

SENATE BILL 567

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2000 Regular Session
(01r1277)

ENROLLED BILL
-- Finance/Economic Matters --

Introduced by **Senators Exum, Conway, DeGrange, Dorman, Hooper, Mitchell,
and Teitelbaum**

Read and Examined by Proofreaders:

Proofreader.

Proofreader.

Sealed with the Great Seal and presented to the Governor, for his approval this
____ day of _____ at _____ o'clock, ____ M.

President.

CHAPTER _____

1 AN ACT concerning

2 **Health Insurance - Access to Obstetric and Gynecological Services**

3 FOR the purpose of ~~prohibiting~~ requiring certain insurers, nonprofit health service
4 plans, and health maintenance organizations ~~from limiting a woman's~~ to allow a
5 woman to have direct access to certain obstetric and gynecological services from
6 a certified nurse midwife ~~or certain other providers~~ or certain other providers;
7 ~~requiring certain insurers, nonprofit health service plans, and health~~
8 ~~maintenance organizations to allow a woman to choose a certified nurse midwife~~
9 ~~under certain circumstances; requiring certain insurers, nonprofit health~~
10 ~~service plans, and health maintenance organizations to offer a woman a choice~~
11 ~~of an obstetric and gynecological provider within the health benefit plan;~~
12 ~~prohibiting certain insurers, nonprofit health service plans, and health~~
13 ~~maintenance organizations from requiring that a woman receive obstetric and~~
14 ~~gynecological services from a specific category of provider; requiring a certified~~
15 ~~nurse midwife and certain other health care providers to consult with a certain~~
16 ~~obstetrician/gynecologist in accordance with a certain agreement regarding the~~

1 *delivery of certain health care; providing for the application of this Act;* and
2 generally relating to access to obstetric and gynecological services under health
3 insurance.

4 BY repealing and reenacting, with amendments,
5 Article - Insurance
6 Section 15-816
7 Annotated Code of Maryland
8 (1997 Volume and 1999 Supplement)

9 BY repealing and reenacting, with amendments,
10 Article - Health - General
11 Section 19-706(l)
12 Annotated Code of Maryland
13 (1996 Replacement Volume and 1999 Supplement)

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

16 **Article - Insurance**

17 15-816.

18 (a) This section applies to:

19 (1) insurers and nonprofit health service plans that provide hospital,
20 medical, or surgical benefits to individuals or groups on an expense-incurred basis
21 under health insurance policies that are issued or delivered in the State; and

22 (2) health maintenance organizations that provide hospital, medical, or
23 surgical benefits to individuals or groups under contracts that are issued or delivered
24 in the State.

25 (b) An entity subject to this section:

26 (1) shall classify an obstetrician/gynecologist as a primary care provider;
27 or

28 (2) if the obstetrician/gynecologist chooses not to be a primary care
29 provider, shall allow a woman to receive routine gynecological care from an
30 in-network obstetrician/gynecologist without requiring the woman to visit a primary
31 care provider first, if:

32 (i) the care is medically necessary, including care that is routine;

33 (ii) after each visit for gynecological care, the
34 obstetrician/gynecologist communicates with the woman's primary care provider
35 about any diagnosis or treatment rendered; and

1 (iii) the obstetrician/gynecologist confers with the primary care
2 provider before performing any diagnostic procedure that is not routine gynecological
3 care rendered during an annual visit.

4 (c) If an entity subject to this section classifies an obstetrician/gynecologist as
5 a primary care provider as provided in subsection (b) of this section, and a woman
6 does not choose an obstetrician/gynecologist as the woman's primary care provider,
7 the entity shall allow the woman an annual visit to an in-network
8 obstetrician/gynecologist for routine gynecological care without requiring the woman
9 to visit the woman's primary care provider first, whether or not the primary care
10 provider is qualified to and regularly does provide routine gynecological care.

