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§15–805.

(a) (1) In this section the following words have the meanings indicated.

(2) "Authorized prescriber" means a licensed dentist, licensed physician, or licensed podiatrist who is authorized under the Health Occupations Article to prescribe a pharmaceutical product.

(3) "Pharmaceutical product" means a drug or medicine that may be prescribed by an authorized prescriber.

(b) This section does not apply to a policy or contract that is issued to an employer under a collective bargaining agreement.

(c) (1) This subsection applies to each policy or contract that is issued or delivered in the State to an employer or individual by an insurer or nonprofit health service plan and that provides group or individual hospital, medical, or surgical benefits.

(2) A policy or contract subject to this subsection that provides reimbursement for a pharmaceutical product prescribed by an authorized prescriber may not establish the amount of reimbursement to the insured or the insured's beneficiary, including copayments and deductibles, based on the identity, practicing specialty, or occupation of the authorized prescriber.

(d) (1) This subsection applies to each individual or group policy or contract that is issued or delivered in the State to an employer or individual by an insurer or nonprofit health service plan and that provides benefits for pharmaceutical products.

(2) A policy or contract subject to this subsection may not impose a copayment, deductible, or other condition on an insured or certificate holder who uses the services of a community pharmacy that is not imposed when the insured or certificate holder uses the services of a mail order pharmacy, if the benefits are provided under the same program, policy, or contract.

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