment or service prevents disease or illness or leads to the early detection and treatment of disease
16	or illness that is less costly than treatment or service for later stages of a disease or illness;
18	
20	(9) The effects of mandating the benefit on the cost of health care, particularly the premium and administrative expenses and indirect costs, to
22	employers and employees, including the financial impact on small employers, medium-sized employers and large
24	employers; and
26	(10) The effect of the proposed mandate on cost-shifting between private and public payors of
28	health care coverage and on the overall cost of the health care delivery system in this State.
30	
32	In order to enable the committee to assess the financial impact of the benefit, the report must include a comparison of the rate of increase in the Consumer Price Index for
34	medical care services to the rate of increase in the Consumer Price Index for the previous year and the current
36	year as reported by the United States Department of Labor, Bureau of Labor Statistics:
38	
40	SUMMARY
42	This amendment replaces the bill. The amendment requires that the Department of Administrative and Financial Services,
44	Bureau of Insurance include a comparison of the rate of increase in the Consumer Price Index for medical services to the rate of
46	in the Consumer Frice index for medical services to the rate of increase in the Consumer Price Index for the previous year and

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COMMITTEE AMENDMENT "A" to H.P. 544, L.D. 767

current year in any review and evaluation prepared on a mandated health benefit proposal.

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FISCAL NOTE REQUIRED (See attached)

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COMMITTEE AMENDMENT



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LD 767

LR 1318(02)

An Act To Improve the Affordability of Health Insurance

Fiscal Note for Bill as Amended by Committee Amendment 'A'
Committee: Insurance and Financial Services
Fiscal Note Required: Yes

Fiscal Note

Minor cost increase - Other Special Revenue Funds

Fiscal Detail and Notes

Any additional costs to the Bureau of Insurance in the Department of Professional and Financial Regulation in implementing this bill can be absorbed utilizing existing resources.