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By: Senators Bromwell and Miller

Introduced and read first time: February 4, 2000

Assigned to: Finance

## A BILL ENTITLED

| 4 | 4 % T | 1   | •          |
|---|-------|-----|------------|
| 1 | AN    | ACT | concerning |

| 2 | Health Insurance - Administrative Service Provider Contract Law |
|---|---|
| 3 | Clarification and Modification                                  |

- 4 FOR the purpose of clarifying that a health maintenance organization is responsible
- for certain obligations under an administrative service provider contract under
- 6 certain circumstances; clarifying that certain responsibilities of a health
- 7 maintenance organization are not subject to certain limitations and exist
- 8 irrespective of certain conditions; requiring a health maintenance organization
- 9 to create a segregated fund for certain purposes under certain circumstances;
- requiring a health maintenance organization to audit and inspect certain books,
- records, and operations of a contracting provider under certain circumstances;
- requiring a health maintenance organization to include certain information in a
- certain annual report; prohibiting the consideration of a certain segregated fund
- as an asset or account of a contracting provider under certain circumstances;
- applying to managed care organizations certain provisions of law that relate to
- health maintenance organizations; requiring the Maryland Insurance
- 17 Administration to make a certain report to the Governor and to the General
- Assembly in a certain manner by a certain date; making this Act an emergency
- 19 measure; and generally relating to the clarification and modification of
- administrative service provider contract law.
- 21 BY repealing and reenacting, with amendments,
- 22 Article Health General
- 23 Section 15-102.3
- 24 Annotated Code of Maryland
- 25 (1994 Replacement Volume and 1999 Supplement)
- 26 BY repealing and reenacting, with amendments,
- 27 Article Health General
- 28 Section 19-712(b) and 19-713.2
- 29 Annotated Code of Maryland
- 30 (1996 Replacement Volume and 1999 Supplement)

1 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF 2 MARYLAND, That the Laws of Maryland read as follows: 3 Article - Health - General 4 15-102.3. 5 The provisions of § 15-112 of the Insurance Article (Provider panels) shall (a) 6 apply to managed care organizations in the same manner they apply to carriers. The provisions of § 15-1005 of the Insurance Article shall apply to 7 8 managed care organizations in the same manner they apply to health maintenance organizations. 10 (C)THE PROVISIONS OF §§ 19-712(B) AND 19-713.2 OF THIS ARTICLE SHALL 11 APPLY TO MANAGED CARE ORGANIZATIONS IN THE SAME MANNER THEY APPLY TO 12 HEALTH MAINTENANCE ORGANIZATIONS. 13 Except as otherwise provided in this subsection, the provisions [(c)](D) (1) 14 of § 19-718 of this article (Financial affairs examination) shall apply to managed care 15 organizations in the same manner they apply to health maintenance organizations. 16 The Insurance Commissioner or an agent of the Commissioner shall 17 examine the financial affairs and status of each managed care organization at least 18 once every 5 years. 19 19-712. (b) 20 (I) [A] SUBJECT TO SUBPARAGRAPH (II) OF THIS PARAGRAPH, A (1) 21 person who holds a certificate of authority to operate a health maintenance 22 organization under this subtitle and who enters into any administrative service 23 provider contract, as defined in § 19-713.1 of this subtitle, with a person or entity for 24 the provision of health care services to subscribers shall be FINANCIALLY AND 25 ADMINISTRATIVELY responsible for all claims or payments for health care services: 26 1. Covered under the subscriber's contract; and [(i)]Rendered by a provider, who is not the person or entity 27 [(ii)] 2. 28 which entered into the administrative service provider contract with the health 29 maintenance organization, pursuant to a referral by a person or entity which entered 30 into the administrative service provider contract with the health maintenance 31 organization. THE FINANCIAL AND ADMINISTRATIVE RESPONSIBILITIES OF A 32 33 HEALTH MAINTENANCE ORGANIZATION UNDER AN ADMINISTRATIVE SERVICE 34 PROVIDER CONTRACT: 35 1. ARE NOT LIMITED BY THE VALUE OF THE ASSETS OF A 36 SEGREGATED FUND ESTABLISHED UNDER AN ADMINISTRATIVE SERVICE PROVIDER 37 CONTRACT;

