

BY: Finance Committee

AMENDMENTS TO SENATE BILL NO. 163

(First Reading File Bill)

AMENDMENT NO. 1

On page 1, in the sponsor line, strike “Senator Bromwell” and substitute “Senators Bromwell, Hafer, Roesser, and Teitelbaum”; strike beginning with “insurers” in line 3 down through “organizations” in line 4 and substitute “carriers”; in line 4, after “establish” insert “or subscribe to or contract for”; strike beginning with “the” in line 5 down through “decisions” in line 6 and substitute “a certain purpose”; strike beginning with “insurers” in line 6 down through “organizations” in line 7 and substitute “carriers”; in line 9, after “process;” insert “requiring certain carriers to provide a description of the process to certain persons under certain circumstances;”; strike beginning with “insurers” in line 9 down through “organizations” in line 10 and substitute “carriers”; in line 10, strike “file a certain report” and substitute “make a certain filing”; in line 11, strike “specifying the contents of the report;” and substitute “requiring the Commissioner to make the filing available or provide a copy of the filing to certain persons under certain circumstances;”; strike beginning with the second “providing” in line 14 down through “individuals;” in line 15; strike beginning with “insurers” in line 16 down through “organizations” in line 17 and substitute “carriers”; in lines 18 and 19, strike “the purpose of making certain coverage decisions” and substitute “a certain purpose”; and strike in their entirety lines 26 through 30, inclusive.

AMENDMENT NO. 2

On page 2, in line 14, strike “OR”; in line 16, after “ADMINISTRATOR” insert “; OR

(VI) EXCEPT FOR A MANAGED CARE ORGANIZATION AS DEFINED IN TITLE 15, SUBTITLE 1 OF THE HEALTH - GENERAL ARTICLE, AN ENTITY THAT HAS ORGANIZED A PROVIDER NETWORK FOR THE PURPOSE OF CONTRACTING DIRECTLY WITH A PURCHASER TO PROVIDE HEALTH CARE SERVICES TO INDIVIDUALS OR GROUPS UNDER A CAPITATED OR OTHER RISK-SHARING ARRANGEMENT”;

and in line 23, after “PERSON” insert “OR SUBSCRIBER”.

(Over)

On page 3, in line 20, strike “AND” and substitute “OR”.

AMENDMENT NO. 3

On page 3, in lines 23 and 24, strike “PROVIDERS, ENROLLEES, AND PROSPECTIVE ENROLLEES” and substitute “PROVIDERS AND ENROLLEES”; and in line 31, after “ENROLLEES” insert “, AS APPROPRIATE”.

AMENDMENT NO. 4

On pages 3 through 6, strike in their entirety the lines beginning with line 32 on page 3 through line 4 on page 6, inclusive, and substitute:

“(E) EACH CARRIER SHALL ESTABLISH OR SUBSCRIBE OR CONTRACT TO PROVIDE A SYSTEMATIC, SCIENTIFIC PROCESS TO FOLLOW FOR EVALUATING EMERGING MEDICAL AND SURGICAL TREATMENTS TO ENSURE THAT SUBSCRIBERS HAVE ACCESS TO THE LATEST APPROPRIATE TREATMENTS.

(F) THE PROCESS ESTABLISHED OR SUBSCRIBED TO OR CONTRACTED FOR BY A CARRIER UNDER SUBSECTION (E) OF THIS SECTION SHALL INCLUDE:

(1) A COMPREHENSIVE REVIEW OF MEDICAL LITERATURE AND DATA EVALUATION; AND

(2) INPUT FROM PHYSICIANS AND OTHER RECOGNIZED EXPERTS:

(I) WHO ARE NOT EMPLOYEES OF THE CARRIER; AND

(II) WHO:

