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INSURANCE AND FINANCIAL SERVICES

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**STATE OF MAINE
HOUSE OF REPRESENTATIVES
126TH LEGISLATURE
SECOND REGULAR SESSION**

COMMITTEE AMENDMENT “ ” to H.P. 1199, L.D. 1676, Bill, “An Act To Strengthen Access Requirements and Review Standards for Health Insurance Plans”

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

'An Act To Strengthen Disclosure to Consumers about Provider Networks in Health Insurance Plans'

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

'Sec. 1. 24-A MRSA §4303, sub-§19 is enacted to read:

19. Disclosure related to provider networks. A carrier offering a managed care plan shall prominently disclose to applicants, prospective enrollees and enrollees information about the carrier's provider network for the applicable managed care plan, including whether there are hospitals, health care facilities, physicians or other providers not included in the plan's network and any differences in an enrollee's financial responsibilities for payment of covered services to a participating provider and to a provider not included in a provider network. The superintendent may adopt rules that set forth the manner, content and required disclosure of the information in accordance with this subsection. Rules adopted pursuant to this subsection are routine technical rules as defined in Title 5, chapter 375, subchapter 2-A.'

SUMMARY

This amendment is the minority report of the committee and replaces the bill. The amendment requires a health insurance carrier to disclose information about its provider networks, including whether there are any hospitals, health care facilities, physicians or other providers not included in the provider's network and any differences in an enrollee's financial responsibilities for payment of covered services to a participating provider and to a provider not included in a provider network. The amendment authorizes the Superintendent of Insurance to adopt rules setting forth the manner, content and required disclosure of the information and specifies that those rules are routine technical rules.

COMMITTEE AMENDMENT

1 This amendment does not include the additional provision included in the majority
2 report, which requires a health insurance carrier to disclose upon request from a provider
3 the reason for not including the provider in the carrier's provider network.