
**By: Delegates Goldwater, Eckardt, Donoghue, Love, Boston, Walkup, Kirk, Frank,
Harrison, Krysiak, Exum, V. Mitchell, and Barve**

Introduced and read first time: February 2, 1996

Assigned to: Economic Matters

A BILL ENTITLED

1 AN ACT concerning

2 **Health Insurance - Gynecological Care**

3 FOR the purpose of altering the circumstances under which certain insurers and
4 nonprofit health service plans, including health maintenance organizations, shall
5 permit a woman to receive certain gynecological care from an in-network
6 obstetrician/gynecologist who is not her primary care physician; and generally
7 relating to gynecological care in health insurance.

8 BY repealing and reenacting, with amendments,
9 Article 48A - Insurance Code
10 Section 490Z(a)
11 Annotated Code of Maryland
12 (1994 Replacement Volume and 1995 Supplement)

13 BY repealing and reenacting, with amendments,
14 Article - Health - General
15 Section 19-706(k)(1)
16 Annotated Code of Maryland
17 (1990 Replacement Volume and 1995 Supplement)

18 Preamble

19 WHEREAS, The findings of a Gallop Organization survey of 500 women who live
20 and work in downtown Baltimore City showed that between 38 and 44 percent of all
21 women age 18 through 40 visit only an obstetrician/gynecologist (OB/GYN) for routine
22 care; and

23 WHEREAS, For women age 41 and older, 27 percent see only an OB/GYN for
24 their routine care; and

25 WHEREAS, For minority women and those women of limited financial means, the
26 percentages in all age groups who see only an OB/GYN for their routine care are
27 significantly higher than others; and

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1 WHEREAS, The federal Health Security Act has recognized that an OB/GYN is
2 sometimes the only physician a significant number of women see for their primary care
3 needs; and

4 WHEREAS, The legislation enacted in 1994 by the Maryland General Assembly to
5 address this issue during its 1994 session has been interpreted by insurers as prohibiting
6 an OB/GYN who chooses not to be a primary care physician from seeing patients without
7 the patient first visiting a primary care provider, and does not account for the women who
8 must see their OB/GYN more than once in a 12-month period; and

9 WHEREAS, Allowing women to receive all gynecological care from certain
10 OB/GYN doctors without first requiring them to visit a primary care physician would
11 improve their access to OB/GYN doctors; now, therefore,

12 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
13 MARYLAND, That the Laws of Maryland read as follows:

14 **Article 48A - Insurance Code**

15 490Z.

16 (a) Any insurer or nonprofit health service plan that provides hospital, medical, or
17 surgical benefits for issuance or delivery in the State to any group or individual on an
18 expense-incurred basis, including a health maintenance organization, shall:

19 (1) Classify an obstetrician/gynecologist as a primary care physician; or

20 (2) [Permit] IF THE OBSTETRICIAN/GYNECOLOGIST CHOOSES NOT TO
21 BE A PRIMARY CARE PHYSICIAN, PERMIT a woman to receive [an annual visit to an
22 in-network obstetrician/gynecologist for routine] gynecological care FROM AN
23 IN-NETWORK OBSTETRICIAN/GYNECOLOGIST without requiring the woman to first visit
24 a primary care provider, PROVIDED THAT:

25 (I) THE CARE IS MEDICALLY NECESSARY, INCLUDING, BUT NOT
26 LIMITED TO, CARE THAT IS ROUTINE; AND

27 (II) FOLLOWING EACH VISIT FOR GYNECOLOGICAL CARE, THE
28 OBSTETRICIAN/GYNECOLOGIST COMMUNICATES WITH THE WOMAN'S PRIMARY
29 CARE PHYSICIAN CONCERNING ANY DIAGNOSIS OR TREATMENT RENDERED.

30 **Article - Health - General**

31 19-706.

32 (k) (1) A health maintenance organization shall:

33 (i) Classify an obstetrician/gynecologist as a primary care physician; or

34 (ii) [Permit] IF THE OBSTETRICIAN/GYNECOLOGIST CHOOSES NOT
35 TO BE A PRIMARY CARE PHYSICIAN, PERMIT a woman to receive [an annual visit to an
36 in-network obstetrician/gynecologist for routine] gynecological care FROM AN
37 IN-NETWORK OBSTETRICIAN/GYNECOLOGIST without requiring the woman to first visit
38 a primary care provider, PROVIDED THAT:

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1 1. THE CARE IS MEDICALLY NECESSARY, INCLUDING, BUT
2 NOT LIMITED TO, CARE THAT IS ROUTINE; AND

3 2. FOLLOWING EACH VISIT FOR GYNECOLOGICAL CARE,
4 THE OBSTETRICIAN/GYNECOLOGIST COMMUNICATES WITH THE WOMAN'S PRIMARY
5 CARE PHYSICIAN CONCERNING ANY DIAGNOSIS OR TREATMENT RENDERED.

6 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
7 October 1, 1996.