

HOUSE BILL No. 5386

March 1 1994 Introduced by Reps McNutt Jamian Shugars Randall Bender Kukuk Hill and Bandstra and referred to the Committee on Public Health

A bill to amend sections 2477, 2477b, 2477c, 3405, 3475, 3631, and 3709 of Act No 218 of the Public Acts of 1956, entitled as amended

"The insurance code of 1956,

section 2477 as amended and sections 2477b and 2477c as added by Act No 173 of the Public Acts of 1986, sections 3405, 3631, and 3709 as amended by Act No 137 of the Public Acts of 1989, and section 3475 as amended by Act No 280 of the Public Acts of 1984, being sections 500 2477, 500 2477b, 500 2477c, 500 3405, 500 3475, 500 3631, and 500 3709 of the Michigan Compiled Laws and to add section 3107b

THE PEOPLE OF THE STATE OF MICHIGAN ENACT

1 Section 1 Sections 2477, 2477b, 2477c, 3405, 3475, 3631,
2 and 3709 of Act No 218 of the Public Acts of 1956, section 2477
3 as amended and sections 2477b and 2477c as added by Act No 173

05869'94 DKH

- 1 of the Public Acts of 1986, sections 3405, 3631, and 3709 as
- 2 amended by Act No 137 of the Public Acts of 1989, and
- 3 section 3475 as amended by Act No 280 of the Public Acts of
- 4 1984, being sections 500 2477, 500 2477b, 500 2477c, 500 3405,
- 5 500 3475, 500 3631, and 500 3709 of the Michigan Compiled Laws,
- 6 are amended and section 3107b is added to read as follows
- 7 Sec 2477 (1) Every insurer providing professional liabil-
- 8 ity insurance to a person licensed by the Michigan board of medi-
- 9 cine, the Michigan board of osteopathic medicine and surgery, the
- 10 Michigan board of podiatric medicine and surgery, the Michigan
- 11 board of dentistry, THE MICHIGAN BOARD OF CHIROPRACTIC, and the
- 12 hospitals licensed by the state department of public health in
- 13 this state shall submit the -following- data PRESCRIBED IN THIS
- 14 SECTION at the times prescribed to the state insurance
- 15 commissioner All data shall be provided with respect to any
- 16 complaint filed against -such THE insured in any court, if the
- 17 complaint seeks damages for personal injury claimed to have been
- 18 caused by the negligence of the insured relating to the insured's
- 19 professional services, or the performance of professional serv-
- 20 ices by the insured without consent or informed consent, or a
- 21 breach of warranty or contract for a medical result relating to
- 22 the insured's professional services
- 23 (2) The following data and information shall be furnished to
- 24 the commissioner within 30 days of the filing of an answer on
- 25 behalf of the insured
- 26 (a) The name and license number of -such THE insured

- 1 (b) The date of the injury
- 2 (c) The date of the filing of the complaint
- 3 (d) The nature of the complaint
- 4 (e) Any other information the commissioner may require
- 5 (3) The following data and information shall be furnished to
- 6 the commissioner, the appropriate licensing board in the depart-
- 7 ment of -licensing and regulation COMMERCE, and, if the insured
- 8 or person is a hospital, to the state department of public health
- 9 within 30 days from any judgment, settlement, or other dismissal
- 10 involving the insured
- 11 (a) The date of any judgment, settlement, or other
- 12 dismissal
- (b) The amount of any judgment against the insured
- 14 (c) The amount of any settlement paid on behalf of the
- 15 insured, whether -such THE settlement was negotiated by suit or
- 16 without the filing of a complaint for damages
- (d) Of the amounts provided in subdivisions (b) and (c), the
- 18 amount attributable to economic damages and the amount attribut-
- 19 able to noneconomic damages
- 20 (e) Any other information the commissioner may require
- 21 (4) The insurance commissioner, the licensing board, and the
- 22 department of public health shall retain the information and
- 23 maintain the files in the form and for a period as he or she
- 24 shall determine necessary in his or her sole discretion The
- 25 commissioner, the licensing board, and the department of public
- 26 health shall maintain the data and information filed in
- 27 accordance with this section as confidential records and shall

