Unofficial Copy C3 1998 Regular Session 8lr1470

By: Senators Roesser and Teitelbaum Introduced and read first time: February 5, 1998 Assigned to: Finance 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 through health benefit plans or contracts with providers to offer health care 4 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 panel under certain circumstances; defining certain terms; and generally 7 8 relating to requirements for providers to serve on provider panels. 9 BY repealing and reenacting, without amendments, Article - Insurance 10 Section 15-112(a) 11 12 Annotated Code of Maryland (1997 Volume) 13 14 BY adding to Article - Insurance 15 16 Section 15-112(1) 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 In this section the following words have the meanings indicated. (a) (1) "Carrier" means: 24 (2)(i) 25 1. an insurer; 2. a nonprofit health service plan; 26

33 October 1, 1998.

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1			3.	a health maintenance organization;
2			4.	a dental plan organization; or
3 4	subject to regulation l	by the Sta	5. ate.	any other person that provides health benefit plans
5 6	carrier.	(ii)	"Carrier	" includes an entity that arranges a provider panel for a
7 8	(3) carrier.	"Enrolle	ee" mean	s a person entitled to health care benefits from a
	(4) "Provider" means a health care practitioner or group of health care practitioners licensed, certified, or otherwise authorized by law to provide health care services.			
	(-)	(i) alth care		er panel" means the providers that contract with a to the carrier's enrollees under the carrier's
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 19	(L) (1) MEANINGS INDIC	(I) ATED.	IN THI	S SUBSECTION THE FOLLOWING WORDS HAVE THE
20 21	15-1201 OF THIS T	(II) ITLE.	"HEAL	TH BENEFIT PLAN" HAS THE MEANING STATED IN §
	ANY PROVIDER M		RTICIPA'	IDER PANEL" INCLUDES AN ARRANGEMENT IN WHICH TE SOLELY BY CONTRACTING WITH THE CARRIER TO ES AT A DISCOUNTED FEE-FOR-SERVICE RATE.
27 28 29 30	THROUGH ONE OF TO OFFER HEALT MAY NOT REQUIRES CONTINUATION OF THE OFFER THE OFFER TO THE OFFER	R MORE H CARE RE A PRO DN A PRO VE ALSO	HEALT SERVIC OVIDER OVIDER	IAT OFFERS COVERAGE FOR HEALTH CARE SERVICES H BENEFIT PLANS OR CONTRACTS WITH PROVIDERS CES THROUGH ONE OR MORE PROVIDER PANELS, AS A CONDITION OF PARTICIPATION OR PANEL FOR ONE HEALTH BENEFIT PLAN OF A PROVIDER PANEL OF ANOTHER HEALTH BENEFIT
32	SECTION 2 AN	ID BE IT	FURTH	ER ENACTED That this Act shall take effect