11 ~~(D) (1) AN ENTITY SUBJECT TO THIS SECTION MAY NOT LIMIT A WOMAN'S~~
12 ~~DIRECT ACCESS TO PRIMARY AND PREVENTIVE OBSTETRIC AND GYNECOLOGICAL~~
13 ~~SERVICES FROM A CERTIFIED NURSE MIDWIFE OR ANY OTHER PROVIDER~~
14 ~~AUTHORIZED UNDER THE HEALTH OCCUPATIONS ARTICLE TO PROVIDE OBSTETRIC~~
15 ~~AND GYNECOLOGICAL SERVICES.~~

16 ~~(2) AN ENTITY SUBJECT TO THIS SECTION SHALL ALLOW A WOMAN TO~~
17 ~~CHOOSE A CERTIFIED NURSE MIDWIFE PARTICIPATING IN THE HEALTH BENEFIT~~
18 ~~PLAN IF THE CERTIFIED NURSE MIDWIFE DISCUSSES THE SERVICES AND~~
19 ~~TREATMENT PLAN WITH THE WOMAN'S PRIMARY CARE PROVIDER AND INFORMS THE~~
20 ~~WOMAN'S PRIMARY CARE PROVIDER OF ALL HEALTH SERVICES PROVIDED.~~

21 ~~(3) AN ENTITY SUBJECT TO THIS SECTION SHALL OFFER THE WOMAN~~
22 ~~THE CHOICE OF AN OBSTETRIC AND GYNECOLOGICAL PROVIDER WITHIN THE~~
23 ~~HEALTH BENEFIT PLAN AND MAY NOT REQUIRE THE WOMAN TO RECEIVE~~
24 ~~OBSTETRIC AND GYNECOLOGICAL SERVICES FROM A SPECIFIC CATEGORY OF~~
25 ~~PROVIDER.~~

26 ~~(D) (1) AN ENTITY SUBJECT TO THIS SECTION SHALL ALLOW A WOMAN TO~~
27 ~~RECEIVE MEDICALLY NECESSARY, ROUTINE OBSTETRIC AND GYNECOLOGICAL CARE~~
28 ~~FROM AN IN-NETWORK, CERTIFIED NURSE MIDWIFE OR ANY OTHER IN-NETWORK~~
29 ~~PROVIDER AUTHORIZED UNDER THE HEALTH OCCUPATIONS ARTICLE TO PROVIDE~~
30 ~~OBSTETRIC AND GYNECOLOGICAL SERVICES WITHOUT FIRST REQUIRING THE~~
31 ~~WOMAN TO VISIT A PRIMARY CARE PROVIDER.~~

32 ~~(2) A CERTIFIED NURSE MIDWIFE OR OTHER NONPHYSICIAN PROVIDER~~
33 ~~AUTHORIZED UNDER THE HEALTH OCCUPATIONS ARTICLE TO PROVIDE OBSTETRIC~~
34 ~~AND GYNECOLOGICAL SERVICES SHALL CONSULT WITH AN~~
35 ~~OBSTETRICIAN/GYNECOLOGIST WITH WHOM THE CERTIFIED NURSE MIDWIFE OR~~
36 ~~OTHER PROVIDER HAS A COLLABORATIVE AGREEMENT, IN ACCORDANCE WITH THE~~
37 ~~COLLABORATIVE AGREEMENT, REGARDING ANY CARE RENDERED UNDER THIS~~
38 ~~SUBSECTION.~~

Article - Health - General

19-706.

(l) (1) A health maintenance organization shall:

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

(ii) If the obstetrician/gynecologist chooses not to be a primary care physician, permit a woman to receive gynecological care from an in-network obstetrician/gynecologist without requiring the woman to first visit a primary care provider, provided that:

1. The care is medically necessary, including, but not limited to, care that is routine;

2. Following each visit for gynecological care, the obstetrician/gynecologist communicates with the woman's primary care physician concerning any diagnosis or treatment rendered; and

3. The obstetrician/gynecologist confers with the primary care physician before performing any diagnostic procedure that is not routine gynecological care rendered during an annual visit.

