By: **Delegates Barve and Goldwater** Introduced and read first time: February 11, 1999 Assigned to: Economic Matters

## A BILL ENTITLED

1 AN ACT concerning

2 3	Health Benefit Plans - Health Care Practitioners - Fee Schedules and Coding Guidelines				
4 FC 5 6 7	guidelines to health care practitioners at certain times; and generally relating to				
<ul> <li>8 BY repealing and reenacting, with amendments,</li> <li>9 Article - Insurance</li> <li>10 Section 15-113</li> <li>11 Annotated Code of Maryland</li> <li>12 (1997 Volume and 1998 Supplement)</li> </ul>					
<ul> <li>SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF</li> <li>MARYLAND, That the Laws of Maryland read as follows:</li> </ul>					
15	Article - Insurance				
16 15	5-113.				
17	(a)	(1)	In this section the following words have the meanings indicated.		
18		(2)	"Carrier" means:		
19			(i)	an insurer;	
20			(ii)	a nonprofit health service plan;	
21			(iii)	a health maintenance organization;	
22			(iv)	a dental plan organization; or	
23 24 re	gulation	by the St	(v) ate.	any other person that provides health benefit plans subject to	

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1 (3) "Health care practitioner" means an individual who is licensed, 2 certified, or otherwise authorized under the Health Occupations Article to provide 3 health care services.

4 (b) A carrier may not reimburse a health care practitioner in an amount less 5 than the sum or rate negotiated in the carrier's provider contract with the health care 6 practitioner.

7 (c) (1) A CARRIER SHALL PROVIDE A HEALTH CARE PRACTITIONER WITH A 8 WRITTEN COPY OF:

9 (I) THE FEE SCHEDULE THAT IS APPLICABLE TO THAT HEALTH 10 CARE PRACTITIONER; AND

11(II)THE CODING GUIDELINES TO BE USED BY THE PRACTITIONER12WHEN SUBMITTING CLAIMS TO THE CARRIER FOR REIMBURSEMENT.

13(2)A CARRIER SHALL PROVIDE THE FEE SCHEDULE AND CODING14GUIDELINES REQUIRED UNDER PARAGRAPH (1) OF THIS SUBSECTION:

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(I) AT THE TIME OF CONTRACT EXECUTION OR RENEWAL; AND

16 (II) 90 DAYS BEFORE THE CARRIER CHANGES THE FEE SCHEDULE
 17 OR CODING GUIDELINES.

(D) This section does not prohibit a carrier from providing bonuses or other
 incentive-based compensation to a health care practitioner if the bonus or other
 incentive-based compensation does not:

21 (1) violate § 19-705.1 of the Health - General Article; or

22 (2) deter the delivery of medically appropriate care to an enrollee.

23 [(d)] (E) (1) Except as provided in paragraph (2) of this subsection, a carrier

24 may not reimburse a health care practitioner in an amount that is less than the cost

25 to the health care practitioner for the cost of an oncology drug covered under the

26 patient's health benefit policy, plan, or certificate used by the health care practitioner

27 in treating a patient in the office of the health care practitioner.

28 (2) A carrier may reimburse a health care practitioner an amount that is

29 less than the cost to the health care practitioner for the cost of an oncology drug used

30 by the health care practitioner in treating a patient in the office of the health care

31 practitioner if the carrier provides an alternative mechanism or program for the

32 health care practitioner to use to obtain the oncology drug.

33 [(e)] (F) (1) A carrier that compensates health care practitioners wholly or 34 partly on a capitated basis may not retain any capitated fee attributable to an

35 enrollee or covered person during an enrollee's or covered person's contract year.

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1 (2) A carrier is in compliance with paragraph (1) of this subsection if, 2 within 45 days after an enrollee or covered person chooses or obtains health care from

3 a health care practitioner, the carrier pays to the health care practitioner all accrued

4 but unpaid capitated fees attributable to that enrollee or person that the health care

5 practitioner would have received had the enrollee or person chosen the health care

6 practitioner at the beginning of the enrollee's or covered person's contract year.

7 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect 8 October 1, 1999.