- 1 not release the data and information except for bona fide
- 2 research, educational, licensing, actuarial, department of social
- 3 services subrogation, or legislative purposes however, the name
- 4 of the insurer shall be omitted The commissioner, the chair-
- 5 person of the licensing board, and the director of public health
- 6 in his or her sole discretion shall determine the validity of any
- 7 request for the information
- 8 (5) There -shall be IS no liability on the part of and a
- 9 cause of action of any nature shall not arise against an insurer
- 10 reporting hereunder or its agents or employees, or the commis-
- 11 sloner or his or her representatives, for any action taken by
- 12 them pursuant to this section
- 13 Sec 2477b (1) Every person, other than an insurer, who
- 14 pays or who has assumed liability to pay a municipal liability
- 15 claim arising in this state or a professional liability claim
- 16 against a health care provider licensed by the Michigan board of
- 17 medicine the Michigan board of osteopathic medicine and surgery,
- 18 the Michigan board of podiatric medicine and surgery, -or- the
- 19 Michigan board of dentistry, OR THE MICHIGAN BOARD OF
- 20 CHIROPRACTIC, shall submit the data prescribed in this section at
- 21 the times prescribed in this section
- 22 (2) The following data shall be furnished to the commis-
- 23 sioner pursuant to subsection (1) within 30 days after an answer
- 24 is filed on behalf of a defendant
- 25 (a) The name of the person against whom the claim was made
- 26 and the person's professional license number, if any

- 1 (b) The date of the injury
- 2 (c) The date of the filing of the complaint
- 3 (d) The nature of the complaint
- 4 (e) Any other information the commissioner may require
- 5 (3) The following data shall be furnished to the commis-
- 6 sloner within 30 days after any judgment, settlement, or dis-
- 7 missal of a claim described in subsection (1)
- 8 (a) The name of the person against whom the claim was made,
- 9 and the person's professional license number, if any
- (b) The name of the person who paid the claim, if different
- 11 from subdivision (a)
- (c) The date of the injury
- (d) The date of the filing of the complaint, if any
- 14 (e) The nature of the complaint
- 15 (f) The amount of any judgment
- (g) The amount of any settlement, whether negotiated pursu-
- 17 ant to an action or without the filing of a complaint for
- 18 damages
- (h) Of the amounts provided in subdivisions (f) and (g), the
- 20 amount attributable to economic damages and noneconomic damages
- 21 (1) Any other information the commissioner may require
- 22 (4) The insurance commissioner shall retain the information
- 23 and maintain the files in the form and for a period as he or she
- 24 shall determine necessary in his or her sole discretion The
- 25 commissioner shall maintain the data and information filed in
- 26 accordance with this section as confidential records The
- 27 commissioner shall not release the data and information filed in

- 1 accordance with this section except for bona fide research,
- 2 educational, licensing, actuarial, department of social services
- 3 subrogation, or legislative purposes However, the commissioner
- 4 shall not release the name of any person that is part of the data
- 5 and information filed in accordance with this section The com-
- 6 missioner in his or her sole discretion shall determine the
- 7 validity of any request for the information
- 8 (5) There shall be IS no liability on the part of, and a
- 9 cause of action of any nature shall not arise against, a person
- 10 reporting hereunder or its agents or employees, or the commis-
- 11 sioner or his or her representatives, for any action taken by
- 12 them pursuant to this section
- 13 Sec 2477c (1) Every attorney licensed to practice law in
- 14 this state who represents a plaintiff or defendant in regard to a
- 15 municipal liability claim arising in this state or a professional
- 16 liability claim against a health care provider licensed by the
- 17 Michigan board of medicine, the Michigan board of osteopathic
- 18 medicine and surgery, the Michigan board of podiatric medicine
- 19 and surgery, or the Michigan board of dentistry, OR THE
- 20 MICHIGAN BOARD OF CHIROPRACTIC, shall submit the data prescribed
- 21 in this section at the times prescribed in this section
- 22 (2) The following data shall be furnished to the commis-
- 23 sioner pursuant to subsection (1) within 30 days after an answer
- 24 is filed on behalf of a plaintiff or defendant
- 25 (a) The name of the plaintiff or defendant
- 26 (b) The name of the attorney

