# MAINE STATE LEGISLATURE

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1	L.D. 42.
2	Date: 2/25/10 Majority (Filing No. H-663)
3	INSURANCE AND FINANCIAL SERVICES
4	Reproduced and distributed under the direction of the Clerk of the House.
5	STATE OF MAINE
6	HOUSE OF REPRESENTATIVES
7	124TH LEGISLATURE
8	SECOND REGULAR SESSION
9 10	COMMITTEE AMENDMENT " to H.P. 313, L.D. 425, Bill, "An Act To Require Private Insurance Coverage for Certain Services for Children with Disabilities"
11 12	Amend the bill by striking out everything after the enacting clause and before the summary and inserting the following:
13	'Sec. 1. 24 MRSA §2317-B, sub-§12-F is enacted to read:
14 15	12-F. Title 24-A, section 2766, 2847-R and 4258. Coverage for children's early intervention services, Title 24-A, sections 2766, 2847-R and 4258;
16	Sec. 2. 24-A MRSA §2766 is enacted to read:
17	§2766. Coverage for children's early intervention services
18 19 20 21 22 23	1. Definition. For purposes of this section, "children's early intervention services" means services provided by licensed occupational therapists, physical therapists, speech-language pathologists or clinical social workers working with children from birth to 36 months of age with an identified developmental disability or delay as described in the federal Individuals with Disabilities Education Act, Part C, 20 United States Code, Section 1411, et seq.
24 25 26	2. Required coverage. All individual health insurance policies, contracts and certificates must provide coverage for children's early intervention services in accordance with this subsection.
27	A. A referral from the child's primary care provider is required.
28 29	B. The policy, contract or certificate may limit coverage to \$3,200 per year for each child not to exceed \$9,600 by the child's 3rd birthday.
0 1 2	C. The policy, contract or certificate may contain provisions for maximum benefits and coinsurance and reasonable limitations, deductibles and exclusions to the extent that these provisions are not inconsistent with the requirements of this section.

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Sec. 3. 24-A MRSA §2847-R is enacted to read:

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## §2847-R. Coverage for children's early intervention services

- 1. Definition. For purposes of this section, "children's early intervention services" means services provided by licensed occupational therapists, physical therapists, speech-language pathologists or clinical social workers working with children from birth to 36 months of age with an identified developmental disability or delay as described in the federal Individuals with Disabilities Education Act, Part C, 20 United States Code, Section 1411, et seq.
- 2. Required coverage. All group health insurance policies, contracts and certificates must provide coverage for children's early intervention services in accordance with this subsection.
  - A. A referral from the child's primary care provider is required.
  - B. The policy, contract or certificate may limit coverage to \$3,200 per year for each child not to exceed \$9,600 by the child's 3rd birthday.
  - C. The policy, contract or certificate may contain provisions for maximum benefits and coinsurance and reasonable limitations, deductibles and exclusions to the extent that these provisions are not inconsistent with the requirements of this section.
  - Sec. 4. 24-A MRSA §4258 is enacted to read:

#### §4258. Coverage for children's early intervention services

- 1. Definition. For purposes of this section, "children's early intervention services" means services provided by licensed occupational therapists, physical therapists, speech-language pathologists or clinical social workers working with children from birth to 36 months of age with an identified developmental disability or delay as described in the federal Individuals with Disabilities Education Act, Part C, 20 United States Code, Section 1411, et seq.
- 2. Required coverage. All individual and group health maintenance organization policies, contracts and certificates must provide coverage for children's early intervention services in accordance with this subsection.
  - A. A referral from the child's primary care provider is required.
  - B. The policy, contract or certificate may limit coverage to \$3,200 per year for each child not to exceed \$9,600 by the child's 3rd birthday.
  - C. The policy, contract or certificate may contain provisions for maximum benefits and coinsurance and reasonable limitations, deductibles and exclusions to the extent that these provisions are not inconsistent with the requirements of this section.
- Sec. 5. Application. This Act applies to health insurance policies, contracts and certificates executed, delivered, issued for delivery, continued or renewed in this State on or after January 1, 2011. For purposes of this Act, all contracts are deemed to be renewed no later than the next yearly anniversary of the contract date.'

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## **SUMMARY**

This amendment changes	the applic	ation clau	ise of the	bill	so it will	apply to	all
individual and group health	insurance	policies,	contracts	and	certificate	s issued	or
renewed on or after January 1,	2011.						

This amendment also reallocates the statutory provisions contained in the bill.

FISCAL NOTE REQUIRED (See attached)

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## 124th MAINE LEGISLATURE

LD 425

LR 962(02)

An Act To Require Private Insurance Coverage for Certain Services for Children with Disabilities

Fiscal Note for Bill as Amended by Committee Amendment '\hat{\beta}''

Committee: Insurance and Financial Services

Fiscal Note Required: Yes

### **Fiscal Note**

Potential future biennium cost increase - All Funds Potential future biennium savings - General Fund Potential future biennium savings - Federal Funds

#### Fiscal Detail and Notes

Assumes requiring individual and group health insurance policies and health maintenance organization contracts to provide coverage for early intervention services for children from birth to 3 years of age up to \$3,200 per year per child up to a maximum of \$9,600 by the child's 3rd birthday would result in potential costs to the State Employee Health Benefit Plan and potential savings to the MaineCare program in the Department of Health and Human Services and to the Child Development Services program in the Department of Education. Given the bill as amended would apply to policies and contracts issued or renewed on or after January 1, 2011, any costs or savings to State programs are expected to be minor for the current biennium.

Estimates of the potential future biennium cost to the State Employee Health Benefit Plan are consistent with the Bureau of Insurance report to the Insurance and Financial Services Committee that estimated a cost of \$0.22 per member per month, resulting in a total estimated annual cost to the plan of \$84,500, with a resulting General Fund impact of approximately \$31,900 per year and a Highway Fund impact of approximately \$12,400 per year.

Preliminary estimates of the potential future biennium savings to the MaineCare program range from the \$250,000 per year included in the Bureau of Insurance report to approximately \$300,000 per year based on Department of Health and Human services estimates, with the resulting savings to the General Fund in the range of \$90,500 to \$108,600 per year (assuming a 63.80% federal match).

Potential future biennium savings to the Child Development Services program in the Department of Education cannot be determined.