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HMOs: PROVIDE COVERAGE FOR MEDICALLY NECESSARY SERVICES

House Bill 5707

Sponsor: Rep. Laura Baird

**Committee: Insurance and Financial
Services**

Complete to 8-24-00

A SUMMARY OF HOUSE BILL 5707 AS INTRODUCED 5-2-00

Part 210 of the Public Health Code (the HMO act) contains a list of “basic health services” that health maintenance organizations are required to provide. These include physician services other than psychiatric services, ambulatory services, inpatient hospital services, emergency health services, outpatient mental health services up to 20 visits per year, certain levels of substance abuse care, diagnostic laboratory and diagnostic and therapeutic radiological services, home health services, and preventive health services.

The bill would amend that section to add “other health services if considered medically necessary by the treating physician.”

[Section 21034 of the code requires an HMO contract to include, at a minimum, primary health maintenance services during the period for which the initial license is issued and requires an HMO contract issued or in effect after the date of the first renewal of the license to include, at a minimum, the basic health services cited above. The code calls for an initial three-year licensing period and renewals every three years.]

MCL 333.21003

House Bill 5707 (8-24-00)

Analyst: C. Couch

■ This analysis was prepared by nonpartisan House staff for use by House members in their deliberations, and does not constitute an official statement of legislative intent.