MAINE STATE LEGISLATURE

The following document is provided by the

LAW AND LEGISLATIVE DIGITAL LIBRARY

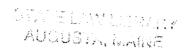
at the Maine State Law and Legislative Reference Library

http://legislature.maine.gov/lawlib



Reproduced from scanned originals with text recognition applied (searchable text may contain some errors and/or omissions)





CORRECTED COPY
December 17, 2003
(Please Destroy any copy
of C "A" S-354 that does
not have the notation
"Corrected Copy")

L.D. 428

DATE: December 16, 2003

(Filing No. S-354)

INSURANCE AND FINANCIAL SERVICES

8 Reported by:

MINORITY

Reproduced and distributed under the direction of the Secretary of the Senate.

12

14

16

10

6

STATE OF MAINE SENATE 121ST LEGISLATURE SECOND REGULAR SESSION

18

20

22

24

26

28

COMMITTEE AMENDMENT (1 %) to S.P. 146, L.D. 428, Bill, "An Act To Eliminate the Department of Professional and Financial Regulation, Bureau of Insurance Travel Restrictions for Obtaining Health Care"

Amend the bill by striking out everything after the enacting clause and before the summary and inserting in its place the following:

'Sec. 1. 24-A MRSA §4203, sub-§3, ¶S, as amended by PL 2003, c. 469, Pt. E, §18, is further amended to read:

30

34

36

38

40

42

44

46

S. A list of the names and addresses of all physicians and facilities with which the health maintenance organization has or will have agreements. If products are offered that pay full benefits only when providers within a subset of the 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 are offered. This paragraph may not be construed to prohibit a health maintenance organization from offering a health plan that includes financial provisions designed to encourage members to use designated providers in a network in-accordance with-section-4303,-subsection-1,-paragraph-A as long as the entire network meets overall geographic access standards of any applicable bureau rule.

Sec. 2. 24-A MRSA §4303, sub-§1, as amended by PL 2003, c. 469, Pt. E, §20, is further amended to read:

48

50

52

1. Demonstration of adequate access to providers. Except as-provided-in-paragraph-A--a A carrier offering a managed care plan shall provide to its members reasonable access to health care services in accordance with standards developed by rule by

Page 1-LR0971(2)

COMMITTEE AMENDMENT "H" to S.P. 146, L.D. 428

48

50

	the superintendent. These standards must consider the
2	geographical and transportational problems in rural areas. All
	managed care plans covering residents of this State must provide
4	reasonable access to providers consistent with the
	access-to-services requirements of any applicable bureau rule.
6	This subsection may not be construed to prohibit a carrier
	offering a managed care plan from offering a plan that includes
8	financial provisions designed to encourage members to use
	designated providers in a network as long as the entire network
10	meets overall geographic access standards of any applicable
	bureau rule.
12	
- 4	AUpon-approval-of-the-super-intendent,-a-carrier-may-offer
14	a-health-plan-that-includes-financial-provisions-designed-to
	encourage-members-to-use-designated-providers-in-a-network
16	±£÷
10	(3)
18	(1) The -entire -network - meets- overall -access - standards
20	pursuant-to-Bureau-of-Insurance-Rule-Chapter-850;
20	(2) mb b 2.25 2.25 2.25 2.25 2.25 2.25 2.25 2
	(2)The-health-plan-is-consistent-with-product-design
22	guidelines-for-Bureau-of-Insurance-Rule-Chapter-750;
2.4	(a) who health when here wet include sincerial
24	(3)Thehealthplandoesnotincludefinancial
2.5	provisions designed to encourage members to use
26	designated-providers-of-primary,-preventive,-maternity,
2.0	<pre>obstetrical,anoillary-or-emergency-care-services,as</pre>
28	defined-in-Bureau-of-Insurance-Rule-Chapter-850;
20	(4) m = financial annulation man and a color of the
30	(4)The-financial-provisions-may-apply-to-all-of-the
22	enrollees-covered-under-the-carrier-s-health-plan;
32	(E) The courier articlishes to the articlestics of the
2.4	(5)The-carrier-establishes to the satisfaction-of-the
34	superintendent-that-the-financial-provisions-permit-the
26	provision-of-better-quality-servicesand-the-quality
36	improvementseithersignificantlyoutweighany
20	detrimental-impact-to-covered-persons-forced-to-travel
38	lenger-distances-to-access-services,-or-the-earrier-has
40	takenstepsto-effectively-mitigateanydetrimental
40	impactassociatedwithrequiringcoveredpersonsto
4.2	travellongerdistancestoaccessscrvicesThe
42	superintendent-may-consult-with-other-state-entities,
4.4	including-the-Department-of-Human-Services,-Bureau-of
44	HealthandtheMaineQualityFerumestablishedin
16	section-6951,to-determine-whether-the-carrier-has-met
46	therequirementsofthissubparagraphThe
	superintendent -shallprovisionallyadoptrules- by

Page 2-LR0971(2)

January--1,--2004-regarding--the--criteria--used--by--the superintendent--to--determine--whether--the--carrier--meets

the -- quality -- requirements -- of -- this -- subparagraph -- and

COMMITTEE AMENDMENT

COMMITTEE AMENDMENT "A" to S.P. 146, L.D. 428

health plan's provider network.

22

24

	present-those-rules-for-legislative-review-during-the
2	Second-Regular-Session-of-the-121st-Legislature;-and
4	(6) The-financial-provisions-may-not-permit-travel-at
	adistance-thatexceeds-thestandardsestablished-in
б	Bureau-ofInsurance-RuleChapter850for- mileage -and travel-time-by-100%-
•	eraver-erme-by-redor.
8	
	This-paragraph-takes-effect-January-1,-2004-and-is-repealed
10	July-1,-2007,'
12	CV D CD C A DV
	SUMMARY
14	
	This amendment is the minority report of the committee. The
16	amendment replaces the bill and repeals the changes made to the
	geographic access standards in the Dirigo Health law, Public Law
18	2003, chapter 469. The amendment clarifies that the geographic
	access standards for managed care plans under the Maine Insurance
••	
20	Code and Bureau of Insurance Rule Chapter 850 do not prohibit

health insurers and health maintenance organizations from developing health plans that give financial incentives to

enrollees who elect to use certain designated providers in a

Page 3-LR0971(2)

COMMITTEE AMENDMENT