MAINE STATE LEGISLATURE

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121st MAINE LEGISLATURE

FIRST REGULAR SESSION-2003

Legislative Document

No. 1353

H.P. 995

House of Representatives, March 13, 2003

An Act To Ensure Women's Health Care Coverage for All Maine Women

(EMERGENCY)

Reference to the Committee on Insurance and Financial Services suggested and ordered printed.

Millicent M. Macfarland
MILLICENT M. MacFARLAND
Clerk

Presented by Representative RICHARDSON of Brunswick.
Cosponsored by Senator EDMONDS of Cumberland and
Representatives: BREAULT of Buxton, CANAVAN of Waterville, MARRACHÉ of
Waterville, McNEIL of Rockland, O'NEIL of Saco, YOUNG of Limestone, Senators:
DOUGLASS of Androscoggin, MITCHELL of Penobscot.

Emergency preamble. Whereas, Acts of the Legislature do not become effective until 90 days after adjournment unless enacted as emergencies; and

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Whereas, this legislation affects all certificates of insurance executed, delivered, continued or renewed after July 1, 2003; and

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Whereas, in the judgment of the Legislature, these facts create an emergency within the meaning of the Constitution of Maine and require the following legislation as immediately necessary for the preservation of the public peace, health and safety; now, therefore,

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

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PART A

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Sec. A-1. 24 MRSA §2318, sub-§6 is enacted to read:

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6. Application to certificates. In addition to policies and contracts otherwise covered under this section, the requirements of this section apply to all certificates executed, delivered, issued for delivery, continued or renewed in this State after July 1, 2003.

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Sec. A-2. 24 MRSA §2318-A, as amended by PL 2001, c. 258, Pt. A, §1, is further amended to read:

§2318-A. Maternity and routine newborn care

A nonprofit hospital or medical service organization that individual and group contracts providing maternity benefits, including benefits for childbirth, shall provide coverage for services related to maternity and routine newborn care, including coverage for hospital stay, in accordance with the attending physician's or attending certified nurse midwife's determination in conjunction with the mother that the mother and newborn meet the criteria outlined in the "Guidelines for Perinatal Care," published by the American Academy of Pediatrics and the American College of Obstetrics and Gynecology. For the purposes of this section, "routine newborn care" does not include any services provided after the mother has been discharged from For the purposes of this section, "attending the hospital. physician" includes the obstetrician, pediatrician or other physician attending the mother and newborn. Benefits for routine newborn care required by this section are part of the mother's benefit. The mother and the newborn are treated as one person in deductible, coinsurance calculating the and copayments coverage required by this section. In addition to policies and

2	contracts otherwise covered under this section, the requirements of this section apply to all certificates executed, delivered,
4	issued for delivery, continued or renewed in this State after July 1, 2003.
6	Sec. A-3. 24 MRSA §2319, last ¶, as amended by PL 1997, c. 604,
8	Pt. C, §1, is further amended to read:
10	The requirements of this section apply to all subscriber contracts delivered or issued for delivery in this State more
12	than 120 days after the effective date of this Aet April 1, 1976. The requirements of this section additionally apply to all
14	certificates executed, delivered, issued for delivery, continued or renewed in this State after July 1, 2003.
16	Sec. A-4. 24 MRSA §2320-C, sub-§3 is enacted to read:
18	3. Application to certificates. In addition to policies and contracts otherwise covered under this section, the
20	requirements of this section apply to all certificates executed, delivered, issued for delivery, continued or renewed in this
22	State after July 1, 2003.
24	Sec. A-5. 24 MRSA §2320-E, as enacted by PL 1995, c. 617, §1 and affected by §6, is amended to read:
26	§2320-E. Coverage for Pap tests
28	All group nonprofit medical service plan contracts and all
30	nonprofit health care plan contracts must provide coverage for screening Pap tests recommended by a physician. In addition to
32	policies and contracts otherwise covered under this section, the requirements of this section apply to all certificates executed,
34	delivered, issued for delivery, continued or renewed in this State after July 1, 2003.
36	Sec. A-6. 24 MRSA §2332-J, sub-§3 is enacted to read:
38	3. Application to certificates. In addition to policies
40	and contracts otherwise covered under this section, the requirements of this section apply to all certificates executed,
42	delivered, issued for delivery, continued or renewed in this State after July 1, 2003.
44 46	PART B
48	Sec. B-1. 24-A MRSA §2741, as enacted by PL 1975, c. 276, §2, is amended to read:

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§2741. Maternity benefits for unmarried women policyholders and the minor dependents of policyholders with dependent or family coverage required

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All health insurance policies and plans shall <u>must</u> provide, at appropriate rates, the same maternity benefits for unmarried women policyholders and the minor dependents of policyholders with dependent or family coverage under the same terms and conditions as such maternity coverage is provided to married policyholders or the wives of policyholders with maternity coverage. This requirement shall-apply <u>applies</u> to all insurance policies and plans issued or renewed after the-effective date-ef this-Aet January 1, 1976. The requirements of this section additionally apply to all certificates executed, delivered, issued for delivery, continued or renewed in this State after July 1, 2003.

