# MAINE STATE LEGISLATURE

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# State Of Maine 120th Legislature

## First Regular Session

### **Bill Summaries**

# Joint Standing Committee on Banking and Insurance

## August 2001

Members: Sen. Lloyd P. LaFountain III, Chair Sen. I. Joel Abromson Sen. Neria R. Douglass

Rep. Christopher P. O'Neil, Chair Rep. Benjamin F. Dudley Rep. Nancy B. Sullivan Rep. Marilyn E. Canavan Rep. Lisa T. Marrache Rep. William J. Smith Rep. Arthur F. Mayo III Rep. Kevin J. Glynn Rep. Florence T. Young Rep. John M. Michael

### Staff:

Colleen McCarthy Reid, Legislative Analyst

Office of Policy and Legal Analysis 13 State House Station Augusta, ME 04333 (207) 287-1670



# Maine State Legislature OFFICE OF POLICY AND LEGAL ANALYSIS

13 State House Station, Augusta, Maine 04333-0013 Telephone: (207) 287-1670 Fax: (207) 287-1275

### 120th Legislature First Regular Session

# Summary Of Legislation Before The Joint Standing Committees August 2001

Enclosed please find a summary of all bills, resolves, joint study orders, joint resolutions and Constitutional resolutions that were considered by the joint standing select committees of the Maine Legislature this past session. The document is a compilation of bill summaries which describe each bill and relevant amendments, as well as the final action taken. Also included are statistical summaries of bill activity this session for the Legislature and each of its joint standing committees.

The document is organized for convenient reference to information on bills considered by the committees. It is organized by committees and within committees by bill (LD) number. The committee report(s), prime sponsor for each bill and the lead co-sponsor(s), if designated, are listed below each bill title. All adopted amendments are listed by paper number. Two indices, a subject index and a numerical index by LD number are provided for easy reference to bills. They are located at the back of the document. A separate publication, <u>History and Final Disposition of Legislative Documents</u>, may also be helpful in providing information on the disposition of bills. These bill summaries also are available at the Law and Legislative Reference Library and on the Internet (www.state.me.us/legis/opla).

Final action on each bill is noted to the right of the bill title. The abbreviations used for various categories of final action are as follows:

| CARRIED OVER                             | Bill Carried Over to Second Regular Session  |
|--|--|
| CON RES XXX                              | Bill Carried Over to Second Regular Session Chapter # of Constitutional Resolution passed by both Houses |
| CONF CMTE UNABLE TO AGREE.               |  |
|  |  |
|  | accepts ONTP report; the other indefinitely postpones the bill   |
| DIED ON ADJOURNMENT                      | Action incomplete when session ended; bill died  |
| FMERGENCY                                | Enacted law takes effect sooner than 90 days   |
| FAILED EMERGENCY ENACTMENT/FINAL PASSAGE | EEmergency bill failed to get 2/3 vote   |
| FAILED ENACTMENT/FINAL PASSAGE           | Bill failed to get majority vote   |
| FAILED MANDATE ENACTMENT                 | Bill imposing local mandate failed to get 2/3 vote   |
| NOT PROPERLY REFORE THE RODY             | Ruled out of order by the presiding officers; bill died  |
| INDEE DD                                 | Rill Indefinitely Postnoved  |
| ONTP                                     | Bill Indefinitely Postponed Ought Not To Pass report accepted  |
| OTP ND                                   |  |
| OTD ND/NT                                | Committee report Ought To Pass In New Draft/New Title  |
| D L C VVV                                |  |
| DIDIIC VVV                               | Chapter # of enacted Frivate & Special Law   |
| DECOLUE VVV                              | Charten # of English and Books   |
| RESULVE AAA                              | Chapter # of enacted Public LawChapter # of finally passed ResolveBill held by Governor                  |
| VETO CUCTANED                            | Bill neld by Governor  |
| YEIU SUSIAINED                           | Legislature failed to override Governor's Veto   |

Please note the effective date for all non-emergency legislation enacted in the First Regular Session (unless otherwise specified in a particular law) is **September 21**, 2001.

### Joint Standing Committee on Banking and Insurance

LD 1742

An Act to Clarify and Update the Laws Related to Health Insurance Contracts

**PUBLIC 258** 

| Sponsor(s) | Committee Report | Amendments Adopted |
|------------|------------------|--------------------|
| SULLIVAN   | OTP-AM           | H-416              |
| ABROMSON   |                  |                    |

LD 1742 was submitted on behalf of the Department of Professional and Financial Regulation.

LD 1742 proposed to do the following.

Part A clarifies the requirement for coverage of newborns under maternity benefits by specifying that newborns are not subject to a separate deductible.

Part B gives the Superintendent of Insurance authority to waive the requirement that an insurer that exits the individual, small group or large group health insurance market in the State can not reenter for 5 years. It also gives the superintendent authority to waive the requirement that an insurer give a 3-month notice before ceasing to issue individual, small group or large group health insurance in the State.

Part C requires insurers to provide a certificate of creditable coverage to terminating insureds consistent with federal law.

Part D conforms various definitions and other provisions to federal regulations adopted pursuant to the Health Insurance Accessibility and Accountability Act of 1996.

Part E clarifies several definitions and other provisions in the individual health insurance reform laws, the small group health insurance reform laws and the continuity of coverage laws.

Part F amends the laws pertaining to Medicare supplement policies. It allows rates for benefit components of one plan to be based on the average cost of that benefit component across all standardized plans. It restricts the ability of insurers to segregate insureds by health status through the use of association groups.

Part G corrects errors from a previous law.

Part H makes out-of-state blanket policies providing coverage in the State subject to the same filing requirements as out-of-state group policies.

Committee Amendment "A" (H-416) proposed to require that information be provided in evaluations of proposed mandated health insurance benefits performed by the Bureau of Insurance on the financial impact of a mandate on employers and on the potential costs savings of the proposed mandated benefit and its effect on cost-shifting in the overall health care delivery system. It also added a fiscal note to the bill.

### Joint Standing Committee on Banking and Insurance

#### Enacted law summary

Public Law 2001, chapter 258 does the following.

Part A clarifies the requirement for coverage of newborns under maternity benefits by specifying that newborns are not subject to a separate deductible.

Part B gives the Superintendent of Insurance authority to waive the requirement that an insurer that exits the individual, small group or large group health insurance market in the State cannot reenter for 5 years. It also gives the superintendent authority to waive the requirement that an insurer give a 3-month notice before ceasing to issue individual, small group or large group health insurance in the State.

Part C requires insurers to provide a certificate of creditable coverage to terminating insureds consistent with federal law.

Part D conforms various definitions and other provisions to federal regulations adopted pursuant to the Health Insurance Accessibility and Accountability Act of 1996.

Part E clarifies several definitions and other provisions in the individual health insurance reform laws, the small group health insurance reform laws and the continuity of coverage laws.

Part F amends the laws pertaining to Medicare supplement policies. It allows rates for benefit components of one plan to be based on the average cost of that benefit component across all standardized plans. It restricts the ability of insurers to segregate insureds by health status through the use of association groups.

Part G corrects errors from a previous law.

Part H makes out-of-state blanket policies providing coverage in the State subject to the same filing requirements as out-of-state group policies.

Part I requires that the Bureau of Insurance provide information on the financial impact of a mandate on employers and on the potential cost-savings of a mandate and its effect on cost-shifting in the overall health care delivery system as part of its review and evaluation of proposed mandated health insurance benefits performed pursuant to Title 24-A, Maine Revised Statutes, section 2752.