



# 125th MAINE LEGISLATURE

## FIRST REGULAR SESSION-2011

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Legislative Document

No. 1244

S.P. 365

In Senate, March 22, 2011

### **An Act To Clarify Usual and Customary Charges under the Workers' Compensation Laws**

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Reference to the Committee on Labor, Commerce, Research and Economic Development suggested and ordered printed.

*Joseph G. Carleton Jr.*

JOSEPH G. CARLETON, JR.  
Secretary of the Senate

Presented by Senator GOODALL of Sagadahoc.  
Cosponsored by Senators: JACKSON of Aroostook, SCHNEIDER of Penobscot,  
Representative: McKANE of Newcastle.

1 **Be it enacted by the People of the State of Maine as follows:**

2 **Sec. 1. 39-A MRSA §209, sub-§2**, as enacted by PL 1991, c. 885, Pt. A, §8 and  
3 affected by §§9 to 11, is amended to read:

4 **2. Payment for services.** A health facility or health care provider must be paid  
5 either its usual and customary charge for any health care services or the maximum charge  
6 established under the rules adopted pursuant to subsection 1, whichever is less. For  
7 purposes of this subsection, "usual and customary charge" means, for a specific health  
8 care service, the average charge for that health care service for the 2 preceding calendar  
9 quarters. For purposes of determining the average charge for a specific health care  
10 service, the charge for each individual rendering of that health care service is the sum of:

11 A. All reimbursements from a private, 3rd-party payor for that individual rendering  
12 of a specific health care service; and

13 B. All payments from the patient for that individual rendering of a specific health  
14 care service received by the health facility or health care provider.

15 **SUMMARY**

16 This bill defines "usual and customary charge" regarding payment of a health care  
17 service under the workers' compensation laws as the average charge for that health care  
18 service for the 2 preceding calendar quarters. For purposes of calculating the average  
19 charge, the charge of each individual rendering of a specific health care service is  
20 calculated as the sum of all reimbursements from a private, 3rd-party payor and all  
21 payments from the patient.