

# MAINE STATE LEGISLATURE

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L D 722

Date 5/10/23

(Filing No S-80 )

**REPORT A**

**HEALTH COVERAGE, INSURANCE AND FINANCIAL SERVICES**

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

**STATE OF MAINE**

**SENATE**

**131ST LEGISLATURE**

**FIRST SPECIAL SESSION**

COMMITTEE AMENDMENT "A" to S P 280, L D 722, "An Act to Expedite the Health Insurance Referral Process for Specialists by Allowing Referrals from Urgent Care Facilities"

Amend the bill by striking out the title and substituting the following

**'An Act to Expedite the Health Insurance Referral Process for Specialists by Allowing Referrals During Urgent Care Visits'**

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

**Sec. 1. 24-A MRSA §4301-A, sub-§2-A** is enacted to read

**2-A Behavioral health care service** "Behavioral health care service" means a health care service or treatment to address mental health and substance use conditions

**Sec. 2. 24-A MRSA §4301-A, sub-§21** is enacted to read

**21. Urgent care.** "Urgent care" means health care or treatment provided in response to exigent circumstances

**Sec. 3. 24-A MRSA §4303, sub-§22-A** is enacted to read

**22-A. Denial of referral during urgent care visit prohibited.** A carrier may not deny payment for any behavioral health care service or physical therapy service covered under an enrollee's health plan based solely on the basis that the enrollee's referral was not made by the enrollee's primary care provider as long as the enrollee's referral is made by a provider during an urgent care visit and the provider notifies the enrollee's primary care provider of the referral. A carrier may not apply a deductible, coinsurance or copayment greater than the applicable deductible, coinsurance or copayment that would apply to the same health care service if the service was referred by the enrollee's primary care provider. A carrier may require a provider of urgent care that is making a referral to provide additional information necessary to implement this subsection

**COMMITTEE AMENDMENT**

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COMMITTEE AMENDMENT "A" to S P 280, L D 722 (S-80)

34 **Sec. 4. Application.** The requirements of this Act apply to all policies, contracts and  
35 certificates executed, delivered, issued for delivery, continued or renewed in this State on  
36 or after January 1, 2024 For purposes of this Act, all policies, contracts and certificates are  
37 deemed to be renewed no later than the next yearly anniversary of the contract date '

38 Amend the bill by relettering or renumbering any nonconsecutive Part letter or section  
39 number to read consecutively

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**SUMMARY**

8 This amendment replaces the bill and changes the title The amendment prohibits a  
9 health insurance carrier from denying payment for any behavioral health care service or  
10 physical therapy service covered under an enrollee's health plan based solely on the basis  
11 that the enrollee's referral was not made by the enrollee's primary care provider as long as  
12 the enrollee's referral is made by a provider during an urgent care visit and the provider  
13 notifies the enrollee's primary care provider of the referral The requirements apply  
14 beginning January 1, 2024