

# SENATE BILL 943

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By: **Senator Nathan–Pulliam**

Introduced and read first time: February 5, 2018

Assigned to: Finance

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## A BILL ENTITLED

1 AN ACT concerning

2 **Maryland Medical Assistance Program and Health Insurance – Coverage –**  
3 **Hepatitis C Drugs**

4 FOR the purpose of requiring the Maryland Medical Assistance Program, subject to a  
5 certain limitation, to provide coverage for certain drugs for the treatment of hepatitis  
6 C; requiring certain insurers, nonprofit health service plans, and health  
7 maintenance organizations to provide coverage for certain hepatitis C drugs;  
8 prohibiting certain insurers, nonprofit health service plans, and health maintenance  
9 organizations from denying an insured or enrollee certain coverage based on the  
10 insured or enrollee's level or severity of liver damage; prohibiting certain insurers,  
11 nonprofit health service plans, and health maintenance organizations from reducing  
12 or eliminating coverage in health insurance policies or contracts due to the  
13 requirements of this Act; providing for the application of certain provisions of this  
14 Act; and generally relating to the Maryland Medical Assistance Program and health  
15 insurance coverage for hepatitis C drugs.

16 BY repealing and reenacting, without amendments,  
17 Article – Health – General  
18 Section 15–103(a)(1) and (b)(1), (2)(i), and (5)(i)  
19 Annotated Code of Maryland  
20 (2015 Replacement Volume and 2017 Supplement)

21 BY repealing and reenacting, with amendments,  
22 Article – Health – General  
23 Section 15–103(a)(2)(xi) and (xii)  
24 Annotated Code of Maryland  
25 (2015 Replacement Volume and 2017 Supplement)

26 BY adding to  
27 Article – Health – General

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EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 Section 15–103(a)(2)(xiii)  
2 Annotated Code of Maryland  
3 (2015 Replacement Volume and 2017 Supplement)

4 BY adding to  
5 Article – Insurance  
6 Section 15–853  
7 Annotated Code of Maryland  
8 (2017 Replacement Volume)

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

11 **Article – Health – General**

12 15–103.

13 (a) (1) The Secretary shall administer the Maryland Medical Assistance  
14 Program.

15 (2) The Program:

16 (xi) May include bedside nursing care for eligible Program recipients;  
17 [and]

18 (xii) Shall provide services in accordance with funding restrictions  
19 included in the annual State budget bill; AND

20 **(XIII) SHALL PROVIDE, SUBJECT TO THE LIMITATIONS OF THE**  
21 **STATE BUDGET, ANY MEDICALLY APPROPRIATE DRUG THAT IS APPROVED BY THE**  
22 **UNITED STATES FOOD AND DRUG ADMINISTRATION FOR THE TREATMENT OF**  
23 **HEPATITIS C AND THAT IS DETERMINED TO BE NECESSARY BY THE TREATING**  
24 **PHYSICIAN OF THE PROGRAM RECIPIENT.**

25 (b) (1) As permitted by federal law or waiver, the Secretary may establish a  
26 program under which Program recipients are required to enroll in managed care  
27 organizations.

28 (2) (i) The benefits required by the program developed under  
29 paragraph (1) of this subsection shall be adopted by regulation and shall be equivalent to  
30 the benefit level required by the Maryland Medical Assistance Program on January 1, 1996.

31 (5) (i) Except for a service excluded by the Secretary under paragraph  
32 (4) of this subsection, each managed care organization shall provide all the benefits  
33 required by regulations adopted under paragraph (2) of this subsection.

Article – Insurance

15–853.

(A) THIS SECTION APPLIES TO:

(1) INSURERS AND NONPROFIT HEALTH SERVICE PLANS THAT PROVIDE HOSPITAL, MEDICAL, OR SURGICAL BENEFITS TO INDIVIDUALS OR GROUPS ON AN EXPENSE–INCURRED BASIS UNDER HEALTH INSURANCE POLICIES THAT ARE ISSUED OR DELIVERED IN THE STATE; AND

(2) HEALTH MAINTENANCE ORGANIZATIONS THAT PROVIDE HOSPITAL, MEDICAL, OR SURGICAL BENEFITS TO INDIVIDUALS OR GROUPS UNDER CONTRACTS THAT ARE ISSUED OR DELIVERED IN THE STATE.

(B) AN ENTITY SUBJECT TO THIS SECTION SHALL PROVIDE COVERAGE FOR ANY MEDICALLY APPROPRIATE AND NECESSARY DRUG THAT IS APPROVED BY THE UNITED STATES FOOD AND DRUG ADMINISTRATION FOR THE TREATMENT OF HEPATITIS C AND THAT THE INSURED’S OR ENROLLEE’S TREATING PHYSICIAN OR OTHER APPROPRIATELY LICENSED HEALTH CARE PROVIDER CERTIFIES IS NECESSARY FOR THE TREATMENT OF HEPATITIS C.

(C) AN ENTITY SUBJECT TO THIS SECTION MAY NOT:

(1) DENY THE INSURED OR ENROLLEE COVERAGE UNDER SUBSECTION (B) OF THIS SECTION BASED ON THE INSURED’S OR ENROLLEE’S LEVEL OR SEVERITY OF LIVER DAMAGE; AND

(2) REDUCE OR ELIMINATE COVERAGE IN HEALTH INSURANCE POLICIES OR CONTRACTS DUE TO THE REQUIREMENTS OF THIS SECTION.

SECTION 2. AND BE IT FURTHER ENACTED, That § 15–853 of the Insurance Article, as enacted by Section 1 of this Act, shall apply to all policies, contracts, and health benefit plans issued, delivered, or renewed in the State on or after January 1, 2019.

SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2018.