

# MAINE STATE LEGISLATURE

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Date: 3-28-22

(Filing No. H-863)

**HEALTH COVERAGE, INSURANCE AND FINANCIAL SERVICES**

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**STATE OF MAINE  
HOUSE OF REPRESENTATIVES  
130TH LEGISLATURE  
SECOND REGULAR SESSION**

COMMITTEE AMENDMENT "A" to H.P. 741, L.D. 1003, "An Act To Improve Outcomes for Persons with Limb Loss"

Amend the bill by striking out everything after the enacting clause and inserting the following:

**Sec. 1. 24-A MRSA §4315, sub-§2**, as amended by PL 2003, c. 688, Pt. I, §1, is further amended to read:

**2. Required coverage.** A carrier shall provide coverage for prosthetic devices in all health plans that, at a minimum, equals, except as provided in subsection 8, the coverage and payment for prosthetic devices provided under federal laws and regulations for the aged and disabled pursuant to 42 United States Code, Sections 1395k, 1395l and 1395m and 42 Code of Federal Regulations, Sections 414.202, 414.210, 414.228 and 410.100. Covered benefits must be provided for a prosthetic device determined by the enrollee's provider, in accordance with section 4301-A, subsection 10-A, to be the most appropriate model that adequately meets the medical needs of the enrollee;

A. A prosthetic device determined by the enrollee's provider, in accordance with section 4301-A, subsection 10-A, to be the most appropriate model that adequately meets the medical needs of the enrollee; and

B. With respect to an enrollee under 18 years of age, in addition to coverage of a prosthetic device required by paragraph A, a prosthetic device determined by the enrollee's provider, in accordance with section 4301-A, subsection 10-A, to be the most appropriate model that meets the medical needs of the enrollee for recreational purposes, as applicable, to maximize the enrollee's ability to ambulate, run, bike and swim and to maximize upper limb function.

**Sec. 2. 24-A MRSA §4315, sub-§6**, as amended by PL 2009, c. 603, §1 and affected by §2, is further amended to read:

**COMMITTEE AMENDMENT**

1            **6. Exclusions.** Coverage Except as provided in subsection 2, paragraph B for an  
 2            enrollee under 18 years of age, coverage is not required pursuant to this section for a  
 3            prosthetic device that is designed exclusively for an athletic purposes purpose.

4            **Sec. 3. 24-A MRSA §4315, sub-§9** is enacted to read:

5            **9. Report.** No later than June 30, 2027, each carrier that issues a health plan subject  
 6            to this section shall report to the superintendent on its experience pursuant to this section  
 7            for plan years 2023, 2024, 2025 and 2026. The report must be in a form prescribed by the  
 8            superintendent and must include the number of claims and the total amount of claims paid  
 9            in this State for the services required by this section. The superintendent shall aggregate  
 10            this data by plan year in a report and submit the report to the joint standing committee of  
 11            the Legislature having jurisdiction over health coverage and insurance matters no later than  
 12            November 1, 2027.

13            **Sec. 4. No addition to State's essential health benefits; legislative finding.**  
 14            The Legislature finds that the requirements of this Act do not constitute an addition to the  
 15            State's essential health benefits that requires defrayal of costs by the State pursuant to 42  
 16            United States Code, Section 18031(d)(3)(B) because the requirements clarify that the law  
 17            requiring a health insurance carrier to provide coverage for prosthetic devices to meet the  
 18            medical needs of an enrollee under 18 years of age includes a prosthetic device designed  
 19            to meet the enrollee's medical needs for recreational purposes.

20            **Sec. 5. Application.** The requirements of this Act apply to all policies, contracts  
 21            and certificates executed, delivered, issued for delivery, continued or renewed in this State  
 22            on or after January 1, 2023. For purposes of this Act, all contracts are deemed to be renewed  
 23            no later than the next yearly anniversary of the contract date.'

24            Amend the bill by relettering or renumbering any nonconsecutive Part letter or section  
 25            number to read consecutively.

26            **SUMMARY**

27            This amendment replaces the bill. Under current law, health insurance carriers are  
 28            required to provide coverage for a prosthetic device designed to meet an enrollee's medical  
 29            needs. The amendment requires a carrier to provide coverage to enrollees under 18 years  
 30            of age for a prosthetic device designed to meet an enrollee's medical needs for recreational  
 31            purposes. The requirement applies to all health plans issued or renewed on or after January  
 32            1, 2023. The amendment requires carriers to report to the Superintendent of Insurance on  
 33            their claims experience with providing the covered services after 4 years, and the  
 34            superintendent is required to report to the joint standing committee of the Legislature  
 35            having jurisdiction over health coverage and insurance matters.

36            The amendment also includes language stating the Legislature's finding that the  
 37            changes are not an addition to the State's essential health benefits that would require the  
 38            State to defray costs pursuant to the federal Patient Protection and Affordable Care Act.

39            **FISCAL NOTE REQUIRED**

40            (See attached)



# 130th MAINE LEGISLATURE

LD 1003

LR 1214(02)

## An Act To Improve Outcomes for Persons with Limb Loss

Fiscal Note for Bill as Amended by Committee Amendment "A (H-863)"  
Committee: Health Coverage, Insurance and Financial Services  
Fiscal Note Required: Yes

### Fiscal Note

Future biennium cost increase - All Funds

	FY 2021-22	FY 2022-23	Projections FY 2023-24	Projections FY 2024-25
<b>Net Cost (Savings)</b>				
General Fund	\$0	\$0	\$9,919	\$10,415
Highway Fund	\$0	\$0	\$3,492	\$3,666
<b>Appropriations/Allocations</b>				
General Fund	\$0	\$0	\$9,919	\$10,415
Highway Fund	\$0	\$0	\$3,492	\$3,666

### Fiscal Detail and Notes

Requiring health insurance carriers to provide coverage to enrollees under 18 years of age for one prosthetic device to meet an enrollee's medical needs for the purpose of recreation will increase General Fund costs to the State Employee Health Plan beginning in the plan year that starts July 1, 2023 by \$9,919 in fiscal year 2023-24. The bill will also increase Highway Fund costs by \$3,492 beginning in fiscal year 2023-24. These estimates are based on the assumption that this required coverage will increase costs to the plan by \$0.08 per member per month (PMPM).