

MAINE STATE LEGISLATURE

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1 (New Draft of S.P. 200, L.D. 534)
2 (New Title)
3 FIRST REGULAR SESSION
4

5 ONE HUNDRED AND TWELFTH LEGISLATURE
6

7 Legislative Document

No. 1392

8
9 S.P. 518

In Senate, April 24, 1985

10 Reported by Majority Report from the Committee on Business and
11 Commerce and printed under Joint Rule 2. Original bill sponsored by
12 President Pray of Penobscot. Cosponsored by Senator Bustin of Kennebec,
Representative Higgins of Scarborough and Representative Diamond of
Bangor.

JOY J. O'BRIEN, Secretary of the Senate

13
14 STATE OF MAINE
15

16 IN THE YEAR OF OUR LORD
17 NINETEEN HUNDRED AND EIGHTY-FIVE
18

19 AN ACT to Provide Coverage for Chiropractic
20 Services Under Hospital Service Plans,
21 Medical Service Plans and Insurance
22 Policies.
23

24 Be it enacted by the People of the State of Maine as
25 follows:

26 Sec. 1. 24 MRSa §2303-B, as amended by PL 1981,
27 c. 282, §1, is repealed.

28 Sec. 2. 24 MRSa §2303-C is enacted to read:

29 §2303-C. Coverage for chiropractic services

30 1. Services. Notwithstanding any other provi-
31 sions of this chapter, every nonprofit hospital or
32 medical service organization which issues group and
33 individual health care contracts providing coverage
34 for the services of a "physician" or "doctor" to res-

1 idents of this State shall provide coverage to any
2 subscriber or other person covered under those con-
3 tracts for those services when performed by a chiro-
4 practor, to the extent that the services are within
5 the lawful scope of practice of a chiropractor li-
6 icensed to practice in this State.

7 2. Limits; coinsurance; deductibles. Any con-
8 tract which provides coverage for the services re-
9 quired by this section may contain provisions for
10 maximum benefits and coinsurance and reasonable limi-
11 tations, deductibles and exclusions to the extent
12 that these provisions are not inconsistent with the
13 requirements of this section or the limitations, co-
14 insurance, deductibles or exclusions imposed on other
15 providers.

16 3. Reports to the Superintendent of Insur-
17 ance. Every nonprofit hospital or medical service
18 organization subject to this section shall report its
19 experience for each calendar year beginning with 1986
20 to the Superintendent of Insurance not later than
21 April 30th of the following year. The report shall
22 be in a form prescribed by the superintendent and
23 shall include the amount of claims paid in this State
24 for the services required by this section and the to-
25 tal amount of claims paid in this State for group
26 health care contracts. The superintendent shall com-
27 pile this data for all nonprofit hospital or medical
28 service organizations in an annual report.

29 4. Application; expiration. The requirements of
30 this section apply to all policies executed, deliv-
31 ered, issued for delivery or renewed in this State on
32 or after January 1, 1986. For purposes of this sec-
33 tion only, all policies shall be deemed to be renewed
34 no later than the next yearly anniversary of the pol-
35 icy date. The requirements of this section expire on
36 January 1, 1990.

37 Sec. 3. 24-A MRSA §2748 is enacted to read:

38 §2748. Coverage for chiropractic services

39 1. Therapeutic, adjustive and manipulative ser-
40 vices. Notwithstanding any other provisions of this
41 chapter, every insurer which issues health care con-

1 tracts providing coverage for the services of a "phy-
2 sician" or "doctor" to residents of this State shall
3 provide coverage to any subscriber or other person
4 covered under those contracts for those services when
5 performed by a chiropractor, to the extent that the
6 services are within the lawful scope of practice of a
7 chiropractor licensed to practice in this
8 State. Therapeutic, adjustive and manipulative ser-
9 vices shall be covered whether performed by an
10 allopathic, osteopathic or chiropractic doctor.

11 2. Limits; coinsurance; deductibles. Any con-
12 tract which provides coverage for the services re-
13 quired by this section may contain provisions for
14 maximum benefits and coinsurance and reasonable limi-
15 tations, deductibles and exclusions to the extent
16 that these provisions are not inconsistent with the
17 requirements of this section or the limitations, co-
18 insurance, deductibles or exclusions imposed on other
19 providers.

