

# MAINE STATE LEGISLATURE

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# 116th MAINE LEGISLATURE

## SECOND REGULAR SESSION-1994

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Legislative Document

No. 1637

H.P. 1218

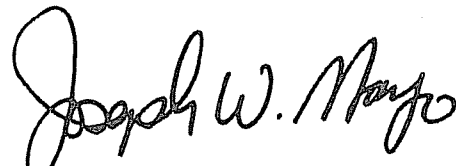
House of Representatives, January 5, 1994

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**An Act Regarding Insurance Coverage for Mental Illness.**

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Approved for introduction by a majority of the Legislative Council pursuant to Joint Rule 26.  
Reference to the Committee on Banking and Insurance suggested and ordered printed.

  
JOSEPH W. MAYO, Clerk

Presented by Representative DORE of Auburn.  
Cosponsored by Representatives: FITZPATRICK of Durham, RAND of Portland, Senator:  
CAREY of Kennebec.

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

2  
3       **Sec. 1. 24 MRSA §2325-A, sub-§5-C**, as enacted by PL 1993, c.  
4 441, §1, is amended to read:

6       **5-C. Coverage for certain mental illness treatment.**  
7 Coverage for medical treatment for mental illnesses listed in  
8 paragraph A is subject to this subsection. Nothing in this  
9 subsection requires benefit levels or maximum lifetime or annual  
10 benefits for medical treatment for mental illness that exceed the  
11 benefit levels or maximum lifetime or annual benefits for other  
12 illnesses and diseases.

14       A. All group contracts must provide at a minimum benefits  
15 according to paragraph B, subparagraphs (1) to (3) for the  
16 usual, customary and reasonable charges for a person  
17 receiving medical treatment for:

- 18               (1) Schizophrenia;  
19  
20               (2) Bipolar disorder;  
21  
22               (3) Pervasive developmental disorder, or autism;  
23  
24               (4) Childhood schizophrenia;  
25  
26               (5) Psychotic depression, or involuntional melancholia;  
27  
28               (6) Paranoia;  
29  
30               (7) Panic disorder;  
31  
32               (8) Obsessive-compulsive disorder; or  
33  
34               (9) Major depressive disorder.

36       B. All policies and certificates executed, delivered,  
37 issued for delivery, continued or renewed in this State on  
38 or after January 1, 1994 must provide benefits that meet the  
39 requirements of this paragraph. For purposes of this  
40 paragraph, all contracts are deemed to be renewed no later  
41 than the next yearly anniversary of the contract date.

44               (1) The contracts must provide inpatient care benefits  
45 of at least 60 days per calendar year.

46               (2) The contracts must provide outpatient care  
47 benefits of at least \$2,000 for any combination of  
48 outpatient and day treatment care. The minimum level  
49 of benefits provided must be at least 50% of the usual,  
50 customary and reasonable charge.

2 (3) The contracts must contain a maximum lifetime  
4 benefit of at least \$100,000 for the aggregate costs  
associated with -a- mental illness.

6 This subsection does not apply to certificates covering employees  
8 of employers with 12 or fewer employees, whether the group policy  
is issued to the employer, to an association or to a multiple  
employer trust.

10 This subsection is repealed July 1, 1995.

12 **Sec. 2. 24 MRSA §2325-A, sub-§9**, as repealed and replaced by  
14 PL 1993, c. 441, §2, is amended to read:

16 **9. Application; expiration.** Except as otherwise provided,  
18 the requirements of this section apply to all policies and any  
20 certificates executed, delivered, issued for delivery, continued  
22 or renewed in this State on or after January 1, 1984. For  
24 purposes of this section, all contracts are deemed to be renewed  
no later than the next yearly anniversary of the contract date.  
26 ~~This subsection does not apply to certificates covering employees~~  
~~of employers with 12 or fewer employees, whether the group policy~~  
~~is issued to the employer, to an association or to a multiple~~  
~~employer trust. Such employers are subject to the provisions of~~  
~~chapter 330 of the Bureau of Insurance rules unless exempted by~~  
~~virtue of Title 24, section 2325-A, subsection 5-A or Title 24-A,~~  
~~section 2842, subsection 5.~~

