

# MAINE STATE LEGISLATURE

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STATE OF MAINE  
SENATE  
110TH LEGISLATURE  
FIRST REGULAR SESSION

(Filing No. S-134)

OFFR.

COMMITTEE AMENDMENT "A" to S.P. 360, L.D. 1060, Bill, "AN ACT to Amend the Laws Relating to Group and Blanket Health Insurance."

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

'Sec. 1. 24 MRSA §2328 is enacted to read:

§2328. Optional coverage for ~~Optometric~~ services

1. Coverage required to be made available. Every nonprofit hospital or medical service organization which issues group health care contracts providing coverage for the services of a "physician" or "doctor" to residents of this State shall make available coverage for the comparable services of an optometrist to the extent the services are within the lawful scope of practice of an optometrist licensed to practice in this State, provided<sup>that</sup> the optometrist performing the services has contracted with the organization under terms and conditions which the organization deems satisfactory to its membership.

2. Contract. The group contract making available coverage for the services referred to in this section shall contain provisions for maximum benefits and coinsurance, and reasonable limitations deductibles and exclusions.

Sec. 2. 24-A MRS A §2841 is enacted to read:

§2841. Optional coverage for Optometric services

1. Coverage required to be made available. Every insurer which issues for delivery in this State group health policies which provide coverage on an expense-incurred basis for the services of a "physician" or "doctor" to residents of this State shall make available to all groups such coverage for the comparable services of an optometrist, to the extent the services are within the scope of the practice of an optometrist licensed to practice in this State.

2. Policy. The group or blanket policy making available coverage for the services referred to in this section shall contain provisions for maximum benefits and coinsurance and reasonable limitations, deductibles and exclusions.

Sec. 3. Application. The requirements of this Act shall apply to all policies or contracts executed, delivered or issued for delivery in this State, after January 1, 1982.'

Statement of Fact

The purpose of this amendment is to make the requirement for optional optometric service coverage applicable to nonprofit hospital or medical service organizations, and to assure that such organizations and insurance companies may structure coverage responsive to the needs of their insureds.

Reported by the Committee on Business Legislation.

Reproduced and distributed pursuant to Senate Rule 11-A.

April 24, 1981

(Filing No. S-134)