- 1 (c) The date of the injury
- 2 (d) The date of the filing of the complaint, if any
- 3 (e) The nature of the complaint
- 4 (f) Any other information the commissioner may require
- 5 (3) The following data shall be furnished to the commis-
- 6 sioner within 30 days after any judgment, settlement, or dis-
- 7 missal of a claim described in subsection (1)
- 8 (a) The name of the plaintiff or defendant
- 9 (b) The name of the attorney
- 10 (c) The date of the injury
- (d) The date of the filing of the complaint, if any
- (e) The nature of the complaint
- (f) The amount of any judgment
- 14 (g) The amount of any settlement, whether negotiated pursu-
- 15 ant to an action or without the filing of a complaint for
- 16 damages
- (h) Of the amounts provided in subdivisions (f) and (g), the
- 18 amount attributable to economic damages and noneconomic damages
- 19 (1) Any other information the commissioner may require
- 20 (4) The insurance commissioner shall retain the information
- 21 and maintain the files in the form and for a period as he or she
- 22 shall determine necessary in his or her sole discretion The
- 23 commissioner shall maintain the data and information filed in
- 24 accordance with this section as confidential records and shall
- 25 not release the data and information except for bona fide
- 26 research, educational, licensing, actuarial, department of social
- 27 services subrogation, or legislative purposes However, the

- 1 commissioner shall not release the name of any person that is
- 2 part of the data and information filed in accordance with this
- 3 section The commissioner in his or her sole discretion shall
- 4 determine the validity of any request for the information
- 5 (5) There -shall be IS no liability on the part of, and a
- 6 cause of action of any nature shall not arise against, an attor-
- 7 ney reporting hereunder or the attorney's agents or employees, or
- 8 the commissioner or his or her representatives, for any action
- 9 taken by them pursuant to this section
- 10 SEC 3107B EXPENSES WITHIN PERSONAL PROTECTION INSURANCE
- 11 COVERAGE UNDER SECTION 3107 DO NOT INCLUDE CHARGES FOR A PRACTICE
- 12 OF CHIROPRACTIC SERVICE UNLESS THAT SERVICE WAS INCLUDED IN THE
- 13 DEFINITION OF PRACTICE OF CHIROPRACTIC UNDER SECTION 16401 OF THE
- 14 PUBLIC HEALTH CODE, ACT NO 368 OF THE PUBLIC ACTS OF 1978, BEING
- 15 SECTION 333 16401 OF THE MICHIGAN COMPILED LAWS, AS OF MAY 20,
- 16 1992
- 17 Sec 3405 (1) For the purpose of doing business as an
- 18 organization under the prudent purchaser act, Act No 233 of the
- 19 Public Acts of 1984, being sections 550 51 to 550 63 of the
- 20 Michigan Compiled Laws, an insurer authorized in this state to
- 21 write disability insurance -which THAT provides coverage for
- 22 hospital, nursing, medical, surgical, or sick-care benefits may
- 23 enter into prudent purchaser agreements with providers of hospi-
- 24 tal, nursing, medical, surgical, or sick-care services pursuant
- 25 to this section and Act No 233 of the Public Acts of 1984
- 26 (2) An insurer may offer disability insurance policies under
- 27 which the insured persons shall be required, as a condition of

