

Article - Health - General

Section 19-706(k)(1)

Annotated Code of Maryland

(1990 Replacement Volume and 1995 Supplement)

Preamble

~~WHEREAS, The findings of a Gallop Organization survey of 500 women who live and work in downtown Baltimore City showed that between 38 and 44 percent of all women age 18 through 40 visit only an obstetrician/gynecologist (OB/GYN) for routine care; and~~

WHEREAS, The findings of a Gallup Organization survey of 500 women who live and work in downtown Baltimore City showed that between 38 and 44 percent of all women age 18 through 40 visit only an obstetrician/gynecologist (OB/GYN) for routine care; and

WHEREAS, For women age 41 and older, 27 percent see only an OB/GYN for their routine care; and

WHEREAS, For minority women and those women of limited financial means, the percentages in all age groups who see only an OB/GYN for their routine care are significantly higher than others; and

WHEREAS, The federal Health Security Act has recognized that an OB/GYN is sometimes the only physician a significant number of women see for their primary care needs; and

WHEREAS, The legislation enacted in 1994 by the Maryland General Assembly to address this issue during its 1994 session has been interpreted by insurers as prohibiting an OB/GYN who chooses not to be a primary care physician from seeing patients without the patient first visiting a primary care provider, and does not account for the women who must see their OB/GYN more than once in a 12-month period; and

WHEREAS, Allowing women to receive all gynecological care from certain OB/GYN doctors without first requiring them to visit a primary care physician would improve their access to OB/GYN doctors; now, therefore,

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

Article 48A - Insurance Code

490Z.

(a) Any insurer or nonprofit health service plan that provides hospital, medical, or surgical benefits for issuance or delivery in the State to any group or individual on an expense-incurred basis, including a health maintenance organization, shall:

(1) Classify an obstetrician/gynecologist as a primary care physician; or

(2) [Permit] IF THE OBSTETRICIAN/GYNECOLOGIST CHOOSES NOT TO BE A PRIMARY CARE PHYSICIAN, PERMIT a woman to receive [an annual visit to an