1	L.D. 1003
2	Date: (Filing No. H-)
3	HEALTH COVERAGE, INSURANCE AND FINANCIAL SERVICES
4	Reproduced and distributed under the direction of the Clerk of the House.
5	STATE OF MAINE
6	HOUSE OF REPRESENTATIVES
7	130TH LEGISLATURE
8	SECOND REGULAR SESSION
9 10	COMMITTEE AMENDMENT "" to H.P. 741, L.D. 1003, "An Act To Improve Outcomes for Persons with Limb Loss"
11 12	Amend the bill by striking out everything after the enacting clause and inserting the following:
13 14	'Sec. 1. 24-A MRSA §4315, sub-§2, as amended by PL 2003, c. 688, Pt. I, §1, is further amended to read:
15 16 17 18 19 20 21 22	2. Required coverage. A carrier shall provide coverage for prosthetic devices in all health plans that, at a minimum, equals, except as provided in subsection 8, the coverage and payment for prosthetic devices provided under federal laws and regulations for the aged and disabled pursuant to 42 United States Code, Sections 1395k, 13951 and 1395m and 42 Code of Federal Regulations, Sections 414.202, 414.210, 414.228 and 410.100. Covered benefits must be provided for a prosthetic device determined by the enrollee's provider, in accordance with section 4301-A, subsection 10-A, to be the most appropriate model that adequately meets the medical needs of the enrollee.:
23 24 25	A. A prosthetic device determined by the enrollee's provider, in accordance with section 4301-A, subsection 10-A, to be the most appropriate model that adequately meets the medical needs of the enrollee; and
26 27 28 29 30 31	B. With respect to an enrollee under 18 years of age, in addition to coverage of a prosthetic device required by paragraph A, a prosthetic device determined by the enrollee's provider, in accordance with section 4301-A, subsection 10-A, to be the most appropriate model that meets the medical needs of the enrollee for recreational purposes, as applicable, to maximize the enrollee's ability to ambulate, run, bike and swim and to maximize upper limb function.
32 33	Sec. 2. 24-A MRSA §4315, sub-§6, as amended by PL 2009, c. 603, §1 and affected by §2, is further amended to read:

Page 1 - 130LR1214(02)

COMMITTEE AMENDMENT

6. Exclusions. Coverage Except as provided in subsection 2, paragraph B for an
enrollee under 18 years of age, coverage is not required pursuant to this section for a
prosthetic device that is designed exclusively for an athletic purposes purpose.

4

Sec. 3. 24-A MRSA §4315, sub-§9 is enacted to read:

5 9. Report. No later than June 30, 2027, each carrier that issues a health plan subject 6 to this section shall report to the superintendent on its experience pursuant to this section for plan years 2023, 2024, 2025 and 2026. The report must be in a form prescribed by the 7 superintendent and must include the number of claims and the total amount of claims paid 8 9 in this State for the services required by this section. The superintendent shall aggregate this data by plan year in a report and submit the report to the joint standing committee of 10 the Legislature having jurisdiction over health coverage and insurance matters no later than 11 12 November 1, 2027.

Sec. 4. No addition to State's essential health benefits; legislative finding. The Legislature finds that the requirements of this Act do not constitute an addition to the State's essential health benefits that requires defrayal of costs by the State pursuant to 42 United States Code, Section 18031(d)(3)(B) because the requirements clarify that the law requiring a health insurance carrier to provide coverage for prosthetic devices to meet the medical needs of an enrollee under 18 years of age includes a prosthetic device designed to meet the enrollee's medical needs for recreational purposes.

Sec. 5. Application. The requirements of this Act apply to all policies, contracts
and certificates executed, delivered, issued for delivery, continued or renewed in this State
on or after January 1, 2023. For purposes of this Act, all contracts are deemed to be renewed
no later than the next yearly anniversary of the contract date.'

Amend the bill by relettering or renumbering any nonconsecutive Part letter or section number to read consecutively.

26

39

40

SUMMARY

27 This amendment replaces the bill. Under current law, health insurance carriers are required to provide coverage for a prosthetic device designed to meet an enrollee's medical 28 29 needs. The amendment requires a carrier to provide coverage to enrollees under 18 years of age for a prosthetic device designed to meet an enrollee's medical needs for recreational 30 31 purposes. The requirement applies to all health plans issued or renewed on or after January 32 1, 2023. The amendment requires carriers to report to the Superintendent of Insurance on their claims experience with providing the covered services after 4 years, and the 33 34 superintendent is required to report to the joint standing committee of the Legislature 35 having jurisdiction over health coverage and insurance matters.

The amendment also includes language stating the Legislature's finding that the changes are not an addition to the State's essential health benefits that would require the State to defray costs pursuant to the federal Patient Protection and Affordable Care Act.

FISCAL NOTE REQUIRED (See attached)

Page 2 - 130LR1214(02)

COMMITTEE AMENDMENT