- 1 coverage, to obtain hospital, nursing, medical, surgical, or
- 2 sick-care services exclusively from health care providers who
- 3 have entered into prudent purchaser agreements A person to whom
- 4 such a policy is offered shall also be offered a policy -which-
- 5 THAT
- 6 (a) Does not, as a condition of coverage, require insured
- 7 persons to obtain services exclusively from health care providers
- 8 who have entered into prudent purchaser agreements
- 9 (b) Does not give a financial advantage or other advantage
- 10 to an insured person who elects to obtain services from health
- 11 care providers who have entered into prudent purchaser
- 12 agreements
- 13 (3) An insurer may offer disability insurance policies under
- 14 which insured persons who elect to obtain hospital, nursing, med-
- 15 ical, surgical, or sick-care services from health care providers
- 16 who have entered into prudent purchaser agreements shall realize
- 17 a financial advantage or other advantage by selecting such
- 18 providers Policies offered pursuant to this subsection shall
- 19 not, as a condition of coverage, require insured persons to
- 20 obtain such services exclusively from health care providers who
- 21 have entered into prudent purchaser agreements A person to whom
- 22 such a policy is offered shall also be offered a policy which
- **23 THAT**
- 24 (a) Does not, as a condition of coverage, require insured
- 25 persons to obtain services exclusively from health care providers
- 26 who have entered into prudent purchaser agreements

- 1 (b) Does not give a financial advantage or other advantage
- 2 to an insured person who elects to obtain services from health
- 3 care providers who have entered into prudent purchaser
- 4 agreements
- 5 (4) The rates charged by an insurer for coverage under poli-
- 6 cies issued under this section shall not be unreasonably lower
- 7 than what is necessary to meet the expenses of the insurer for
- 8 providing this coverage and shall not have an anticompetitive
- 9 effect or result in predatory pricing in relation to prudent pur-
- 10 chaser agreement coverages offered by other organizations
- (5) An insurer shall not discriminate against a class of
- 12 health care providers when entering into prudent purchaser agree-
- 13 ments with health care providers for its provider panel This
- 14 subsection shall not be construed to
- (a) Prohibit the formation of a provider panel consisting of
- 16 a single class of providers when a service provided for in the
- 17 specifications of a purchaser may legally be provided only by a
- 18 single class of providers
- (b) Prohibit the formation of a provider panel which THAT
- 20 conforms to the specifications of a purchaser of the coverage
- 21 authorized by this section so long as the specifications do not
- 22 exclude any class of health care providers who may legally per-
- 23 form the services included in the coverage
- 24 (c) Require an organization -which THAT has uniformly
- 25 applied the standards filed pursuant to section 3(3) of Act
- 26 No 233 of the Public Acts of 1984, being section 550 53 of the

- 1 Michigan Compiled Laws, to contract with any individual
- 2 provider
- 3 (D) REQUIRE COVERAGE OR REIMBURSEMENT FOR A PRACTICE OF CHI-
- 4 ROPRACTIC SERVICE UNLESS THAT SERVICE WAS INCLUDED IN THE DEFINI-
- 5 TION OF PRACTICE OF CHIROPRACTIC UNDER SECTION 16401 OF THE
- 6 PUBLIC HEALTH CODE, ACT NO 368 OF THE PUBLIC ACTS OF 1978, BEING
- 7 SECTION 333 16401 OF THE MICHIGAN COMPILED LAWS, AS OF MAY 20,
- 8 1992
- 9 (6) Nothing in this 1984 amendatory act shall apply to any
- 10 contract -which THAT is in existence before December 20, 1984,
- 11 or the renewal of such contract
- 12 Sec 3475 Notwithstanding any provision of any policy of
- 13 insurance or certificate, if an insurance policy or certificate
- 14 provides for reimbursement for any service -which THAT may be
- 15 legally performed by a person fully licensed as a psychologist
- 16 under part 182 of the public health code, Act No 368 of the
- 17 Public Acts of 1978, being sections 333 18201 to 333 18237 of the
- 18 Michigan Compiled Laws by a podiatrist licensed under part 180
- 19 of the public health code, Act No 368 of the Public Acts of
- 20 1978, being sections 333 18001 to 333 18033 of the Michigan
- 21 Compiled Laws OR by a chiropractor licensed under part 164 of
- 22 the public health code, Act No 368 of the Public Acts of 1978,
- 23 being sections 333 16401 to 333 16431 of the Michigan Compiled
- 24 Laws reimbursement under the insurance policy or certificate
- 25 shall not be denied if the service is rendered by a person fully
- 26 licensed as a psychologist under part 182 of the public health
- 27 code, Act No 368 of the Public Acts of 1978 by a podiatrist