20 3. Reports to the Superintendent of Insur-
21 ance. Every insurer subject to this section shall
22 report its experience for each calendar year begin-
23 ning with 1986 to the Superintendent of Insurance not
24 later than April 30th of the following year. The re-
25 port shall be in a form prescribed by the superin-
26 tendent and shall include the amount of claims paid
27 in this State for the services required by this sec-
28 tion and the total amount of claims paid in this
29 State for health care contracts. The superintendent
30 shall compile this data for all insurers in an annual
31 report.

32 4. Application; expiration. The requirements of
33 this section apply to all contracts executed, deliv-
34 ered, issued for delivery or renewed in this State on
35 or after January 1, 1986. For purposes of this sec-
36 tion only, all contracts shall be deemed to be re-
37 newed no later than the next yearly anniversary of
38 the contract date. The requirements of this section
39 expire on January 1, 1990.

40 Sec. 4. 24-A MRSA §2840, as amended by PL 1981,
41 c. 282, §2, is repealed.

42 Sec. 5. 24-A MRSA §2840-A is enacted to read:

1 §2840-A. Coverage for chiropractic services

2 1. Therapeutic, adjustive and manipulative ser-
3 vices. Notwithstanding any other provisions of this
4 chapter, every insurer which issues group or blanket
5 health care contracts providing coverage for the ser-
6 vices of a "physician" or "doctor" to residents of
7 this State shall provide coverage to any subscriber
8 or other person covered under those contracts for
9 those services when performed by a chiropractor, to
10 the extent that the services are within the lawful
11 scope of practice of a chiropractor licensed to prac-
12 tice in this State. Therapeutic, adjustive and ma-
13 nipulative services shall be covered whether per-
14 formed by an allopathic, osteopathic or chiropractic
15 doctor.

16 2. Limits; coinsurance; deductibles. Any con-
17 tract which provides coverage for the services re-
18 quired by this section may contain provisions for
19 maximum benefits and coinsurance and reasonable limi-
20 tations, deductibles and exclusions to the extent
21 that these provisions are not inconsistent with the
22 requirements of this section.

23 3. Reports to the Superintendent of Insur-
24 ance. Every insurer subject to this section shall
25 report its experience for each calendar year begin-
26 ning with 1986 to the Superintendent of Insurance not
27 later than April 30th of the following year. The re-
28 port shall be in a form prescribed by the superin-
29 tendent and shall include the amount of claims paid
30 in this State for the services required by this sec-
31 tion and the total amount of claims paid in this
32 State for health care contracts. The superintendent
33 shall compile this data for all insurers in an annual
34 report.

35 4. Application; expiration. The requirements of
36 this section apply to all contracts executed, deliv-
37 ered, issued for delivery or renewed in this State on
38 or after January 1, 1986. For purposes of this sec-
39 tion only, all contracts shall be deemed to be re-
40 newed no later than the next yearly anniversary of
41 the contract date. The requirements of this section
42 expire on January 1, 1990.

1 STATEMENT OF FACT

2 Under this new draft nonprofit hospital or medi-
3 cal service organizations and insurers which issue
4 group or individual health care contracts providing
5 coverage for the services of a physician or doctor
6 shall provide coverage for such services when per-
7 formed by a chiropractor to the extent the services
8 are within a chiropractor's scope of practice. In
9 the case of insurance policies issued by insurers un-
10 der the Maine Revised Statutes, Title 24-A,
11 therapeutic, adjustive and manipulative services
12 shall be covered whether performed by an allopathic,
13 osteopathic or chiropractic doctor.

14 Reasonable limits, coinsurance, deductibles and
15 exclusions are allowed to the extent they are not in-
16 consistent with the requirements of this section or
17 those imposed on other providers.

18 The new draft goes into effect on January 1, 1986
19 and sunsets on January 1, 1990. Organizations and
20 insurers must report on their experience under Maine
21 law to the Superintendent of Insurance.

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