

VETOES

Subsection (c), which was intended to prohibit a company already offering coverage for TMJ from terminating that coverage, is worded in such a way as to provide two valid interpretations. Under one interpretation, if the company has one policy which provides some type of treatment for TMJ prior to April 1, 1988, then that policy cannot be changed. Under the other interpretation, if a company has one policy which provides some type of treatment for TMJ prior to April 1, 1988, then all of that company's policies must have that coverage.

For these reasons, it would not be responsible to sign a bill that includes these serious interpretative problems, especially if litigation is likely. Consequently, I have today vetoed House Bill 1278.

Sincerely,
William Donald Schaefer
Governor

House Bill No. 1278

AN ACT concerning

Health Insurance - Reimbursement for Health Services

FOR the purpose of requiring any group or individual health insurance contract or policy issued by an insurer or a nonprofit health service plan that provides coverage for any ~~treatment,--diagnostic,~~ diagnostic or surgical procedure involving any bone or joint of the skeletal structure to provide the same coverage for the same ~~treatment, diagnostic,~~ diagnostic or surgical procedure involving any bone or joint of the face, neck, or head under certain circumstances; providing for an exception; providing for a certain coverage under certain policies; and generally relating to health insurance coverage for procedures involving the bones of the face, neck, or head.

BY adding to

Article 48A - Insurance Code
Section 490J
Annotated Code of Maryland
(1986 Replacement Volume and 1987 Supplement)

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:

Article 48A - Insurance Code