- 1 licensed under part 180 of the public health code. Act No 368
- 2 of the Public Acts of 1978 or by a chiropractor licensed under
- 3 part 164 of the public health code. Act No 368 of the Public
- 4 Acts of 1978 within the statutory provisions provided in his or
- 5 her individual practice act This section -shall not be con-
- 6 strued as requiring the DOES NOT REQUIRE coverage for a psychol-
- 7 ogist in any insurance policy AND DOES NOT REQUIRE COVERAGE OR
- 8 REIMBURSEMENT FOR A PRACTICE OF CHIROPRACTIC SERVICE UNLESS THAT
- 9 SERVICE WAS INCLUDED IN THE DEFINITION OF PRACTICE OF CHIROPRAC-
- 10 TIC UNDER SECTION 16401 OF ACT NO 368 OF THE PUBLIC ACTS OF
- 11 1978, BEING SECTION 333 16401 OF THE MICHIGAN COMPILED LAWS, AS
- 12 OF MAY 20, 1992 This section -shall DOES not apply to a policy
- 13 or certificate written pursuant to section 3405, 3631, or 3709
- 14 involving a prudent purchaser agreement
- 15 Sec 3631 (1) For the purpose of doing business as an
- 16 organization under the prudent purchaser act, Act No 233 of the
- 17 Public Acts of 1984, being sections 550 51 to 550 63 of the
- 18 Michigan Compiled Laws, an insurer authorized to write group dis-
- 19 ability insurance or family expense insurance -which THAT pro-
- 20 vides coverage for hospital, nursing, medical, surgical, or
- 21 sick-care benefits may enter into prudent purchaser agreements
- 22 with providers of hospital, nursing, medical, surgical, or
- 23 sick-care services pursuant to this section and Act No 233 of
- 24 the Public Acts of 1984
- 25 (2) An insurer may offer group disability insurance policies
- 26 or family expense policies under which the insured persons shall
- 27 be required, as a condition of coverage, to obtain hospital,

- 1 nursing, medical, surgical, or sick-care services exclusively
- 2 from health care providers who have entered into prudent pur-
- 3 chaser agreements
- 4 (3) An individual who is a member of a group who is offered
- 5 the option of being under a policy pursuant to subsection (2)
- 6 shall also be offered the option of being insured under a policy
- 7 pursuant to subsection (4) This subsection shall only apply if
- 8 the group to which the individual is a member has 25 or more mem-
- 9 bers or if the provider panel -which THAT is providing the serv-
- 10 ices under the group policy is limited by the organization to a
- 11 specific number pursuant to section 3(1) of the prudent pur-
- 12 chaser act ACT NO 233 OF THE PUBLIC ACTS OF 1984, BEING
- 13 SECTION 550 53 OF THE MICHIGAN COMPILED LAWS
- (4) An insurer may offer group disability insurance policies
- 15 or family expense policies under which insured persons who elect
- 16 to obtain hospital, nursing, medical, surgical, or sick-care
- 17 services from health care providers who have entered into prudent
- 18 purchaser agreements shall realize a financial advantage or other
- 19 advantage by selecting such a provider Policies offered pursu-
- 20 ant to this subsection shall not, as a condition of coverage,
- 21 require insured persons to obtain such services exclusively from
- 22 health care providers who have entered into prudent purchaser
- 23 agreements
- 24 (5) An individual who is a member of a group who is offered
- 25 the option of being insured under a policy pursuant to
- 26 subsection (2) or (4) shall also be offered the option of being
- 27 insured under a policy -which THAT