30 **Sec. 3. 24-A MRSA §2843, sub-§5-C**, as enacted by PL 1993, c.  
32 441, §3, is amended to read:

34 **5-C. Coverage for certain mental illness treatment.**  
Coverage for medical treatment for mental illnesses listed in  
36 paragraph A is subject to this subsection. Nothing in this  
subsection requires benefit levels or maximum lifetime or annual  
38 benefits for medical treatment for mental illness that exceed the  
benefit levels or maximum lifetime or annual benefits for other  
illnesses and diseases.

40 A. All group contracts must provide at a minimum benefits  
42 according to paragraph B, subparagraphs (1) to (3) for the  
usual, customary and reasonable charges for a person  
44 receiving medical treatment for:

- 46 (1) Schizophrenia;
- 48 (2) Bipolar disorder;
- 50 (3) Pervasive developmental disorder, or autism;

- 2 (4) Childhood schizophrenia;  
4 (5) Psychotic depression, or involuntional melancholia;  
6 (6) Paranoia;  
8 (7) Panic disorder;  
10 (8) Obsessive-compulsive disorder; or  
12 (9) Major depressive disorder.

14 B. All policies and certificates executed, delivered,  
16 issued for delivery, continued or renewed in this State on  
18 or after January 1, 1994 must provide benefits that meet the  
20 requirements of this paragraph. For purposes of this  
22 paragraph, all contracts are deemed to be renewed no later  
24 than the next yearly anniversary of the contract date.

(1) The contracts must provide inpatient care benefits  
of at least 60 days per calendar year.

(2) The contracts must provide outpatient care  
benefits of at least \$2,000 for any combination of  
outpatient and day treatment care. The minimum level  
of benefits provided must be at least 50% of the usual,  
customary and reasonable charge.

(3) The contracts must contain a maximum lifetime  
benefit of at least \$100,000 for the aggregate costs  
associated with -a- mental illness.

34 This subsection does not apply to certificates covering employees  
36 of employers with 12 or fewer employees, whether the group policy  
is issued to the employer, to an association or to a multiple  
38 employer trust.

This subsection is repealed July 1, 1995.

40 **Sec. 4. 24-A MRSA §2843, sub-§8,** as repealed and replaced by  
42 PL 1993, c. 441, §4, is amended to read:

44 **8. Application; expiration.** Except as otherwise provided,  
46 the requirements of this section apply to all policies and any  
48 certificates executed, delivered, issued for delivery, continued  
50 or renewed in this State on or after January 1, 1984. For  
purposes of this section, all contracts are deemed to be renewed  
no later than the next yearly anniversary of the contract date.  
~~This subsection does not apply to certificates covering employees~~

2 of-employers-with-12-or-fewer-employees,-whether-the-group-policy  
is-issued-to-the-employer,-to-an-association-or-to-a-multiple  
4 employer-trust.--Such-employers-are-subject-to-the-provisions-of  
chapter-330-of-the-Bureau-of-Insurance-rules-unless-exempted-by  
6 virtue-of-Title-24,-section-2325-A,-subsection-5-A-or-Title-24-A,  
section-2842,-subsection-5.

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## STATEMENT OF FACT

12 This bill makes 2 technical corrections in mental illness  
insurance benefits law enacted in 1993. It corrects the lifetime  
14 cap on mental illness benefits, changing the language from "costs  
associated with a mental illness" to "costs associated with  
16 mental illness." It removes 2 sentences added to the application  
sections of the mental illness provisions, moving one sentence to  
18 the coverage subsection and deleting the other.

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This document has not yet been reviewed to determine the  
26 need for cross-reference, stylistic and other technical  
amendments to conform existing law to current drafting standards.

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