



## **120th MAINE LEGISLATURE**

## **FIRST REGULAR SESSION-2001**

Legislative Document

No. 126

S.P. 26

In Senate, January 11, 2001

An Act to Clarify Certain Provisions of the Laws Governing Health Maintenance Organizations and Health Plans.

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

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JOY J. O'BRIEN Secretary of the Senate

Presented by Senator LaFOUNTAIN of York. Cosponsored by Representative O'NEIL of Saco and Senator ABROMSON of Cumberland, Representatives: MAYO of Bath, SULLIVAN of Biddeford.

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

Sec. 1. 24-A MRSA §4203, sub-§3, ¶S, as amended by PL 1997, c. 370, Pt. F, §1, is further amended to read:

б s. A list of the names and addresses of all physicians and facilities with which the health maintenance organization 8 has or will have agreements. If products are offered that pay full benefits only when providers within a subset of the 10 contracted physicians or facilities are utilized, a list of the providers in that limited network must be included, as well as a list of the geographic areas where the products 12 are offered. Nothing in this paragraph may be construed to prohibit a health maintenance organization from offering 14 products that provide financial incentives to its members to utilize designated providers in a network, as long as the 16 entire network meets access standards.

Sec. 2. 24-A MRSA §4303, sub-§1, as amended by PL 1999, c. 742,  $\S6$ , is further amended to read: 20

22 1. Demonstration of adequate access to providers. Α carrier offering a managed care plan shall provide to its members 24 reasonable access to health care services in accordance with standards developed by rule by the superintendent. These 26 standards must consider the geographical and transportational All managed care plans covering problems in rural areas. 28 residents of this State must provide reasonable access to providers consistent with the access-to-services requirements of 30 any applicable bureau rule. Nothing in this subsection may be construed to prohibit a managed care plan from offering products 32 that provide financial incentives to its members to utilize designated providers in a network, as long as the entire network 34 meets access standards.

## **SUMMARY**

This bill clarifies that the access standards requirements under the laws governing health maintenance organizations and 40 health plans do not prohibit insurance products that give 42 financial incentives to members who elect to use certain designated providers in a network.

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