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Senate Bill 89 (as introduced 1-28-03)
Senate Bill 527 (as introduced 5-29-03)
Sponsor: Senator Buzz Thomas
Committee: Health Policy

Date Completed: 2-23-04

CONTENT

Senate Bills 89 and 527 would amend the Nonprofit Health Care Corporation Reform Act and the Insurance Code, respectively, to prohibit a health care corporation, medical policy or certificate, or health maintenance organization (HMO) contract from requiring that a member, insured, or enrollee first obtain a referral from a primary care physician as a condition to covering dermatological services that were otherwise covered. Senate Bill 89 would apply to Blue Cross and Blue Shield of Michigan. Senate Bill 527 would apply to an expense-incurred hospital, medical, or surgical policy or certificate issued for delivery or renewed in this State, and an HMO contract.

Proposed MCL 550.401i (S.B. 89)
Proposed MCL 500.3406r (S.B. 527)

Legislative Analyst: Julie Koval

FISCAL IMPACT

Senate Bills 89 and 527 would limit the ability of insurers, particularly health maintenance organizations, from requiring referrals before a patient seeks dermatology services. This would not increase State costs per se, but could lead to slightly higher medical insurance costs as dermatology services would no longer be subject to "gatekeeping".

Fiscal Analyst: Steve Angelotti

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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.