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. 1437
4	DATE: 3/17/94 (Filing No. H-859)
4	
6	BANKING & INSURANCE
8	
10	Reproduced and distributed under the direction of the Clerk of the House.
12	
14 16	STATE OF MAINE HOUSE OF REPRESENTATIVES 116TH LEGISLATURE SECOND REGULAR SESSION
18	COMMITTEE AMENDMENT " To H.P. 1071, L.D. 1437, "Resolve,
20	to Require That Doctors of Chiropractic Be Included as Select Physicians in the Maine State Employees Health Plan"
22	
24	Amend the resolve by striking out the title and substituting the following:
26	'An Act Regarding Access to Chiropractic Services'
28 30	Further amend the resolve by striking out everything after the title and before the statement of fact and inserting in its place the following:
32	Be it enacted by the People of the State of Maine as follows:
34	Sec. 1. 24 MRSA §2303-C, sub-§3, as amended by PL 1989, c. 141, §1, is further amended to read:
36	
2.0	3. Report to Superintendent of Insurance. Every nonprofit
38	hospital or medical service organization subject to this section shall report its experience for each calendar year to the
40	shall report its experience for each calendar year to the Superintendent of Insurance not later than April 30th of the
	following year. The report shall must be in a form prescribed by
42	the superintendent and shall include the amount of claims paid in
4.4	this State for the services required by this section and the
44	total amount of claims paid in this State for group health care contracts. The report must include complaints concerning access
46	to services under this section and the results of those complaints. The superintendent shall compile this data for all

Page 1-LR2207(2)

nonprofit hospital or medical service organizations in an annual

48

report.

2	Sec. 2. 24-A MRSA §2748, sub-§3, as amended by PL 1989, c.
4	141, §3, is further amended to read:
-	3. Report to Superintendent of Insurance. Every insurer
6	subject to this section shall report its experience for each calendar year to the Superintendent of Insurance not later than
8	April 30th of the following year. The report shall must be in a
10	form prescribed by the superintendent and shall include the amount of claims paid in this State for the services required by
12	this section and the total amount of claims paid in this State for health care contracts. The report must include complaints
14	concerning access to services under this section and the results of those complaints. The superintendent shall compile this data
	for all insurers in an annual report.
16	Sec. 3. 24-A MRSA §4211, sub-§2, ¶B, as enacted by PL 1975, c.
18	503, is amended to read:
20	B. The total number and disposition of complaints handled through such the complaint system and a compilation of
22	causes underlying the complaints filed. Complaints concerning access to chiropractic providers and the results
24	of those complaints must be separately identified;
26	Sec. 4. 24-A MRSA §4228, sub-§1, ¶A, as enacted by PL 1987, c. 168, §5, is amended to read:
28	A. The number and type of evaluations performed.
30	
32	(1) For the purposes of this section, the term "type of evaluations" means the following preutilization
-	review categories: Presurgieal presurgical inpatient
34	days; setting of medical service, such as inpatient or outpatient services; and the number of days of service;.
36	
2.0	(2) The report must separately identify the number of
38	evaluations performed in which the health care services requested or provided included chiropractic services
40	and the results of those evaluations;
42	
44	STATEMENT OF FACT
-00	This amendment replaces the entire resolve.
46	
	The amendment requires the annual report from every
48	nonprofit hospital or medical service corporation to the Superintendent of Insurance to include complaints concerning
50	access to chiropractic services and the results of those

2

б

10

12

1.4

complaints. The amendment imposes the same requirements on insurers.

The amendment requires the annual report of health maintenance organizations to the Superintendent of Insurance and the Commissioner of Human Services to include a separate listing of complaints concerning access to chiropractic services.

The amendment requires the annual report on utilization review of health maintenance organizations to the Superintendent of Insurance to include the number of evaluations concerning chiropractic services and the results of those evaluations.

This amendment also conforms existing law to current drafting standards.