MAINE STATE LEGISLATURE

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2	DAME. May 2. 2001	(milion W. g. 199)
4	DATE: May 2, 2001	(Filing No. S-129)
б	BANKING AND	INSURANCE
8	Reported by:	
10	Reproduced and distributed under of the Senate.	the direction of the Secretary
12	STATE OF	MAINE
14	SENA 120TH LEGIS	TE
16	FIRST REGULA	AR SESSION
18	COMMITTEE AMENDMENT " #" to S	.P. 26, L.D. 126, Bill, "An Act
20	to Clarify Certain Provisions of Maintenance Organizations and Healt	_
22	Amend the bill by striking	g out all of section 2 and
24	inserting in its place the following	
26	'Sec. 2. 24-A MRSA §4303, sub 742, §6, is further amended to read	- $\S1$, as amended by PL 1999, c.
28	1. Demonstration of adequ	ate access to providers. A
30	carrier offering a managed care pl reasonable access to health care	an shall provide to its members
32	standards developed by rule by standards must consider the geometric standards must consider the geometric standards must be standards as a second standard by the standards must be standards as a second standard by the standards are second standards.	-
34	_	managed care plans covering
36	providers consistent with the according applicable bureau rule.	
38	For the purposes of this subse	estion "reasonable assess to
40	providers" may be construed to in provide different coinsurance or c	nclude managed care plans that
42	encourage a member to use designa long as the carrier's entire netw	ted providers in a network, as
44	as long as the coinsurance or copay	
46	A. Include coinsurance or exceed 30%;	copayment differentials that
48	B. Apply to emergency service	es.

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COMMITTEE AMENDMENT "A to S.P. 26, L.D. 126

8.66	
Sec. al.	

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18	SUMMARY
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	transplant services.'
14	E. Require a member to pay costs of transportation to providers of specialty and tertiary services, including
12	
	and
10	with a particular transplant service regardless of distance;
	be selected by a carrier based on quality and experience
8	residence, except that providers of transplant services may
	services located more than 200 miles from the member's
б	D. Direct a member to providers of specialty and tertiary
•	
4	superintendent;
	outside access standards required in rules adopted by the
2	C. Direct a member to providers of primary care services

This amendment is the minority report of the committee. The amendment clarifies that the access standards under chapter 56 and chapter 56-A of the Maine Insurance Code do not prohibit managed care plans that give financial incentives to members who elect to use certain designated providers in a network as long as the incentives meet certain standards.

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