MAINE STATE LEGISLATURE

The following document is provided by the

LAW AND LEGISLATIVE DIGITAL LIBRARY

at the Maine State Law and Legislative Reference Library

http://legislature.maine.gov/lawlib



Reproduced from scanned originals with text recognition applied (searchable text may contain some errors and/or omissions)

L.D. 669

STATE OF MAINE HOUSE OF REPRESENTATIVES 110TH LEGISLATURE FIRST REGULAR SESSION

(Filing No. H-316)

COMMITTEE AMENDMENT " ## to H.P. 591, L.D. 669, Bill,
"AN ACT to Require Alcoholism Treatment Benefits in Health
Insurance Policies."

Amend the Bill by striking out everything after the enacting clause and inserting in its place the following:

'Sec. 1. 24 MRSA §2329 is enacted to read:

§2329. Coverage for treatment of Alcoholism

- 1. Coverage required. Every nonprofit hospital and medical service organization which issues group health care contracts providing coverage for hospital care to residents of this State shall provide coverage for treatment of alcoholism provided by licensed or certified treatment facilities or by licensed physicians or psychologists, provided that such coverage need not be provided if the applicant affirmatively and specifically waives such coverage in writing in that the application and further provided/the facility, physician or psychologist providing the treatment has contracted with the nonprofit hospital or medical service organization under terms and conditions which the organization deems satisfactory to its membership.
- 2. Contract. The group contract providing coverage for the treatment referred to in this section shall contain provisions for maximum benefits and coinsurance and reasonable limitations, deductibles and exclusions.

Sec. 2. 24-A MRSA §2841 is enacted to read: §2841. Coverage for treatment of alcoholism

- 1. Coverage required. Every insurer which issues, for delivery in this State, group and blanket health insurance policies which provide coverage for hospital care to residents of this State shall provide coverage for treatment of alcoholism provided by licensed or certified treatment facilities or by licensed physicians or psychologists, provided that such coverage need not be provided if the applicant affirmatively and specifically waives such coverage in writing in the application.
- 2. Policy. The group or blanket policy providing coverage for the treatment referred to in this section shall contain provisions for maximum benefits and coinsurance and reasonable limitations, deductibles and exclusions.
- Sec. 3. Transition. The provisions of this Act shall apply only to those contracts and policies delivered or issued for delivery in this State more than 90 days after this Act takes effect.'

Statement of Fact

The purposes of this amendment are to require that coverage for alcoholism treatment be provided in group health insurance policies, unless the applicant specifically waives

such coverage and to require that services rendered by licensed physicians and psychologists in their own offices also be reimbursed under this coverage.

Reported by the Minority of the Committee on Business Legislation. Reproduced and distributed under the direction of the Clerk of the House.

5/6/81

(Filing No. H-316)