## MAINE STATE LEGISLATURE

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## 117th MAINE LEGISLATURE

## **FIRST REGULAR SESSION-1995**

Legislative Document

No. 752

S.P. 280

In Senate, March 7, 1995

An Act to Include Obstetricians and Gynecologists as Primary Care Providers.

Reference to the Committee on Banking and Insurance suggested and ordered printed.

MAY M. ROSS

Secretary of the Senate

Presented by Senator MILLS of Somerset.

Cosponsored by Senator: RAND of Cumberland, Representative: MERES of Norridgewock.

medical services plan contract or a nonprofit health care contract that designates certain physicians as primary physicians must include physicians providing gynecological obstetrical services as primary care physicians.  2. Required coverage. An individual or group nonp medical services plan contract or a nonprofit health care contract must provide the following gynecological and obstet services when provided by a physician:  A. Semiannual gynecological examinations, including ropelvic and clinical breast examinations and Pap smears;  B. Gynecological and obstetrical services required result of services pursuant to paragraph A; and  C. Gynecological and obstetrical services required result of an acute health care condition or pregnancy.  3. Written notice. An individual or group nonp medical services plan contract or a nonprofit health care contract must provide within the contract written notice or availability of services provided pursuant to this section.  4. Application. This section applies to any con executed, delivered, issued for delivery, continued or renew this State on or after January 1, 1996. For purposes of section, a contract is deemed to be renewed no later than next anniversary of the contract date.  Sec. 2. 24-A MRSA §2745-C is enacted to read:  §2745-C. Gynecological and obstetrical services  1. Required designation. Individual insurance peli except those designed to cover only specific diseases, accidinjury or dental procedures, that designate certain physician primary care physicians must include physicians prov	§2332-F. Gynecological and obstetrical services
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	gynecological and obstetrical services as primary care physici
2. Required coverage. An individual health insu	policy must provide the following gynecological and obstetr

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

services when provided by a physician:

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	A. Semiannual gynecological examinations, including routine
	pelvic and clinical breast examinations and Pap smears;
	B. Gynecological and obstetrical services required as a
	result of services pursuant to paragraph A; and
	C. Gynecological and obstetrical services required as a
	result of an acute health care condition or pregnancy.
	3. Written notice. An individual health insurance policy
	t provide within the policy written notice of the availability
of s	services provided pursuant to this section.
	A Application White mostion applies to any policy
	4. Application. This section applies to any policy
	cuted, delivered, issued for delivery, continued or renewed in
	s State on or after January 1, 1996. For purposes of this
	tion, a policy is deemed to be renewed no later than the next
<u>ann:</u>	iversary of the policy date.
	Sec. 3. 24-A MRSA §2850-A is enacted to read:
	bec. 5. 24-A MikbA g2050-A Is enacted to read.
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	1. Primary care. An insurance policy or contract, except a
nol i	icy or contract that covers only dental procedures, accidental
	ary or specific diseases, that designates certain physicians
	primary care physicians must include physicians providing
	ecological and obstetrical services as primary care physicians.
37	cological and obsectived services as primary care physicians.
	2. Required designation. An insurance policy or contract
must	provide the following gynecological and obstetrical services
	provided by a physician:
	A. Semiannual gynecological examinations, including routine
	pelvic and clinical breast examinations and Pap smears;
	B. Gynecological and obstetrical services required as a
	result of services pursuant to paragraph A; and
	C. Gynecological and obstetrical services required as a
	result of an acute health care condition or pregnancy.
	3. Written notice. An insurance policy or contract must
prov	vide within the policy or contract written notice of the
	lability of services provided pursuant to this section.
	<u>-</u>
	4. Application. This section applies to a policy or
	ract executed, delivered, issued for delivery, continued or
~~~	wed in this State on or after January 1, 1996. For purposes

2	of this subsection, a policy or contract is deemed to be renewed
2	no later than the next anniversary of the policy or contract date.
4	Sec. 4. 24-A MRSA §4237 is enacted to read:
6	§4237. Gynecological and obstetrical services
8	1. Required designation. An individual or group contract subject to this chapter that designates certain physicians as
10	<pre>primary care physicians must include physicians providing gynecological and obstetrical services as primary care physicians.</pre>
12	2. Required coverage. An individual or group contract
14	subject to this chapter must provide the following gynecological and obstetrical services when provided by a physician:
16 18	A. Semiannual gynecological examinations, including routine pelvic and clinical breast examinations and Pap smears;
20	B. Gynecological and obstetrical services required as a result of services pursuant to paragraph A; and
22 24	C. Gynecological and obstetrical services required as a result of an acute health care condition or pregnancy.
26 28	3. Written notice. An individual or group contract must provide within the contract written notice of the availability of services provided pursuant to this section.
30	4. Application. This section applies to any individual or
32	group contract executed, delivered, issued for delivery, continued or renewed in this State on or after January 1, 1996. For purposes of this subsection, a contract is deemed to be
34	renewed no later than the next anniversary of the contract date.
36	Sec. 5. Effective date. This Act takes effect January 1, 1996.
38	STATEMENT OF FACT
40	
42	This bill makes identical changes in the requirements for individual health insurance, group health insurance and health
44	care coverage provided by nonprofit hospital and medical service organizations and health maintenance organizations. All
46	requirements take effect on January 1, 1996. The requirements include the following.

 Plans that designate physicians as primary care providers must designate physicians providing gynecological and obstetrical services as primary care providers.

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- 2. Coverage must be provided for semiannual gynecological examinations and gynecological and obstetrical services required as a result of those exams or as a result of an acute health care condition and pregnancy.
- 3. Written notice of gynecological and obstetrical service coverage must be provided.