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SFA**BILL ANALYSIS**

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Senate Bill 812 (as introduced 11-13-97)
Sponsor: Senator Dan L. DeGrow
Committee: Health Policy and Senior Citizens

Date Completed: 11-17-97

CONTENT

The bill would amend the Nonprofit Health Care Corporation Reform Act, which governs Blue Cross Blue and Shield of Michigan (BCBSM), to continue indefinitely an exemption for dentists from the requirement that providers participating with BCBSM on a per claim basis will accept payment from BCBSM for a given procedure as payment in full, for all cases involving that procedure in a calendar year.

Currently, under the Act, BCBSM may enter into participating contracts with licensed health professionals for health services. A contract may cover all members or be a separate and individual contract on a per claim basis, if the provider certifies to BCBSM that the provider meets specified criteria in the Act. One of the criteria is that the provider will accept payment from BCBSM as payment in full (i.e., not bill a patient for further charges) for all cases involving the procedure specified, for the duration of the calendar year. Currently, dentists are exempted from this criterion until January 1, 1998. The bill would delete the date. (The exclusion was first placed in the Act in 1988 and was scheduled to expire in 1993; subsequently the Act was amended to extend the exclusion to January 1, 1998.)

MCL 550.1502

Legislative Analyst: G. Towne

FISCAL IMPACT

The bill would have no fiscal impact on State or local government.

Fiscal Analyst: J. Walker

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This analysis was prepared by nonpartisan Senate staff for use by the Senate in its deliberations and does not constitute an official statement of legislative intent.