(2) If a health maintenance organization classifies an obstetrician/gynecologist as a primary care physician as provided under paragraph (1) of this subsection, and a woman does not choose an obstetrician/gynecologist as her primary care provider, the health maintenance organization shall permit the woman to receive an annual visit to an in-network obstetrician/gynecologist for routine gynecological care without requiring the woman to first visit her primary care provider, whether or not the primary care provider is qualified to and regularly provides routine gynecological care.

~~(3) (f) A HEALTH MAINTENANCE ORGANIZATION MAY NOT LIMIT A WOMAN'S DIRECT ACCESS TO PRIMARY AND PREVENTIVE OBSTETRIC AND GYNECOLOGICAL SERVICES FROM A CERTIFIED NURSE MIDWIFE OR ANY OTHER PROVIDER AUTHORIZED UNDER THE HEALTH OCCUPATIONS ARTICLE TO PROVIDE OBSTETRIC AND GYNECOLOGICAL SERVICES.~~

~~(H) A HEALTH MAINTENANCE ORGANIZATION SHALL ALLOW A WOMAN TO CHOOSE A CERTIFIED NURSE MIDWIFE PARTICIPATING IN THE HEALTH MAINTENANCE ORGANIZATION IF THE CERTIFIED NURSE MIDWIFE DISCUSSES THE SERVICES AND TREATMENT PLAN WITH THE WOMAN'S PRIMARY CARE PROVIDER AND INFORMS THE WOMAN'S PRIMARY CARE PROVIDER OF ALL HEALTH SERVICES PROVIDED.~~

~~(III) A HEALTH MAINTENANCE ORGANIZATION SHALL OFFER THE WOMAN THE CHOICE OF AN OBSTETRIC AND GYNECOLOGICAL PROVIDER WITHIN THE HEALTH MAINTENANCE ORGANIZATION AND MAY NOT REQUIRE THE WOMAN~~

1 ~~TO RECEIVE OBSTETRIC AND GYNECOLOGICAL SERVICES FROM A SPECIFIC~~
2 ~~CATEGORY OF PROVIDER.~~

3 (3) (I) A HEALTH MAINTENANCE ORGANIZATION SHALL ALLOW A
4 WOMAN TO RECEIVE MEDICALLY NECESSARY, ROUTINE OBSTETRIC AND
5 GYNECOLOGICAL CARE FROM AN IN-NETWORK, CERTIFIED NURSE MIDWIFE OR ANY
6 OTHER IN-NETWORK PROVIDER AUTHORIZED UNDER THE HEALTH OCCUPATIONS
7 ARTICLE TO PROVIDE OBSTETRIC AND GYNECOLOGICAL SERVICES WITHOUT FIRST
8 REQUIRING THE WOMAN TO VISIT A PRIMARY CARE PROVIDER.

9 (II) A CERTIFIED NURSE MIDWIFE OR OTHER NONPHYSICIAN
10 PROVIDER AUTHORIZED UNDER THE HEALTH OCCUPATIONS ARTICLE TO PROVIDE
11 OBSTETRIC AND GYNECOLOGICAL SERVICES SHALL CONSULT WITH AN
12 OBSTETRICIAN/GYNECOLOGIST WITH WHOM THE CERTIFIED NURSE MIDWIFE OR
13 OTHER PROVIDER HAS A COLLABORATIVE AGREEMENT, IN ACCORDANCE WITH THE
14 COLLABORATIVE AGREEMENT, REGARDING ANY CARE RENDERED UNDER THIS
15 PARAGRAPH.

16 SECTION 2. AND BE IT FURTHER ENACTED, That this Act ~~shall apply~~
17 applies to all policies, contracts, and health benefit plans issued, delivered, or
18 renewed in the State on or after October 1, 2000. ~~Any policy, contract, or health~~
19 ~~benefit plan in effect before October 1, 2000 shall comply with the provisions of this~~
20 ~~Act no later than October 1, 2001.~~

21 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect
22 October 1, 2000.