

SENATE BILL 221

Unofficial Copy
J3

1999 Regular Session
(9lr1191)

ENROLLED BILL
-- Finance/Environmental Matters --

Introduced by **Senator Astle**

Read and Examined by Proofreaders:

Proofreader.

Proofreader.

Sealed with the Great Seal and presented to the Governor, for his approval this
____ day of _____ at _____ o'clock, ____ M.

President.

CHAPTER _____

1 AN ACT concerning

2 **Health Occupations - Certified Registered Nurse Anesthetists - Certified**
3 **Nurse Midwives**

4 FOR the purpose of requiring the Health Care Access and Cost Commission to collect
5 certain data regarding certified registered nurse anesthetists and certified
6 nurse midwives; requiring a certain uniform claims form to include certain
7 information; and generally relating to certified registered nurse anesthetists
8 and certified nurse midwives.

9 BY repealing and reenacting, without amendments,
10 Article - Health - General
11 Section 19-1507(a)
12 Annotated Code of Maryland
13 (1996 Replacement Volume and 1998 Supplement)

14 BY repealing and reenacting, with amendments,
15 Article - Health - General

1 Section 19-1507(b)
 2 Annotated Code of Maryland
 3 (1996 Replacement Volume and 1998 Supplement)

4 BY repealing and reenacting, with amendments,
 5 Article - Insurance
 6 Section 15-1004
 7 Annotated Code of Maryland
 8 (1997 Volume and 1998 Supplement)

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

11 **Article - Health - General**

12 19-1507.

13 (a) The Commission shall establish a Maryland medical care data base to
 14 compile statewide data on health services rendered by health care practitioners and
 15 office facilities selected by the Commission.

16 (b) In addition to any other information the Commission may require by
 17 regulation, the medical care data base shall:

18 (1) Collect for each type of patient encounter with a health care
 19 practitioner or office facility designated by the Commission:

- 20 (i) The demographic characteristics of the patient;
- 21 (ii) The principal diagnosis;
- 22 (iii) The procedure performed;
- 23 (iv) The date and location of where the procedure was performed;
- 24 (v) The charge for the procedure;
- 25 (vi) If the bill for the procedure was submitted on an assigned or
 26 nonassigned basis; [and]
- 27 (vii) If applicable, a health care practitioner's universal
 28 identification number; AND

29 (VIII) IF THE HEALTH CARE PRACTITIONER RENDERING THE
 30 SERVICE IS A CERTIFIED REGISTERED NURSE ANESTHETIST OR CERTIFIED NURSE
 31 MIDWIFE, ~~THE IDENTIFICATION MODIFIER~~ MODIFIERS FOR THE CERTIFIED
 32 REGISTERED NURSE ANESTHETIST OR CERTIFIED NURSE MIDWIFE;

1 (2) Collect appropriate information relating to prescription drugs for
2 each type of patient encounter with a pharmacist designated by the Commission; and

3 (3) Collect appropriate information relating to health care costs,
4 utilization, or resources from payors and governmental agencies.

5 **Article - Insurance**

6 15-1004.

7 (a) For services rendered by a person entitled to reimbursement under §
8 15-701(a) of this title or by a hospital, as defined in § 19-301 of the Health - General
9 Article, an insurer or nonprofit health service plan:

10 (1) except as provided in subsection (c) of this section, shall accept the
11 uniform claims form adopted by the Commissioner under § 15-1003 of this subtitle:

12 (i) as a properly filed claim with all necessary documentation; and

13 (ii) as the sole instrument for reimbursement; and

14 (2) may not impose as a condition of reimbursement a requirement to:

15 (i) modify the uniform claims form or its content; or

16 (ii) submit additional claims forms.

17 (b) (1) A uniform claims form submitted under this section shall be
18 completed properly and may be submitted by electronic transfer.

19 (2) IF THE HEALTH CARE PRACTITIONER RENDERING THE SERVICE IS A
20 CERTIFIED REGISTERED NURSE ANESTHETIST OR CERTIFIED NURSE MIDWIFE, THE
21 UNIFORM CLAIMS FORM SHALL INCLUDE ~~THE IDENTIFICATION MODIFIER~~
22 MODIFIERS FOR THE CERTIFIED REGISTERED NURSE ANESTHETIST OR CERTIFIED
23 NURSE MIDWIFE THAT INDICATE WHETHER THE SERVICE IS PROVIDED WITH OR
24 WITHOUT MEDICAL DIRECTION BY A PHYSICIAN.

25 (c) If the legitimacy or appropriateness of a health care service is disputed, an
26 insurer or nonprofit health service plan may request additional medical information
27 that describes and summarizes the diagnosis, treatment, and services rendered to the
28 insured.

29 (d) (1) If necessary to determine eligibility for benefits or to determine
30 coverage, an insurer or nonprofit health service plan may obtain additional
31 information from its insured, the insured's employer, or any other nonprovider third
32 party.

33 (2) If obtaining additional information results in a delay in paying a
34 claim, the insurer or nonprofit health service plan shall pay interest in accordance
35 with the provisions of § 15-1005(d) of this subtitle.

1 (e) The Commissioner may impose a penalty not exceeding \$500 on an insurer
2 or nonprofit health service plan that violates this section.

3 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
4 October 1, 1999.