Sec. B-2. 24-A MRSA §2743, last ¶, as amended by PL 1997, c. 604, Pt. C, §2, is further amended to read:

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The requirements of this section apply to all policies delivered or issued for delivery in this State more than 120 days after the—effective—date—of—this—Aet April 16, 1976. The requirements of this section additionally apply to all certificates executed, delivered, issued for delivery, continued or renewed in this State after July 1, 2003.

Sec. B-3. 24-A MRSA §2743-A, as amended by PL 2001, c. 258, Pt. A, §2, is further amended to read:

§2743-A. Maternity and routine newborn care

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insurer that issues individual contracts providing maternity benefits, including benefits for childbirth, provide coverage for services related to maternity and routine newborn care, including coverage for hospital stay, in accordance with the attending physician's or attending certified nurse midwife's determination in conjunction with the mother that the mother and newborn meet the criteria outlined in the "Guidelines for Perinatal Care," published by the American Academy of Pediatrics and the American College of Obstetrics Gynecology. For the purposes of this section, "routine newborn care" does not include any services provided after the mother has been discharged from the hospital. For the purposes of this section, "attending physician" includes the obstetrician, pediatrician or other physician attending the mother Benefits for routine newborn care required by this section are part of the mother's benefit. The mother and the newborn are treated as one person in calculating the deductible, coinsurance and copayments for coverage required by

section. In addition to policies and contracts otherwise covered
under this section, the requirements of this section apply to all
certificates executed, delivered, issued for delivery, continued
or renewed in this State after July 1, 2003.

Sec. B-4. 24-A MRSA §2745-C, sub-§3 is enacted to read:

3. Application to certificates. In addition to policies and contracts otherwise covered under this section, the requirements of this section apply to all certificates executed, delivered, issued for delivery, continued or renewed in this State after July 1, 2003.

Sec. B-5. 24-A MRSA §2756, sub-§3 is enacted to read:

3. Application to certificates. In addition to policies and contracts otherwise covered under this section, the requirements of this section apply to all certificates executed, delivered, issued for delivery, continued or renewed in this State after July 1, 2003.

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PART C

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Sec. C-1. 24-A MRSA $\S2832$, as amended by PL 1979, c. 663, $\S146$, is further amended to read:

§2832. Maternity benefits for unmarried women certificate holders and the minor dependents of certificate holders with dependent or family coverage required

All group or blanket health insurance policies and plans shall must provide the same maternity benefits for unmarried women certificate holders, and the minor dependents certificate holders with dependent or family coverage, as is provided married certificate holders with maternity coverage and the wives of certificate holders with maternity coverage. This requirement shall-apply applies to all group or blanket insurance written or renewed after the-effective-date-of-this-Act January 1, 1976, and shall-include includes, but is not be limited to, all types and forms of group insurance issued by individual companies or corporations. In addition to policies and contracts otherwise covered under this section, the requirements of this section apply to all certificates executed, delivered, issued for delivery, continued or renewed in this State after July 1, 2003.

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Sec. C-2. 24-A MRSA $\S2834$, last \P , as amended by PL 1997, c. 604, Pt. C, $\S3$, is further amended to read:

The requirements of this section apply to all policies delivered or issued for delivery in this State more than 120 days after the-effective-date-of-this-Aet April 16, 1976. The requirements of this section additionally apply to all certificates executed, delivered, issued for delivery, continued or renewed in this State after July 1, 2003.

Sec. C-3. 24-A MRSA §2834-A, as amended by PL 2001, c. 258, Pt. A, §3, is further amended to read:

§2834-A. Maternity and routine newborn care

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12 An insurer that issues group contracts providing maternity 14 benefits, including benefits for childbirth, shall provide coverage for services related to maternity and routine newborn 16 care, including coverage for hospital stay, in accordance with the attending physician's or attending certified nurse midwife's 18 determination in conjunction with the mother that the mother and newborn meet the criteria outlined in the "Guidelines Perinatal Care," published by the American Academy of Pediatrics 20 and the American College of Obstetrics and Gynecology. For the purposes of this section, "routine newborn care" does not include 22 any services provided after the mother has been discharged from 24 the hospital. For the purposes of this section, "attending physician" includes the obstetrician, pediatrician or other 26 physician attending the mother and newborn. Benefits for routine newborn care required by this section are part of the mother's benefit. The mother and the newborn are treated as one person in 28 calculating the deductible, coinsurance and copayments for coverage required by this section. In addition to policies and 30 contracts otherwise covered under this section, the requirements of this section apply to all certificates executed, delivered, 32 issued for delivery, continued or renewed in this State after 34 July 1, 2003.

Sec. C-4. 24-A MRSA §2837-C, sub-§3 is enacted to read:

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 3. Application to certificates. In addition to policies and contracts otherwise covered under this section, the requirements of this section apply to all certificates executed, delivered, issued for delivery, continued or renewed in this State after July 1, 2003.
- Sec. C-5. 24-A MRSA §2837-E, as enacted by PL 1995, c. 617, §3 and affected by §6, is amended to read:

§2837-E. Coverage for Pap tests

All group health insurance policies and contracts, except accidental injury, specified disease, hospital indemnity,

Medicare supplement, long-term care and other limited benefit health insurance policies and contracts, must provide coverage for screening Pap tests recommended by a physician. In addition to policies and contracts otherwise covered under this section, the requirements of this section apply to all certificates executed, delivered, issued for delivery, continued or renewed in this State after July 1, 2003.

