HOUSE BILL 779

C3 4lr1807

By: Delegate Hammen

Introduced and read first time: February 3, 2014 Assigned to: Health and Government Operations

Committee Report: Favorable with amendments

House action: Adopted

Read second time: March 9, 2014

CHAPTER

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Maryland Health Care Commission – Health Care Provider–Carrier Workgroup

- FOR the purpose of requiring the Maryland Health Care Commission to establish a 4 5 Health Provider–Carrier Workgroup: establishing 6 composition, staffing, and frequency of meetings of the Workgroup; prohibiting 7 a Workgroup member from receiving certain compensation or reimbursement; requiring Commission staff to solicit and select issues for consideration by the 8 9 Workgroup; requiring Commission staff to provide certain assistance to the 10 Workgroup and to submit a certain report, on or before certain dates, to the 11 Commission and certain committees of the General Assembly; and generally 12 relating to the Maryland Health Care Commission and the Health Care 13 Provider-Carrier Workgroup.
- 14 BY adding to
- 15 Article Health General
- 16 Section 19–108.3
- 17 Annotated Code of Maryland
- 18 (2009 Replacement Volume and 2013 Supplement)
- 19 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF 20 MARYLAND, That the Laws of Maryland read as follows:

Article - Health - General

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

<u>Underlining</u> indicates amendments to bill.

Strike out indicates matter stricken from the bill by amendment or deleted from the law by amendment.



- 1 **19–108.3.**
- 2 (A) (1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE 3 MEANINGS INDICATED.
- 4 (2) "CARRIER" INCLUDES INSURERS, NONPROFIT HEALTH 5 SERVICE PLANS, HEALTH MAINTENANCE ORGANIZATIONS, THIRD-PARTY
- 6 ADMINISTRATORS, AND PHARMACY BENEFITS MANAGERS.
- 7 (3) "HEALTH CARE PROVIDER" INCLUDES HOSPITALS,
- 8 PHYSICIANS, NURSE PRACTITIONERS, PHARMACISTS, AND OTHER PERSONS
- 9 ENTITLED TO REIMBURSEMENT UNDER § 15–701(A) OF THE INSURANCE
- 10 ARTICLE.
- 11 (4) "WORKGROUP" MEANS THE HEALTH CARE
- 12 PROVIDER-CARRIER WORKGROUP.
- 13 (B) THE COMMISSION SHALL ESTABLISH A HEALTH CARE
- 14 PROVIDER-CARRIER WORKGROUP.
- 15 (C) THE PURPOSE OF THE WORKGROUP IS TO PROVIDE A MECHANISM
- 16 FOR HEALTH CARE PROVIDERS AND CARRIERS TO RESOLVE DISPUTES ON
- 17 ISSUES OVER WHICH NO STATE AGENCY HAS STATUTORY OR REGULATORY
- 18 **AUTHORITY.**
- 19 (D) THE WORKGROUP SHALL BE COMPOSED OF REPRESENTATIVES OF:
- 20 (1) PROFESSIONAL ORGANIZATIONS OR ASSOCIATIONS OF
- 21 HEALTH CARE PROVIDERS WHO BILL AND RECEIVE REIMBURSEMENT FOR
- 22 HEALTH CARE SERVICES FROM CARRIERS; AND
- 23 (2) CARRIERS OR ORGANIZATIONS OR TRADE ASSOCIATIONS
- 24 REPRESENTING CARRIERS THAT REIMBURSE HEALTH CARE PROVIDERS FOR
- 25 HEALTH CARE SERVICES PROVIDED UNDER HEALTH BENEFIT PLANS; AND
- 26 (3) SUBJECT TO SUBSECTION (E)(1)(III) OF THIS SECTION,
- 27 CONSUMER ORGANIZATIONS.
- 28 (E) (1) THE COMMISSION SHALL INVITE THE FOLLOWING TO
- 29 APPOINT MEMBERS TO THE WORKGROUP:
- 30 <u>(I)</u> PROFESSIONAL ORGANIZATIONS OR
- 31 ASSOCIATIONS OF HEALTH CARE PROVIDERS AND CARRIERS;

