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**By: Senator Young** Introduced and read first time: January 19, 1996 Assigned to: Finance Committee Report: Favorable with amendments Senate action: Adopted Read second time: February 23, 1996 CHAPTER \_\_\_\_

1 AN ACT concerning

## 2 Health Care Access and Cost Commission - Health Maintenance Organizations - Survey

- of Enrollees and Health Care Practitioners 3
- 4 FOR the purpose of requiring that the system of evaluation established by the Health
- Care Access and Cost Commission to comparatively evaluate the quality of care 5
- 6 outcomes and performance measures of health maintenance organizationbenefit
- 7 plans and services include a method of surveying a certain number of enrollees of
- health maintenance organizations to determine if certain providers discuss certain 8
- 9 information with enrollees solicit quality and performance information from
- enrollees; authorizing the system to solicit information from participating health 10
- 11 care practitioners of health maintenance organizations; requiring the Commission
- 12 to conduct a certain survey; specifying that the survey include a certain sample;
- requiring the Commission to report certain compensation arrangements; and 13
- 14 generally relating to surveys of health maintenance organization enrollees and
- health care practitioners. 15
- 16 BY repealing and reenacting, with amendments,
- Article Health General 17
- Section 19-1508(c) 18
- 19 Annotated Code of Maryland
- 20 (1990 Replacement Volume and 1995 Supplement)
- SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF 21
- 22 MARYLAND, That the Laws of Maryland read as follows:

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| 1        | Article - Health - General   |
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| 2        | 19-1508.   |
| 3        | (c) (1) The Commission shall:  |
|          | (i) On or before January 1, 1994, establish and implement a system to comparatively evaluate the quality of care outcomes and performance measurements of health maintenance organization benefit plans and services on an objective basis; and  |
| 7        | (ii) Annually publish the summary findings of the evaluation.  |
| 10<br>11 | (2) The purpose of a comparable performance measurement system established under this section is to assist health maintenance organization benefit plans to improve the quality of care provided by establishing a common set of performance measurements and disseminating the findings of the performance measurements to health maintenance organizations and interested parties. |
| 13       | (3) The system[, where]:   |
| 14<br>15 | (I) WHERE appropriate, shall solicit performance information from enrollees of health maintenance organizations; AND   |
| 18       | (II) SHALL INCLUDE A METHOD OF SURVEYING AT LEAST 25% CENROLLEES OF HEALTH MAINTENANCE ORGANIZATIONS TO DETERMINE WHETHER PROVIDERS PARTICIPATING IN A HEALTH MAINTENANCE ORGANIZATION DISCUSS WITH ENROLLEES INFORMATION ABOUT:   |
| 20<br>21 | 1. THE BENEFITS, RISKS, AND COSTS OF MEDICAL TREATMENT OPTIONS; AND  |
|          | 2. THE PROVIDER'S COMPENSATION AND FINANCIAL INCENTIVE OR BONUS ARRANGEMENT WITH THE HEALTH MAINTENANCE ORGANIZATION.  |
| 27       | (3) (I) THE SYSTEM, ON AT LEAST A BIANNUAL BASIS, SHALL SOLICIT QUALITY AND PERFORMANCE INFORMATION FROM ENROLLEES AND MAY SOLICIT INFORMATION FROM PARTICIPATING HEALTH CARE PRACTITIONERS OF HEALTH MAINTENANCE ORGANIZATIONS.   |
| 31       | (II) THE COMMISSION SHALL SURVEY A STATISTICALLY SIGNIFICANT SAMPLE OF ENROLLEES OF HEALTH MAINTENANCE ORGANIZATIONS TO MEASURE QUALITY AND PERFORMANCE, INCLUDING HEALTH CARE PRACTITIONER COMMUNICATION AND OVERALL SATISFACTION.  |
| 35<br>36 | (III) ANY SURVEY OF PARTICIPATING HEALTH CARE PRACTITIONERS OF HEALTH MAINTENANCE ORGANIZATIONS SHALL INCLUDE A STATISTICALLY SIGNIFICANT SAMPLE OF PARTICIPATING HEALTH CARE PRACTITIONERS TO MEASURE QUALITY AND PERFORMANCE, INCLUDING HEALTH CARE PRACTITIONER AUTONOMY AND PATIENT CARE.  |
| 38       |  |

39 PRACTITIONER COMPENSATION ARRANGEMENTS FOR EACH HEALTH

## 1 MAINTENANCE ORGANIZATION IN ADDITION TO ANY QUALITY AND PERFORMANCE

- 2 MEASURES.
- $\frac{4}{5}$  (i) The Commission shall adopt regulations to establish the
- 4 system of evaluation provided under this section.
- 5 (ii) Before adopting regulations to implement an evaluation system
- 6 under this section, the Commission shall consider any recommendations of the quality of
- 7 care subcommittee of the Group Health Association of America and the National
- 8 Committee for Quality Assurance.
- 9 (5) (6) The Commission may contract with a private, nonprofit entity to
- 10 implement the system required under this subsection provided that the entity is not an
- 11 insurer.
- 12 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
- 13 October 1, 1996.