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By: Delegate Hurson Delegates Hurson and Brown Introduced and read first time: February 11, 2000 Assigned to: Economic Matters Committee Report: Favorable with amendments House action: Adopted Read second time: March 22, 2000	
1	AN ACT concerning
2	Health Insurance - Discrimination - Specified Diseases or Diagnoses
3 4 5 6 7 8 9	FOR the purpose of prohibiting certain insurers, nonprofit health service plans, and health maintenance organizations from making benefits for treatment of a certain disease or diagnosis subject to different copayment amounts, coinsurance, deductibles, or certain maximum limits than those that apply to all other diseases <u>unless otherwise provided by law;</u> and generally relating to discrimination in health insurance by insurers, nonprofit health service plans, and health maintenance organizations.
10 11 12 13 14	BY adding to Article - Insurance Section 27-913 Annotated Code of Maryland (1997 Volume and 1999 Supplement)
15 16 17 18 19	
20	Preamble Preamble
21 22	WHEREAS, Insurers, nonprofit health service plans, and health maintenance organizations may attempt in a discriminatory manner to make benefits for

- 1 treatment of specified diseases or diagnoses subject to different copayments,
- 2 coinsurance, deductibles, and annual and lifetime maximum limits; and
- 3 WHEREAS, The practice of the Maryland Insurance Administration is not to
- 4 discriminate against specified diseases or diagnoses under health insurance policies
- 5 and contracts issued or delivered in the State; and
- 6 WHEREAS, It is the intent of this Act to codify existing practice of the Maryland
- 7 Insurance Administration regarding discrimination against specified diseases and
- 8 diagnoses: now. therefore.
- 9 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
- 10 MARYLAND, That the Laws of Maryland read as follows:
- 11 Article Insurance
- 12 27-913.
- 13 (A) THIS SECTION APPLIES TO:
- 14 (1) INSURERS AND NONPROFIT HEALTH SERVICE PLANS THAT PROVIDE
- 15 HOSPITAL, MEDICAL, OR SURGICAL BENEFITS TO INDIVIDUALS OR GROUPS ON AN
- 16 EXPENSE-INCURRED BASIS UNDER HEALTH INSURANCE POLICIES OR CONTRACTS
- 17 THAT ARE ISSUED OR DELIVERED IN THE STATE; AND
- 18 (2) HEALTH MAINTENANCE ORGANIZATIONS THAT PROVIDE HOSPITAL,
- 19 MEDICAL, OR SURGICAL BENEFITS TO INDIVIDUALS OR GROUPS UNDER CONTRACTS
- 20 THAT ARE ISSUED OR DELIVERED IN THE STATE.
- 21 (B) UNLESS OTHERWISE PROVIDED BY LAW, AN ENTITY SUBJECT TO THIS
- 22 SECTION MAY NOT MAKE BENEFITS UNDER A POLICY OR CONTRACT ISSUED OR
- 23 DELIVERED BY THE ENTITY IN THE STATE FOR THE TREATMENT OF A SPECIFIED
- 24 DISEASE OR DIAGNOSIS SUBJECT TO DIFFERENT COPAYMENT AMOUNTS,
- 25 COINSURANCE, DEDUCTIBLES, ANNUAL MAXIMUM LIMITS, OR LIFETIME MAXIMUM
- 26 LIMITS THAN THOSE THAT APPLY TO ALL OTHER DISEASES COVERED UNDER THE
- 27 POLICY OR CONTRACT.
- 28 Article Health General
- 29 19-706.
- 30 (NN) THE PROVISIONS OF § 27-913 OF THE INSURANCE ARTICLE APPLY TO
- 31 HEALTH MAINTENANCE ORGANIZATIONS.
- 32 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
- 33 October 1, 2000.