

# HOUSE BILL No. 4080

January 28, 1997, Introduced by Reps. Crissman, McBryde and Goschka and referred to the Committee on Insurance.

A bill to amend 1978 PA 368, entitled "Public health code," by amending section 21004 (MCL 333.21004), as amended by 1982 PA 354, and by adding section 21053c.

## THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

1       Sec. 21004. (1) "EMERGENCY HEALTH SERVICES" MEANS SERVICES  
2 PROVIDED TO AN ENROLLEE FOR A CONDITION, INCLUDING SEVERE PAIN,  
3 THAT A PRUDENT LAY PERSON POSSESSING AN AVERAGE KNOWLEDGE OF  
4 HEALTH AND MEDICINE COULD REASONABLY EXPECT TO RESULT IN SERIOUS  
5 IMPAIRMENT TO HIS OR HER HEALTH.

6       (2) "Enrollee" means an individual who is entitled to  
7 receive health maintenance services under a health maintenance  
8 contract.

9       SEC. 21053C. (1) A HEALTH MAINTENANCE ORGANIZATION SHALL  
10 PROVIDE COVERAGE IN EACH GROUP AND INDIVIDUAL CONTRACT FOR

1 MEDICALLY NECESSARY EMERGENCY HEALTH SERVICES UP TO THE POINT OF  
2 STABILIZATION PROVIDED TO AN ENROLLEE BY A NONPARTICIPATING EMER-  
3 GENCY DEPARTMENT IF EITHER OF THE FOLLOWING APPLIES:

4 (A) DUE TO CIRCUMSTANCES BEYOND THE ENROLLEE'S CONTROL, THE  
5 ENROLLEE WAS UNABLE TO GO TO A PARTICIPATING EMERGENCY DEPARTMENT  
6 IN A TIMELY FASHION WITHOUT SERIOUS IMPAIRMENT TO HIS OR HER  
7 HEALTH.

8 (B) A PRUDENT LAY PERSON POSSESSING AN AVERAGE KNOWLEDGE OF  
9 HEALTH AND MEDICINE WOULD HAVE REASONABLY BELIEVED THAT HE OR SHE  
10 WOULD BE UNABLE TO GO TO A PARTICIPATING EMERGENCY DEPARTMENT IN  
11 A TIMELY FASHION WITHOUT SERIOUS IMPAIRMENT TO HIS OR HER  
12 HEALTH.

13 (2) A HEALTH MAINTENANCE ORGANIZATION SHALL PROVIDE COVERAGE  
14 IN EACH GROUP AND INDIVIDUAL CONTRACT FOR MEDICALLY NECESSARY  
15 SERVICES PROVIDED TO AN ENROLLEE BY A NONPARTICIPATING EMERGENCY  
16 DEPARTMENT AFTER STABILIZATION OF THE ENROLLEE IF EITHER OF THE  
17 FOLLOWING HAS OCCURRED:

18 (A) THE EMERGENCY PHYSICIAN CONTACTS THE HEALTH MAINTENANCE  
19 ORGANIZATION IN A TIMELY FASHION TO SEEK PRIOR AUTHORIZATION FOR  
20 ANY ADDITIONAL SERVICES BEYOND STABILIZATION THAT MAY BE PROMPTLY  
21 REQUIRED OR ARE NEEDED TO EFFECT A SAFE TRANSFER OF THE  
22 ENROLLEE. AS USED IN THIS SUBDIVISION, "TIMELY FASHION" MEANS  
23 EITHER OF THE FOLLOWING:

24 (i) THE EMERGENCY PHYSICIAN SUCCESSFULLY CONTACTED THE  
25 HEALTH MAINTENANCE ORGANIZATION AND DID NOT RECEIVE A DENIAL FROM  
26 THE PLAN WITHIN 30 MINUTES OF CONTACTING THE PLAN, UNLESS THE  
27 PLAN CAN DOCUMENT THAT IT HAD MADE A GOOD FAITH EFFORT BUT WAS

1 UNABLE TO REACH THE EMERGENCY PHYSICIAN WITHIN 30 MINUTES AFTER  
2 RECEIVING THE REQUEST FOR AUTHORIZATION.

3 (ii) THAT DESPITE A DOCUMENTED GOOD FAITH EFFORT BY THE  
4 EMERGENCY PHYSICIAN, HE OR SHE WAS UNABLE TO REACH THE ENROLLEE'S  
5 HEALTH MAINTENANCE ORGANIZATION WITHIN 30 MINUTES AFTER THE INI-  
6 TIAL EXAMINATION OF THE ENROLLEE OR, IF THE ENROLLEE NEEDED TO BE  
7 STABILIZED, WITHIN 30 MINUTES AFTER STABILIZATION.

8 (B) THE HEALTH MAINTENANCE ORGANIZATION DOES NOT IMMEDIATELY  
9 ARRANGE FOR AN ALTERNATE PLAN OF TREATMENT FOR THE ENROLLEE IF  
10 THE NONPARTICIPATING EMERGENCY PROVIDER AND THE ORGANIZATION  
11 CANNOT COME TO AN AGREEMENT ON WHICH SERVICES ARE NECESSARY  
12 BEYOND THOSE IMMEDIATELY NEEDED TO STABILIZE THE ENROLLEE.

13 (3) AS USED IN THIS SECTION, "STABILIZATION" MEANS THE POINT  
14 AT WHICH NO MATERIAL DETERIORATION OF A CONDITION IS LIKELY,  
15 WITHIN REASONABLE MEDICAL PROBABILITY, TO RESULT FROM OR OCCUR  
16 DURING TRANSFER OF THE PATIENT TO ANOTHER FACILITY.