- 1 (a) Does not, as a condition of coverage, require insured
 2 persons to obtain services exclusively from health care providers
 3 who have entered into prudent purchaser agreements
- 4 (b) Does not give a financial advantage or other advantage
 5 to an insured person who elects to obtain services from health
 6 care providers who have entered into prudent purchaser
 7 agreements
- 8 (6) Subsection (5) shall only apply if the group to which
 9 the individual is a member has 25 or more members and if the
 10 group on the effective date of this section DECEMBER 20, 1984
 11 had health care coverage through the group sponsor
- (7) The rates charged by an insurer for coverage under poli13 cies issued under this section shall not be unreasonably lower
 14 than what is necessary to meet the expenses of the insurer for
 15 providing this coverage and shall not have an anticompetitive
 16 effect or result in predatory pricing in relation to prudent pur17 chaser agreement coverages offered by other organizations
- 18 (8) An insurer shall not discriminate against a class of
 19 health care providers when entering into prudent purchaser agree20 ments with health care providers for its provider panel This
 21 subsection shall not be construed to
- (a) Prohibit the formation of a provider panel consisting of 23 a single class of providers when a service provided for in the 24 specifications of a purchaser may legally be provided only by a 25 single class of providers
- (b) Prohibit the formation of a provider panel which THAT
 27 conforms to the specifications of a purchaser of the coverage

- 1 authorized by this section so long as the specifications do not
- 2 exclude any class of health care providers who may legally per-
- 3 form the services included in the coverage
- 4 (c) Require an organization which THAT has uniformly
- 5 applied the standards filed pursuant to section 3(3) of Act
- 6 No 233 of the Public Acts of 1984, being section 550 53 of the
- 7 Michigan Compiled Laws, to contract with any individual
- 8 provider
- 9 (D) REQUIRE COVERAGE OR REIMBURSEMENT FOR A PRACTICE OF CHI-
- 10 ROPRACTIC SERVICE UNLESS THAT SERVICE WAS INCLUDED IN THE DEFINI-
- 11 TION OF PRACTICE OF CHIROPRACTIC UNDER SECTION 16401 OF THE
- 12 PUBLIC HEALTH CODE, ACT NO 368 OF THE PUBLIC ACTS OF 1978, BEING
- 13 SECTION 333 16401 OF THE MICHIGAN COMPILED LAWS, AS OF MAY 20,
- 14 1992
- 15 (9) Nothing in this 1984 amendatory act shall apply to any
- 16 contract which THAT is in existence before December 20, 1984,
- 17 or the renewal of such contract
- 18 Sec 3709 (1) For the purpose of doing business as an
- 19 organization under the prudent purchaser act Act No 233 of the
- 20 Public Acts of 1984, being sections 550 51 to 550 63 of the
- 21 Michigan Compiled Laws, an insurer authorized under this chapter
- 22 to write health insurance -which THAT provides coverage for hos-
- 23 pital, nursing, medical, surgical, or sick-care benefits may
- 24 enter into prudent purchaser agreements with providers of hospi-
- 25 tal, nursing, medical, surgical, or sick-care services pursuant
- 26 to this section and Act No 233 of the Public Acts of 1984

