

Maryland General Assembly

DEPARTMENT OF LEGISLATIVE SERVICES

Effective Dates

2017 Chapters - Effective January 1, 2018

SB 8 Chapter 36

Chair, Finance Committee (By Request - Departmental -Maryland Insurance Administration)

INSURANCE – RISK MANAGEMENT AND OWN RISK AND SOLVENCY ASSESSMENT ACT

Requiring specified carriers to maintain a risk management framework for specified purposes; requiring specified carriers or specified insurance groups to conduct an own risk and solvency assessment regularly or at any time when there are significant changes to the carrier's or insurance group's risk profile; requiring specified carriers to submit to the Maryland Insurance Commissioner a specified report or reports on request or if the Commissioner is the lead state commissioner of a specified insurance group; etc.

HB 127

Chair, Health and Government Operations Committee (By Chapter 103 Request - Departmental - Health and Mental Hygiene)

> DEPARTMENT OF HEALTH AND MENTAL HYGIENE – BOARD OF REVIEW - REPEAL

> Repealing provisions of law relating to the Board of Review of the Department of Health and Mental Hygiene; repealing provisions of law that require the Board of Review to make specified recommendations to the Secretary of Health and Mental Hygiene, advise the Secretary on specified matters, hear and determine specified appeals, and report at specified intervals to the Secretary; providing that a specified petitioner may not be charged a fee for specified costs under specified circumstances; etc.

Section 1 Only

Department of Legislative Services

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HB 136

Chair, Economic Matters Committee (By Request Chapter 106 Departmental - Maryland Insurance Administration)

INSURANCE – PUBLIC ADJUSTERS

Altering specified provisions concerning the licensing and practice of public adjusters; adding and altering specified definitions relating to public adjusters; providing an exception to licensing for specified marketing activities; repealing the requirement that public adjuster license application forms include specified employment disclosures; repealing the requirement for specified experience before taking a specified written examination; applying the Act to all public adjuster licenses issued or renewed on or after January 1, 2018; etc.

HB 730 Chapter 227

Delegate Hill (By Request), et al

HEALTH INSURANCE - COVERAGE FOR DIABETES TEST STRIPS – PROHIBITION ON DEDUCTIBLE, COPAYMENT, AND COINSURANCE

Prohibiting, except under specified circumstances, specified insurers, health service plans. and health maintenance nonprofit organizations from imposing a deductible, copayment, or coinsurance requirement on diabetes test strips; applying the Act to all policies, contracts, and health benefit plans issued, delivered, or renewed in the State on or after January 1, 2018; etc.

SB 910 Chapter 509

Senator Middleton

MARYLAND AUTOMOBILE INSURANCE FUND – OPERATIONS

Repealing a provision of law subjecting the Maryland Automobile Insurance Fund to the imposition of a specified premium tax; altering the scope of provisions of law governing prior approval rate making to exclude the Fund; providing that provisions of law governing competitive rating rate making apply to the Fund under specified circumstances; repealing a provision of law that makes the Fund subject to the provisions of the Open Meetings Act; etc.

Sections 1 and 3 Only

HB 974 Chapter 518

Delegates Carey and Lisanti

MARYLAND PERSONAL INFORMATION PROTECTION ACT – REVISIONS

Requiring a specified business, when destroying an employee's or a former employee's records containing specified personal information of the employee or former employee, to take specified steps to protect against unauthorized access to or use of the information; altering the circumstances under which a specified business must conduct an investigation and notify specified persons of a specified breach; authorizing a specified business to provide a specified required notice in a specified manner under specified circumstances; etc.

HB 592 Chapter 537

Delegate M. Washington

REAL PROPERTY TAX – ASSESSMENT APPEALS PROCESS – DWELLINGS

Requiring a hearing on an appeal to a supervisor of assessments concerning the value or classification of a specified dwelling to occur no later than 120 days after the Department of Assessments and Taxation receives the appeal, unless the property owner requests a postponement; requiring the supervisor to give written notice of the final value or classification of a specified dwelling to the person who has appealed or filed a petition for review within 60 days after the hearing; etc.

HB 1329 Chapter 571

Delegate Bromwell, et al

HEROIN AND OPIOID PREVENTION EFFORT (HOPE) AND TREATMENT ACT OF 2017

Requiring the State Court Administrator of the Administrative Office of the Courts to assess specified drug court programs to make specified determinations; stating the intent of the General Assembly that the Administrative Office request an appropriation of \$2,000,000 in additional funding for grants to expand the scope of drug court programs; requiring the Behavioral Health Administration to establish at least one crisis treatment center by June 1, 2018; authorizing the Overdose Response Program; etc.

Sections 4 and 9 Only

SB 967 Chapter 572

Senator Klausmeier, et al

HEROIN AND OPIOID PREVENTION EFFORT (HOPE) AND TREATMENT ACT OF 2017

Requiring the State Court Administrator of the Administrative Office of the Courts to assess specified drug court programs to make specified determinations; stating the intent of the General Assembly that the Administrative Office request an appropriation of \$2,000,000 in additional funding for grants to expand the scope of drug court programs; requiring the Behavioral Health Administration to establish at least 1 crisis treatment center by June 1, 2018; authorizing the Overdose Response Program; etc.

Sections 4 and 9 Only

2016 Chapters - Effective January 1, 2018

HB 1318 Chapter 309

Delegate Kelly, et al

HEALTH BENEFIT PLANS – NETWORK ACCESS STANDARDS AND PROVIDER NETWORK DIRECTORIES

Requiring specified carriers to maintain or adhere to specified standards that assure that enrollees have access to specified health care providers and covered services; specifying the provisions of State insurance law relating to provider panels that apply to managed care organizations; authorizing the Commissioner to designate an insurer or nonprofit health service plan to offer a preferred provider insurance policy that conditions the payment of benefits on the use of preferred providers under specified circumstances; etc.

Section 3 Only

SB 848 Chapter 436

Senator Kelley, et al

HEALTH INSURANCE - CONTRACEPTIVE EQUITY ACT

Prohibiting health insurers, nonprofit health service plans, and health maintenance organizations from applying a copayment, coinsurance, or prior authorization requirement for specified contraceptive drugs and devices; providing that the prohibition does not apply with respect to a grandfathered health plan; establishing an exception to the prohibition against applying a copayment or coinsurance requirement for specified contraceptive drugs or devices; etc.

HB 1005 Chapter 437

Delegate Kelly, et al

HEALTH INSURANCE – CONTRACEPTIVE EQUITY ACT

Prohibiting health insurers, nonprofit health service plans, and health maintenance organizations from applying a copayment, coinsurance, or prior authorization requirement for specified contraceptive drugs and devices; providing that the prohibition does not apply with respect to a specified grandfathered health plan; establishing an exception to the prohibition against applying a copayment or coinsurance requirement for specified contraceptive drugs or devices; etc.

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