
By: **Delegates Eckardt, Walkup, Conway, and Gordon**
Introduced and read first time: March 5, 1998
Assigned to: Rules and Executive Nominations

A BILL ENTITLED

1 AN ACT concerning

2 **Health Insurance - Requirements for Providers to Serve on Provider Panels**

3 FOR the purpose of prohibiting a carrier that offers coverage for health care services
4 through health benefit plans or contracts with providers to offer health care
5 services through provider panels from requiring a provider, as a condition of
6 participation or continuation on a provider panel, to serve on another provider
7 panel under certain circumstances; defining certain terms; and generally
8 relating to requirements for providers to serve on provider panels.

9 BY repealing and reenacting, without amendments,
10 Article - Insurance
11 Section 15-112(a)
12 Annotated Code of Maryland
13 (1997 Volume)

14 BY adding to
15 Article - Insurance
16 Section 15-112(l)
17 Annotated Code of Maryland
18 (1997 Volume)

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

21 **Article - Insurance**

22 15-112.

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

24 (2) (i) "Carrier" means:

25 1. an insurer;

26 2. a nonprofit health service plan;

- 1 3. a health maintenance organization;
- 2 4. a dental plan organization; or
- 3 5. any other person that provides health benefit plans
- 4 subject to regulation by the State.

5 (ii) "Carrier" includes an entity that arranges a provider panel for a

6 carrier.

7 (3) "Enrollee" means a person entitled to health care benefits from a

8 carrier.

9 (4) "Provider" means a health care practitioner or group of health care

10 practitioners licensed, certified, or otherwise authorized by law to provide health care

11 services.

12 (5) (i) "Provider panel" means the providers that contract with a

13 carrier to provide health care services to the carrier's enrollees under the carrier's

14 health benefit plan.

15 (ii) "Provider panel" does not include an arrangement in which any

16 provider may participate solely by contracting with the carrier to provide health care

17 services at a discounted fee-for-service rate.

18 (L) (1) (I) IN THIS SUBSECTION THE FOLLOWING WORDS HAVE THE

19 MEANINGS INDICATED.

20 (II) "HEALTH BENEFIT PLAN" HAS THE MEANING STATED IN §

21 15-1201 OF THIS TITLE.

22 (III) "PROVIDER PANEL" INCLUDES AN ARRANGEMENT IN WHICH

23 ANY PROVIDER MAY PARTICIPATE SOLELY BY CONTRACTING WITH THE CARRIER TO

24 PROVIDE HEALTH CARE SERVICES AT A DISCOUNTED FEE-FOR-SERVICE RATE.

25 (2) A CARRIER THAT OFFERS COVERAGE FOR HEALTH CARE SERVICES

26 THROUGH ONE OR MORE HEALTH BENEFIT PLANS OR CONTRACTS WITH PROVIDERS

27 TO OFFER HEALTH CARE SERVICES THROUGH ONE OR MORE PROVIDER PANELS,

28 MAY NOT REQUIRE A PROVIDER, AS A CONDITION OF PARTICIPATION OR

29 CONTINUATION ON A PROVIDER PANEL FOR ONE HEALTH BENEFIT PLAN OF A

30 CARRIER, TO SERVE ALSO ON A PROVIDER PANEL OF ANOTHER HEALTH BENEFIT

31 PLAN OF THE CARRIER.

32 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect

33 October 1, 1998.