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§19-1A-03. IN EFFECT

// EFFECTIVE UNTIL DECEMBER 31, 2015 PER CHAPTERS 5 AND 6 OF 2010
//

(a) Notwithstanding any State or federal law that prohibits the collaboration of carriers or providers on payment, the Commission may establish the Maryland Patient Centered Medical Home Program, if the Commission concludes that the Program:

(1) Is likely to result in the delivery of more efficient and effective health care services; and

(2) Is in the public interest.

(b) In establishing the Maryland Patient Centered Medical Home Program, the Commission, in consultation with the Department, carriers, managed care organizations, and primary care practices, shall adopt:

(1) Standards qualifying a primary care practice as a participant in the Maryland Patient Centered Medical Home Program;

(2) General standards that may be used by a carrier or a managed care organization to pay a participating patient centered medical home for services associated with the coordination of covered health care services;

(3) General standards to govern the bonus, fee based incentive, bundled fees, or other incentives a carrier or a managed care organization may pay to a participating patient centered medical home based on the savings from reduced health care expenditures that are associated with improved health outcomes and care coordination by qualifying individuals attributed to the participating patient centered medical home;

(4) The method for attributing a patient to a participating patient centered medical home;

(5) The uniform set of health care quality and performance measures that the participating patient centered medical home is to report to the Commission and to carriers or managed care organizations;

(6) The enrollment form notifying carriers or managed care organizations a qualifying individual has voluntarily agreed to participate in the Maryland Patient Centered Medical Home Program; and

(7) The process for primary care practices to commence and terminate participation in the Maryland Patient Centered Medical Home Program.

(c) In developing the standards required in subsection (b)(1) of this section, the Commission shall consider:

(1) The use of health information technology, including electronic medical records;

(2) The relationship between the primary care practice, specialists, other providers, and hospitals;

(3) The access standards for qualifying individuals to receive primary medical care in a timely manner;

(4) The ability of the primary care practice to foster a partnership with qualifying individuals; and

(5) The use of comprehensive medication management to improve clinical outcomes.

(d) The general standards required in subsection (b)(2) and (3) of this section shall:

(1) Define the payment method used by a carrier to pay a participating patient centered medical home for services associated with the coordination of covered health care services; and

(2) Define the methodology for determining any bonus, fee based incentive, bundled fees, or other incentives to be paid by a carrier to a participating patient centered medical home based on improvements in quality or efficiency.

(e) (1) To commence, renew, or terminate participation in the Maryland Patient Centered Medical Home Program, a qualifying individual shall complete forms adopted by the Commission.

(2) The enrollment form shall authorize the carrier, the participating patient centered medical home treating the qualifying individual, and other providers treating the qualifying individual to share medical information about the qualifying individual with each other.

(3) The authorization under paragraph (2) of this subsection shall be valid for a period not to exceed 1 year.

(4) The renewal form shall extend the authorization under paragraph (2) of this subsection for an additional period not to exceed 1 year.

(5) A carrier participating in the Maryland Patient Centered Medical Home Program shall accept forms adopted by the Commission as the sole instrument for notification that a qualifying individual has voluntarily agreed to participate or terminate participation in the Maryland Patient Centered Medical Home Program.

(f) (1) The Commission shall conduct culturally and linguistically appropriate provider and patient educational activities to increase awareness of the potential benefits for providers and patients of participating in the Maryland Patient Centered Medical Home Program.

(2) The Commission shall ensure that a participating patient centered medical home provides, on an ongoing basis, culturally and linguistically appropriate care for the purpose of reducing health disparities.

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