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C3 6lr1858 SB 417/95 - FIN CF 6lr1848

By: Senators Trotter, Young, Hafer, Pica, Dorman, Bromwell, Lawlah, Hoffman,

Hughes, and Stone

Introduced and read first time: January 31, 1996

Assigned to: Finance

A BILL ENTITLED

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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; andgenerally
- 7 relating to gynecological care in health insurance.
- 8 BY repealing and reenacting, with amendments,
- 9 Article 48A Insurance Code
- 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
- 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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	WHEREAS, The federal Health Security Act has recognized that an OB/GYN is sometimes the only physician a significant number of women see for their primary care needs; and
6 7	WHEREAS, The legislation enacted in 1994 by the Maryland General Assembly to address this issue during its 1994 session has been interpreted by insurers as prohibiting an OB/GYN who chooses not to be a primary care physician from seeing patients without the patient first visiting a primary care provider, and does not account for the women who must see their OB/GYN more than once in a 12-month period; and
	WHEREAS, Allowing women to receive all gynecological care from certain OB/GYN doctors without first requiring them to visit a primary care physician would improve their access to OB/GYN doctors; now, therefore,
12 13	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:
14	Article 48A - Insurance Code
15	490Z.
	(a) Any insurer or nonprofit health service plan that provides hospital, medical, or surgical benefits for issuance or delivery in the State to any group orindividual on an expense-incurred basis, including a health maintenance organization, shall:
19	(1) Classify an obstetrician/gynecologist as a primary care physician; or
22 23	(2) [Permit] IF THE OBSTETRICIAN/GYNECOLOGIST CHOOSES NOT TO BE A PRIMARY CARE PHYSICIAN, PERMIT a woman to receive [an annual visitto an in-network obstetrician/gynecologist for routine] gynecological care FROM AN IN-NETWORK OBSTETRICIAN/GYNECOLOGIST without requiring the woman to first visit a primary care provider, PROVIDED THAT:
25 26	(I) THE CARE IS MEDICALLY NECESSARY, INCLUDING, BUT NOT LIMITED TO, CARE THAT IS ROUTINE; AND
	(II) FOLLOWING EACH VISIT FOR GYNECOLOGICAL CARE, THE OBSTETRICIAN/GYNECOLOGIST COMMUNICATES WITH THE WOMAN'S PRIMARY 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
36 37	(ii) [Permit] IF THE OBSTETRICIAN/GYNECOLOGIST CHOOSES NOT TO BE A PRIMARY CARE PHYSICIAN, PERMIT a woman to receive [an annual visit to an in-network obstetrician/gynecologist for routine] gynecological care FROM AN IN-NETWORK OBSTETRICIAN/GYNECOLOGIST without requiring the woman to first visit 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.