

SENATE BILL 393

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2lr1668

By: **Senator Middleton**

Introduced and read first time: February 1, 2012

Assigned to: Finance

A BILL ENTITLED

1 AN ACT concerning

2 **Maryland Medical Assistance Program – Managed Care Organizations –**
3 **Recipient Participation**

4 FOR the purpose of requiring that certain recipients of benefits under the Maryland
5 Medical Assistance Program be afforded the option of remaining or enrolling in
6 certain managed care organizations or receiving benefits under the Program for
7 which payments are made on a fee-for-service basis; and generally relating to
8 the Maryland Medical Assistance Program and options for recipients of benefits
9 under the Program.

10 BY repealing and reenacting, without amendments,
11 Article – Health – General
12 Section 15–101(a), (e), (h), and (i)
13 Annotated Code of Maryland
14 (2009 Replacement Volume and 2011 Supplement)

15 BY repealing and reenacting, with amendments,
16 Article – Health – General
17 Section 15–103(b)(1)
18 Annotated Code of Maryland
19 (2009 Replacement Volume and 2011 Supplement)

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

22 **Article – Health – General**

23 15–101.

24 (a) In this title the following words have the meanings indicated.

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 (e) “Managed care organization” means:

2 (1) A certified health maintenance organization that is authorized to
3 receive medical assistance prepaid capitation payments; or

4 (2) A corporation that:

5 (i) Is a managed care system that is authorized to receive
6 medical assistance prepaid capitation payments;

7 (ii) Enrolls only program recipients or individuals or families
8 served under the Maryland Children’s Health Program; and

9 (iii) Is subject to the requirements of § 15–102.4 of this subtitle.

10 (h) “Program” means the Maryland Medical Assistance Program.

11 (i) “Program recipient” means an individual who receives benefits under the
12 Program.

13 15–103.

14 (b) (1) **(I)** As permitted by federal law or waiver **AND SUBJECT TO**
15 **ITEM (II) OF THIS PARAGRAPH**, the Secretary may establish a program under which
16 Program recipients are required to enroll in managed care organizations.

17 **(II) PROGRAM RECIPIENTS WHO ARE AT LEAST 65 YEARS**
18 **OLD SHALL HAVE THE OPTION OF REMAINING OR ENROLLING IN A MANAGED**
19 **CARE ORGANIZATION THAT PARTICIPATES IN A PROGRAM ESTABLISHED UNDER**
20 **THIS PARAGRAPH OR OF RECEIVING BENEFITS UNDER THE PROGRAM FOR**
21 **WHICH PAYMENT IS MADE ON A FEE-FOR-SERVICE BASIS.**

22 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
23 October 1, 2012.