UNOFFICIAL COPY OF SENATE BILL 772 EMERGENCY BILL

C3 5lr2891

By: Senator Lawlah

Introduced and read first time: February 4, 2005

Assigned to: Finance

A BILL ENTITLED

I	AN	ACT	concerning
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2 Health Insurance - Substance Abuse Treatment - Copayments

- 3 FOR the purpose of prohibiting an insurer, nonprofit health service plan, or health
- 4 maintenance organization from charging a copayment that is greater than a
- 5 certain amount for a certain substance abuse treatment; providing for the
- 6 application of this Act; making this Act an emergency measure; and generally
- 7 relating to health insurance copayments for substance abuse treatment.
- 8 BY repealing and reenacting, without amendments,
- 9 Article Health General
- 10 Section 19-703.1(b)
- 11 Annotated Code of Maryland
- 12 (2000 Replacement Volume and 2004 Supplement)
- 13 BY repealing and reenacting, with amendments,
- 14 Article Health General
- 15 Section 19-703.1(c)
- 16 Annotated Code of Maryland
- 17 (2000 Replacement Volume and 2004 Supplement)
- 18 BY repealing and reenacting, without amendments,
- 19 Article Insurance
- 20 Section 15-802(c) and (d)
- 21 Annotated Code of Maryland
- 22 (2002 Replacement Volume and 2004 Supplement)
- 23 BY repealing and reenacting, with amendments,
- 24 Article Insurance
- 25 Section 15-802(e)
- 26 Annotated Code of Maryland
- 27 (2002 Replacement Volume and 2004 Supplement)

1 2	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:			
3	Article - Health - General			
4	19-703.1.			
7 8 9 10	(b) (1) Subject to the provisions of this section, each contract or certificate issued to a member or subscriber by a health maintenance organization that provides health benefits and services for diseases may not discriminate against any person with a mental illness, emotional disorder or a drug abuse or alcohol abuse disorder by failing to provide benefits for treatment and diagnosis of these illnesses under the same terms and conditions as provided for covered benefits offered under the contract or certificate for the treatment of physical illness.			
12 13	2 (2) It shall not be considered to be discriminatory under paragraph (1) of 3 this subsection if at least the following benefits are provided:			
	(i) With respect to inpatient benefits provided in a licensed or certified facility, which shall include hospital inpatient benefits, the total number of days for which benefits are payable shall be:			
19	1. Except as provided in subsection (d) of this section, from July 1, 1994 through June 30, 1995, at least 60 days in any calendar year or benefit period of not more than 12 months under the same terms and conditions that apply to benefits available under the contract or certificate for physical illness; and			
	2. On or after July 1, 1995, at least equal to the same terms and conditions that apply to the benefits available under the contract or certificate for physical illness;			
26	(ii) Subject to subsection (f) of this section, with respect to benefits for partial hospitalization, at least 60 days of partial hospitalization shall be covered under the same terms and conditions that apply to the benefit available under the contract or certificate for physical illness; and			
30	(iii) With respect to outpatient coverage, other than for inpatient or partial hospitalization services, benefits for covered expenses arising from services which are rendered to treat mental illness, emotional disorders, drug abuse and alcohol abuse shall be at a rate which is, after the applicable deductible, not less than:			
32 33	1. 80 percent for the first 5 visits in any calendar year or benefit period of not more than 12 months;			
34 35	2. 65 percent for the 6th through 30th visit in any calendar year or benefit period of not more than 12 months; and			
36 37	3. 50 percent for the 31st visit and any visit after the 31st visit in any calendar year or benefit period of not more than 12 months.			

