

MAINE STATE LEGISLATURE

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118th MAINE LEGISLATURE

FIRST REGULAR SESSION-1997

Legislative Document

No. 1206

H.P. 889

House of Representatives, February 25, 1997

**An Act to Ensure Patient Choice and Access to Health Care by Offering
a Point-of-service Plan.**

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

A handwritten signature in cursive script that reads "Joseph W. Mayo".

JOSEPH W. MAYO, Clerk

Presented by Representative SAXL of Bangor.
Cosponsored by Senator MILLS of Somerset and
Representatives: CARLETON of Wells, FULLER of Manchester, HATCH of Skowhegan,
MAYO of Bath, O'NEAL of Limestone, O'NEIL of Saco, SAXL of Portland, THOMPSON
of Naples.

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

2
4 Sec. 1. 24-A MRSA §4304, sub-§5 is enacted to read:

6 5. Services outside provider network. A carrier that
8 restricts access to providers shall offer to all eligible
10 enrollees the opportunity to obtain coverage through a
12 point-of-service plan for out-of-network services or in-network
14 services without a referral.

16 Except as otherwise provided by state law or any waiver granted
18 by the federal Department of Health and Human Services for the
20 operation of the Medicaid program in the State, a
22 point-of-service plan may charge an enrollee, who chooses to
24 obtain point-of-service coverage, an additional or alternative
26 premium, copay, coinsurance or deductible that reflects no more
28 than the actuarial value of that coverage.

30 All sponsors of point-of-service plans and all providers, upon
32 request, shall disclose their fees, applicable payment schedules,
34 coinsurance requirements or any other financial requirements that
36 affect patient payment levels.

For purposes of this subsection, a "point-of-service" plan or an
 "out-of-network" plan means a plan that offers services to
 enrollees through a provider network and in addition offers
 services or access to health care by network and nonnetwork
 providers.

SUMMARY

 This bill requires health insurers who restrict access to
 health care providers to allow enrollees to obtain coverage
 through a point-of-service plan.