- 1 (2) An insurer may offer health insurance policies or family
- 2 expense policies under which the insured persons shall be
- 3 required, as a condition of coverage, to obtain hospital, nurs-
- 4 ing, medical, surgical, or sick-care services exclusively from
- 5 health care providers who have entered into prudent purchaser
- 6 agreements
- 7 (3) An individual who is a member of a group who is offered
- 8 the option of being insured under a policy pursuant to subsection
- 9 (2) shall also be offered the option of being insured under a
- 10 policy pursuant to subsection (4) This subsection shall only
- 11 apply if the group to which the individual is a member has 25 or
- 12 more members or if the provider panel which THAT is providing
- 13 the services under the group policy is limited by the organiza-
- 14 tion to a specific number pursuant to section 3(1) of the Act
- 15 No 233 of the Public Acts of 1984, being section 550 53 of the
- 16 Michigan Compiled Laws
- 17 (4) An insurer may offer health insurance policies under
- 18 which insured persons who elect to obtain hospital, nursing, med-
- 19 ical, surgical, or sick-care services from health care providers
- 20 who have entered into prudent purchaser agreements shall realize
- 21 a financial advantage or other advantage by selecting such
- 22 providers Policies offered pursuant to this subsection shall
- 23 not, as a condition of coverage, require insured persons to
- 24 obtain services exclusively from health care providers who have
- 25 entered into prudent purchaser agreements
- 26 (5) An individual who is a member of a group who is offered
- 27 the option of being insured under a policy pursuant to subsection

- 1 (2) or (4) shall also be offered the option of being insured
- 2 under a policy which THAT
- 3 (a) Does not, as a condition of coverage, require insured
- 4 persons to obtain services exclusively from health care providers
- 5 who have entered into prudent purchaser agreements
- 6 (b) Does not give a financial advantage or other advantage
- 7 to an insured person who elects to obtain services from health
- 8 care providers who have entered into prudent purchaser
- 9 agreements
- (6) Subsection (5) shall only apply if the group to which
- 11 the individual is a member has 25 or more members and if the
- 12 group on December 20, 1984 had health care coverage through the
- 13 group sponsor
- 14 (7) The rates charged by an insurer for coverage under poli-
- 15 cies issued under this section shall not be unreasonably lower
- 16 than what is necessary to meet the expenses of the insurer for
- 17 providing this coverage and shall not have an anticompetitive
- 18 effect or result in predatory pricing in relation to prudent pur-
- 19 chaser agreement coverages offered by other organizations
- (8) An insurer shall not discriminate against a class of
- 21 health care providers when entering into prudent purchaser agree-
- 22 ments with health care providers for its provider panel This
- 23 subsection shall not be construed to
- 24 (a) Prohibit the formation of a provider panel consisting of
- 25 a single class of providers when a service provided for in the
- 26 specifications of a purchaser may legally be provided only by a
- 27 single class of providers

- 1 (b) Prohibit the formation of a provider panel which THAT
- 2 conforms to the specifications of a purchaser of the coverage
- 3 authorized by this section so long as the specifications do not
- 4 exclude any class of health care providers who may legally per-
- 5 form the services included in the coverage
- 6 (c) Require an organization -which THAT has uniformly
- 7 applied the standards filed pursuant to section 3(3) of Act
- 8 No 233 of the Public Acts of 1984, being section 550 53 of the
- 9 Michigan Compiled Laws, to contract with any individual
- 10 provider

(

- 11 (D) REQUIRE COVERAGE OR REIMBURSEMENT FOR A PRACTICE OF CHI-
- 12 ROPRACTIC SERVICE UNLESS THAT SERVICE WAS INCLUDED IN THE DEFINI-
- 13 TION OF PRACTICE OF CHIROPRACTIC UNDER SECTION 16401 OF THE
- 14 PUBLIC HEALTH CODE, ACT NO 368 OF THE PUBLIC ACTS OF 1978, BEING
- 15 SECTION 333 16401 OF THE MICHIGAN COMPILED LAWS, AS OF MAY 20,
- 16 1992
- 17 (9) Nothing in this THE 1984 amendatory act THAT ADDED
- 18 THIS SECTION shall apply to any contract which THAT is in exis-
- 19 tence before December 20, 1984, or the renewal of such contract

05869'94 Final page DKH