1. ARE CURRENTLY TREATING PATIENTS FOR THE DISEASE OR CONDITION BEING EVALUATED;

2. ARE BOARD CERTIFIED IN THE PERTINENT SPECIALTY OR SUBSPECIALTY AREA OF THE DISEASE OR CONDITION BEING EVALUATED;

3. ARE GENERALLY RECOGNIZED BY THEIR PEERS TO BE AUTHORITATIVE RESOURCES IN THE CLINICAL AREA BEING EVALUATED AS EVIDENCED BY:

A. FACULTY APPOINTMENTS;

B. AUTHORSHIP OF A SIGNIFICANT BODY OF PEER-REVIEWED CLINICAL LITERATURE IN THE PERTINENT SPECIALTY OR SUBSPECIALTY AREA; OR

C. A DEMONSTRATED HISTORY OF LEADERSHIP IN LOCAL, STATE, OR NATIONAL PROFESSIONAL ASSOCIATIONS AND NONPROFIT PATIENT AND COMMUNITY ADVOCACY ORGANIZATIONS THAT ADDRESS THE DISEASE OR CONDITION AND THE SPECIALTY OR SUBSPECIALTY AREA IN QUESTION; OR

4. HAVE A DEMONSTRATED HISTORY OF SUBSTANTIAL EXPERIENCE AND PRACTICAL KNOWLEDGE IN THE SPECIALTY OR SUBSPECIALTY AREA IN QUESTION.

(G) A CARRIER'S DECISION TO PROVIDE COVERAGE FOR AN EMERGING MEDICAL OR SURGICAL TREATMENT SHALL RESULT FROM THE CONSENSUS OF OPINION FROM ITS OWN ANALYSIS AND THE KNOWLEDGE PROVIDED TO THE CARRIER FROM THE PROCESS IDENTIFIED BY THE CARRIER IN SUBSECTION (F) OF THIS SECTION.

(H) EACH CARRIER, IN CONJUNCTION WITH THE CLINICAL EXPERTS IDENTIFIED BY THE CARRIER UNDER SUBSECTION (F)(2) OF THIS SECTION, SHALL DECIDE THE PATIENT SELECTION CRITERIA FOR AN EMERGING MEDICAL OR SURGICAL TREATMENT FOR WHICH COVERAGE BY THE CARRIER IS TO BE PROVIDED.

(I) EACH CARRIER SHALL PROVIDE A DESCRIPTION OF THE PROCESS IDENTIFIED BY THE CARRIER UNDER SUBSECTION (F) OF THIS SECTION TO ENROLLEES AND CONTRACTING PROVIDERS AND ALL OTHER PROVIDERS ON REQUEST.

(J) (1) A CARRIER'S COVERAGE DECISION ON AN EMERGING MEDICAL OR

(Over)

SURGICAL TREATMENT SHALL BE IN COMPLIANCE WITH § 19-1305.2 OF THE HEALTH - GENERAL ARTICLE, WHEN BEING APPEALED BY AN ENROLLEE.

(2) A CARRIER MAY REEVALUATE ANNUALLY WHETHER SCIENTIFIC ADVANCES WARRANT A CHANGE IN THE CARRIER'S COVERAGE AND PAYMENT POLICY FOR AN EMERGING MEDICAL OR SURGICAL TREATMENT.

(K) (1) EACH CARRIER SHALL FILE ANNUALLY WITH THE COMMISSIONER A SUMMARY DESCRIPTION OF THE CLINICAL ISSUES AND DIAGNOSTIC AND THERAPEUTIC SERVICES THAT WERE EVALUATED AND THE CONCLUSION OF THE EVALUATION, INCLUDING THE OPINIONS OF THE CLINICAL EXPERTS."

On page 6, in line 5, strike "(3)" and substitute "(2)"; in lines 6 and 8, in each instance, strike "REPORT" and substitute "FILING UNDER PARAGRAPH (1) OF THIS SUBSECTION"; strike in their entirety lines 11 through 23, inclusive; and in lines 27 and 28, strike "THIS SECTION" and substitute "SUBSECTION (F) OF THIS SECTION".

AMENDMENT NO. 5

On page 7, strike in their entirety lines 3 through 8, inclusive.