

# MAINE STATE LEGISLATURE

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# 119th MAINE LEGISLATURE

## FIRST REGULAR SESSION-1999

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Legislative Document

No. 1205

S.P. 416

In Senate, February 11, 1999

**An Act Concerning Access to Obstetrical and Gynecological Services  
Provided Through Managed Care Plans.**

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

A handwritten signature in cursive script that reads "Joy J. O'Brien".

JOY J. O'BRIEN  
Secretary of the Senate

Presented by Senator MURRAY of Penobscot.  
Cosponsored by Representative FULLER of Manchester and  
Senators: KONTOS of Cumberland, RAND of Cumberland, Representatives: DUDLEY of  
Portland, GAGNON of Waterville, O'NEIL of Saco, PERRY of Bangor, SAXL of Portland.

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

2  
3       **Sec. 1. 24 MRSA §2332-G, sub-§1**, as reallocated by RR 1995, c.  
4 2, §49 and affected by §50, is amended to read:

6       **1. Coverage in managed care plans.** With respect to managed  
7 care plans that require subscribers to select primary care  
8 physicians, a nonprofit hospital and medical service organization  
9 that issues group contracts must meet the following requirements.

10       A. The organization must permit a physician who specializes  
11 in obstetrics and gynecology to serve as a primary care  
12 physician if the physician qualifies under the  
13 organization's credentialling policy.

14       B. All group plan contracts must provide coverage for an  
15 ~~annual-gynecological-examination,--including--routine--pelvic~~  
16 ~~and--clinical--breast--examinations,~~ primary, preventive and  
17 therapeutic obstetrics and gynecological services indicated  
18 for a woman's health care and required as a result of any  
19 gynecological examination or as a result of a gynecological  
20 condition, performed by a physician, certified nurse  
21 practitioner or certified nurse midwife participating in the  
22 plan, without requiring the prior approval of the primary  
23 care physician. The contract may require the participating  
24 obstetrical-gynecological provider to provide written notice  
25 of the services provided and any treatment plan to the  
26 woman's primary care physician.

27       C. ~~--If--the--examination--specified--in--paragraph--B--reveals--a~~  
28 ~~gynecological--condition--for--which--another--visit--to--the~~  
29 ~~physician--participating--in--the--plan--is--medically--required~~  
30 ~~and--appropriate,--or--for--any--gynecological--care--beyond--the~~  
31 ~~annual--examination,--the--carrier--may--require--the--patient--or~~  
32 ~~the--examining--physician,--certified--nurse--practitioner--or~~  
33 ~~certified--nurse--midwife--to--secure--from--the--patient's--primary~~  
34 ~~care--physician--a--referral--to--the--participating--physician,~~  
35 ~~certified--nurse--practitioner--or--certified--nurse--midwife--from~~  
36 ~~whom--such--care--may--be--obtained.~~

37       **Sec. 2. 24-A MRSA §2847-F, sub-§1**, as reallocated by PL 1997,  
38 c. 370, Pt. H, §1, is amended to read:

39       **1. Coverage in managed care plans.** With respect to managed  
40 care plans that require group members to select primary care  
41 physicians, an insurer that issues group health insurance  
42 policies and contracts must meet the following requirements.

43       A. The insurer must permit a physician who specializes in  
44 obstetrics and gynecology to serve as a primary care  
45 physician if the physician qualifies under the insurer's  
46 credentialling policy.

2 B. All group plan contracts must provide coverage for an  
4 ~~annual-gynecological-examination,--including-routine-pelvic~~  
~~and-clinical-breast-examinations,~~ primary, preventive and  
6 therapeutic obstetrics and gynecological services indicated  
8 for a woman's health care and required as a result of any  
10 gynecological examination or as a result of a gynecological  
12 condition, performed by a physician, certified nurse  
14 practitioner or certified nurse midwife participating in the  
plan, without requiring the prior approval of the primary  
care physician. The contract may require the participating  
obsterical-gynecological provider to provide written notice  
of the services provided and any treatment plan to the  
woman's primary care physician.

16 ~~C.--If-the-examination-specified-in-paragraph-B-reveals-a~~  
18 ~~gynecological--condition--for--which--another--visit--to--the~~  
20 ~~physician-participating-in-the-plan-is-medically-required~~  
22 ~~and-appropriate,--or-for-any-gynecological-care-beyond-the~~  
24 ~~annual-examination,--the-carrier-may-require-the-patient-or~~  
26 ~~the-examining-physician,--certified-nurse-practitioner--or~~  
certified nurse midwife to secure from the patient's primary  
care physician a referral to the participating physician,  
certified nurse practitioner or certified nurse midwife from  
whom such care may be obtained.

28 **Sec. 3. 24-A MRSA §4241, sub-§1,** as enacted by PL 1995, c.  
617, §5 and affected by §6, is amended to read:

30 **1. Coverage in managed care plans.** With respect to managed  
32 care plans that require enrollees to select primary care  
34 physicians, a health maintenance organization that issues group  
policies and contracts must meet the following requirements.

36 A. The health maintenance organization must permit a  
38 physician who specializes in obstetrics and gynecology to  
serve as a primary care physician if the physician qualifies  
under the organization's credentialing policy.

40 B. All group plan contracts must provide coverage for an  
42 ~~annual-gynecological-examination,--including-routine-pelvic~~  
~~and-clinical-breast-examinations,~~ primary, preventive and  
44 therapeutic obstetrics and gynecological services indicated  
46 for a woman's health care and required as a result of a  
48 gynecological examination or as a result of a gynecological  
50 condition, performed by a physician, certified nurse  
52 practitioner or certified nurse midwife participating in the  
plan, without requiring the prior approval of the primary  
care physician. The contract may require the participating  
obsterical-gynecological provider to provide written notice  
of the services provided and any treatment plan to the  
woman's primary care physician.