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Sec. C-6. 24-A MRSA §2847-F, sub-§2, as reallocated by PL 1997, c. 370, Pt. H, §1, is amended to read:

2. Application. This section applies to all policies and contracts executed, delivered, issued for delivery, continued or renewed in this State on or after January 1, 1997. For purposes of this section, all contracts are deemed to be renewed no later than the next yearly anniversary of the contract date. The requirements of this section additionally apply to all certificates executed, delivered, issued for delivery, continued or renewed in this State after July 1, 2003.

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Sec. C-7. 24-A MRSA §2847-G, sub-§3 is enacted to read:

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3. Application to certificates. In addition to policies and contracts otherwise covered under this section, the requirements of this section apply to all certificates executed, delivered, issued for delivery, continued or renewed in this State after July 1, 2003.

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30 PART D

Sec. D-1. 24-A MRSA §4234-B, as amended by PL 2001, c. 258, Pt. A, §4, is further amended to read:

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§4234-B. Maternity and routine newborn care

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Individual group contracts and issued by maintenance organization that provide maternity including benefits for childbirth, shall provide coverage for services related to maternity and routine newborn care, including coverage for hospital stay, in accordance with the attending physician's or attending certified nurse midwife's determination in conjunction with the mother that the mother and newborn meet criteria outlined in the "Guidelines for Perinatal Care," published by the American Academy of Pediatrics and the American College of Obstetrics and Gynecology. For the purposes of this section, "routine newborn care" does not include any services provided after the mother has been discharged from the hospital. For the purposes of this section, "attending physician" includes the obstetrician, pediatrician or other physician attending the

- mother and newborn. Benefits for routine newborn care required by this section are part of the mother's benefit. The mother and the newborn are treated as one person in calculating the deductible, coinsurance and copayments for coverage required by this section. In addition to policies and contracts otherwise covered under this section, the requirements of this section apply to all certificates executed, delivered, issued for delivery, continued or renewed in this State after July 1, 2003.
- Sec. D-2. 24-A MRSA §4234-C, last ¶, as enacted by PL 1997, c. 604, Pt. C, §4, is amended to read:

The requirements of this section apply to all contracts delivered or issued for delivery in this State on or after the effective-date-ef-this-Aet June 30, 1998. The requirements of this section additionally apply to all certificates executed, delivered, issued for delivery, continued or renewed in this State after July 1, 2003.

Sec. D-3. 24-A MRSA §4237, sub-§3 is enacted to read:

- 22 3. Application to certificates. In addition to policies and contracts otherwise covered under this section, the requirements of this section apply to all certificates executed, delivered, issued for delivery, continued or renewed in this State after July 1, 2003.
 - Sec. D-4. 24-A MRSA §4237-A, sub-§3 is enacted to read:
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 3. Application to certificates. In addition to policies and contracts otherwise covered under this section, the requirements of this section apply to all certificates executed, delivered, issued for delivery, continued or renewed in this State after July 1, 2003.
- Sec. D-5. 24-A MRSA §4241, sub-§2, as enacted by PL 1995, c. 617, §5 and affected by §6, is amended to read:
- 2. Application. This section applies to all policies and contracts executed, delivered, issued for delivery, continued or renewed in this State on or after January 1, 1997. For purposes of this section, all contracts are deemed to be renewed no later than the next yearly anniversary of the contract date. The requirements of this section additionally apply to all certificates executed, delivered, issued for delivery, continued or renewed in this State after July 1, 2003.
- Sec. D-6. 24-A MRSA §4242, as reallocated by RR 1995, c. 2, §53, is amended to read:

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§4242. Coverage for Pap tests

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All health maintenance organization plan contracts must provide coverage for screening Pap tests recommended by a physician. In addition to policies and contracts otherwise covered under this section, the requirements of this section apply to all certificates executed, delivered, issued for delivery, continued or renewed in this State after July 1, 2003.

Sec. D-7. 24-A MRSA §4247, sub-§3 is enacted to read:

3. Application to certificates. In addition to policies and contracts otherwise covered under this section, the requirements of this section apply to all certificates executed, delivered, issued for delivery, continued or renewed in this State after July 1, 2003.

Emergency clause. In view of the emergency cited in the preamble, this Act takes effect when approved.

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SUMMARY

24 The purpose of this bill is to ensure that Maine's women's health care coverage insurance mandates protect women living in Maine who are covered by an insurance certificate of coverage 26 issued by an insurance carrier located in another state. 28 makes these changes in the section of the insurance code regulating nonprofit hospital and medical service organizations. 30 Part B makes these changes in the section of the insurance code regulating individual health insurance policies. Part C makes 32 these changes in the section of the insurance code regulating group health insurance policies. Part D makes these changes in 34 the section of the insurance code regulating health maintenance organizations in Maine.