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3	(c) (1) The benefits under this section shall be required only for expenses arising for treatment of mental illnesses, emotional disorders, drug abuse and alcohol abuse which in the professional judgment of practitioners is medically necessary and treatable.				
	(2) of benefits covering mabuse.	(2) The benefits required under this section shall be provided as one set vering mental illnesses, emotional disorders, drug abuse and alcohol			
8 9	(3) managed care system.	The benefits required under this section may be delivered under a			
	(4) Except as specifically provided in this section, benefits for illnesses covered by this section and the benefits for physical illnesses covered under a contract or certificate shall have the same terms and conditions.				
13 14	(5) section, a contract or			nsurance provisions in subsection (b)(2)(iii) of this ubject to this section may not have:	
15 16	covered under this se	(i) ction;	Separate	lifetime maximums for physical illnesses and illnesses	
17 18	illnesses and illnesses	(ii) s covered		deductibles and coinsurance amounts for physical is section; or	
19 20	than 12 months for ph	(iii) nysical ill		out-of-pocket limits in a benefit period of not more ad illnesses covered under this section.	
	(6) ANY copayments recovered under this see		der a cont	UBJECT TO SUBPARAGRAPH (II) OF THIS PARAGRAPH, tract or certificate for benefits for illnesses	
24 25	under this section; or	[(i)]	1.	Actuarially equivalent to any coinsurance requirements	
	than a copayment req physical illness.	[(ii)] uired for		Where there are no coinsurance requirements, not greater under the contract or a certificate for a	
	COPAYMENT THA MAINTENANCE TR		EATER T	TH MAINTENANCE ORGANIZATION MAY NOT CHARGE A HAN 50% OF THE DAILY COST FOR METHADONE	
32				Article - Insurance	
33	15-802.				
	individual with a mer	ntal illnes	s, emotio	et to this section may not discriminate against an nal disorder, drug abuse disorder, or alcohol sefits for the diagnosis and treatment of these	

	for the diagnosis and treatment of physical illnesses.				
3	(d) It is not discriminatory under subsection (c) of this section if at least the following benefits are provided:				
7 8	(1) with respect to inpatient benefits for services provided in a licensed or certified facility, including hospital inpatient benefits, the total number of days for which benefits are payable and the terms and conditions that apply to those benefits are at least equal to those that apply to the benefits available under the policy or contract for physical illnesses;				
12	(2) subject to subsection (g) of this section, with respect to benefits for partial hospitalization, at least 60 days of partial hospitalization are covered under the same terms and conditions that apply to the benefits available under the policy or contract for physical illnesses; and				
16	with respect to outpatient coverage, other than for inpatient or partial hospitalization services, benefits for covered expenses arising from services provided to treat mental illnesses, emotional disorders, drug abuse, or alcohol abuse are at a rate that, after the applicable deductible, is not less than:				
18 19	of not more than 12 m		80% for the first five visits in a calendar year or benefit period		
20 21	period of not more tha	. ,	65% for the 6th through 30th visit in a calendar year or benefit nths; and		
22 23	year or benefit period		50% for the 31st visit and any subsequent visit in a calendar ore than 12 months.		
	from the treatment of	mental il	efits under this section are required only for expenses arising lnesses, emotional disorders, drug abuse, or alcohol lgment of health care providers:		
27 28	abuse is treatable; and		the mental illness, emotional disorder, drug abuse, or alcohol		
29	((ii)	the treatment is medically necessary.		
30	(2)	The bene	efits required under this section:		
31 32			shall be provided as one set of benefits covering mental drug abuse, and alcohol abuse;		
		ered unde	shall have the same terms and conditions as the benefits for er the policy or contract subject to this section, except section; and		
36		(iii)	may be delivered under a managed care system.		

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1 2	(3) this section, a policy of			insurance requirements under subsection (d)(3) of to this section may not have:
3 4	covered under this sec	(i) etion;	separate	lifetime maximums for physical illnesses and illnesses
5 6	illnesses and illnesses	(ii) covered		deductibles and coinsurance amounts for physical s section; or
7 8	than 12 months for ph	(iii) ysical illi		out-of-pocket limits in a benefit period of not more dillnesses covered under this section.
	(4) copayments required illnesses covered und		olicy or	ubject to subparagraph (ii) of this paragraph, ANY contract subject to this section for benefits for ll be:
12 13	under this section; or	[(i)]	1.	actuarially equivalent to any coinsurance requirements
		[(ii)] red under	2. the police	if there are no coinsurance requirements, not greater than ey or contract for a benefit for a physical
			THAT IS	URER OR NONPROFIT HEALTH SERVICE PLAN MAY NOT GREATER THAN 50% OF THE DAILY COST FOR EATMENT.
	to health insurance po	olicies, co	ontracts, a	ER ENACTED, That this Act shall apply only and certificates that are delivered, issued for after the effective date of this Act.
25 26	measure, is necessary has been passed by a	for the i	mmediate	ER ENACTED, That this Act is an emergency expreservation of the public health or safety, supported by three-fifths of all the members expressed General Assembly, and shall take effect from