1	(II) <u>Carriers</u> or organizations or trade
2	ASSOCIATIONS REPRESENTING CARRIERS TO APPOINT MEMBERS TO THE
3	Workgroup; AND
4	(III) WHEN APPROPRIATE TO THE ISSUE UNDER
5	DISCUSSION, CONSUMER ORGANIZATIONS.
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6	(2) MEMBERSHIP IN THE WORKGROUP MAY CHANGE DEPENDING
7	ON THE ISSUES BEFORE THE WORKGROUP.
8	(3) THE SIZE OF THE WORKGROUP SHALL BE AT THE DISCRETION
9	OF THE COMMISSION BUT LARGE ENOUGH TO REPRESENT THE APPROPRIATE
9 10	RANGE OF STAKEHOLDERS.
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11	(F) WORKGROUP MEMBERS MAY NOT RECEIVE COMPENSATION OR
12	REIMBURSEMENT FOR SERVING ON THE WORKGROUP.
_	WEIGHOUSE TOWN SERVING ON THE WORKSTOOT.
13	(G) THE WORKGROUP SHALL MEET AT LEAST QUARTERLY.
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14	(H) COMMISSION STAFF SHALL FACILITATE WORKGROUP MEETINGS
15	AND PROVIDE RESEARCH AND OTHER SUPPORT TO THE WORKGROUP.
16	(I) (1) AT LEAST ANNUALLY, COMMISSION STAFF SHALL SOLICIT
17	ISSUES FOR CONSIDERATION BY THE WORKGROUP.
18	(2) ISSUES SHALL BE SOLICITED FROM:
10	(I) MEMBERS OF THE CONTRAL ASSEMBLY.
19	(I) MEMBERS OF THE GENERAL ASSEMBLY;
20	(II) PROFESSIONAL ORGANIZATIONS OR ASSOCIATIONS OF
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	TISSOCITIONS WII WESENTING CHIWIEINS, TIND
23	(III) STATE AGENCIES, INCLUDING THE DEPARTMENT,
24	HEALTH OCCUPATIONS BOARDS, THE MARYLAND INSURANCE
25	ADMINISTRATION, AND THE COMMISSION; AND
	,
26	(IV) CONSUMER ORGANIZATIONS.
27	(J) AFTER SOLICITING ISSUES UNDER SUBSECTION (I) OF THIS
28	SECTION, COMMISSION STAFF SHALL SELECT THE ISSUES TO BE CONSIDERED
29	BY THE WORKGROUP.

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(K)

COMMISSION STAFF SHALL:

1	(1) RESEARCH EACH ISSUE BEFORE THE ISSUE IS CONSIDERED
2	BY THE WORKGROUP;
3	(2) USE THE RESULTS OF THE RESEARCH TO INFORM
4	WORKGROUP MEETINGS;
5	(3) FACILITATE WORKGROUP MEETINGS IN A WAY THAT
6	PROMOTES RESOLUTION OF DISPUTES ON ISSUES AND IS SATISFACTORY TO THE
7	MEMBERS OF THE WORKGROUP; AND
8	(4) ON OR BEFORE JANUARY 1, 2016, AND EACH YEAR
9	THEREAFTER, SUBMIT A REPORT TO THE COMMISSION AND, IN ACCORDANCE
10	WITH § 2–1246 OF THE STATE GOVERNMENT ARTICLE, THE SENATE FINANCE
11	COMMITTEE AND THE HOUSE HEALTH AND GOVERNMENT OPERATIONS
12	COMMITTEE REGARDING THE ISSUES CONSIDERED BY THE WORKGROUP
13 14	DURING THE PRECEDING YEAR AND THE OUTCOME OF THE WORKGROUP'S CONSIDERATION OF EACH ISSUE.
14	CONSIDERATION OF EACH ISSUE.
15 16	SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2014.
	Approved:
	Governor.
	Speaker of the House of Delegates.
	President of the Senate.