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| 1 2      | PROVIDER IS INSOLV   | 2.<br>ENT; A          |                     | EXIST IRRESPECTIVE OF WHETHER THE CONTRACTING  |  |  |  |
|----------|--|-----------------------|---------------------|--|--|--|--|
| 3        | CONTRACT PROVISIO  | 3.<br>ON.             | •                   | EXIST IRRESPECTIVE OF ANY CONTRARY OR LIMITING   |  |  |  |
| 5<br>6   | (2) Re subject to the provisions   |                       |                     | claims and payments under this subsection is f this subtitle.  |  |  |  |
| 7        | 19-713.2.  |                       |                     |  |  |  |  |
| 8        | (a) (1) In   | this sect             | tion the            | following words have the meanings indicated.   |  |  |  |
|          |  | ween a l              | health 1            | ervice provider contract" means a contract or naintenance organization and a contracting nat:                                    |  |  |  |
| 14       |  | n for hea<br>nization | alth car<br>that th | racting provider accept payments from a health e services to be provided to members of the e contracting provider arranges to be |  |  |  |
|          | contract within the health<br>the external providers.  |                       |                     | racting provider administer payments pursuant to the organization for the health care services to                                |  |  |  |
|          | 9 (3) "Contracting provider" means a physician or other health care provider who enters into an administrative service provider contract with a health maintenance organization. |                       |                     |  |  |  |  |
| 22<br>23 | (4) "E<br>physician or hospital, wh  |                       |                     | r" means a health care provider, including a   |  |  |  |
| 24       | (i)  | A                     | contra              | cting provider; or   |  |  |  |
| 25       | (ii)   | ) A                   | n empl              | oyee, shareholder, or partner of a contracting provider.   |  |  |  |
| 26<br>27 | (b) A health ma  |                       |                     | nization may not enter into an administrative  |  |  |  |
|          |  |                       |                     | enance organization files with the Insurance equirements of subsection (c) of this section;                                      |  |  |  |
| 31<br>32 | (2) Th days after the plan is file   |                       | nce Co              | mmissioner does not disapprove the filing within 30  |  |  |  |
| 33       | (c) The plan re  | quired u              | nder su             | bsection (b) of this section shall:  |  |  |  |
| 34<br>35 |  |                       |                     | acting provider to provide the health maintenance st quarterly, that identify payments made or                                   |  |  |  |

1 owed to external providers in sufficient detail to determine if the payments are being 2 made in compliance with law; 3 Require the contracting provider to provide to the health 4 maintenance organization a current annual financial statement of the contracting 5 provider each year; 6 Require the creation by the [contracting provider, or on the (3) 7 contracting provider's behalf,] HEALTH MAINTENANCE ORGANIZATION of a 8 segregated fund (which may include withheld funds, escrow accounts, letters of credit, 9 or similar arrangements), or require the availability of other resources that are 10 sufficient to satisfy the contracting provider's obligations to external providers for 11 services rendered to members of the health maintenance organization; 12 Require an explanation of how the fund or resources required under 13 paragraph (3) of this subsection create funds or other resources sufficient to satisfy 14 the contracting provider's obligations to external providers for services rendered to 15 members of the health maintenance organization; [and] 16 [Permit] REQUIRE the health maintenance organization, at 17 mutually agreed upon times and upon reasonable prior notice, to audit and inspect 18 the contracting provider's books, records, and operations relevant to the provider's 19 contract for the purpose of determining the contracting provider's compliance with 20 the plan; AND 21 REQUIRE THE HEALTH MAINTENANCE ORGANIZATION TO INCLUDE 22 A COPY OF EACH CURRENT ANNUAL FINANCIAL STATEMENT OBTAINED UNDER ITEM 23 (2) OF THIS SUBSECTION IN ITS ANNUAL REPORT FILED UNDER § 19-717 OF THIS 24 SUBTITLE. 25 (D) A SEGREGATED FUND ESTABLISHED AS A RESULT OF AN ADMINISTRATIVE 26 SERVICE PROVIDER CONTRACT MAY NOT BE CONSIDERED AN ASSET OR AN ACCOUNT 27 OF THE CONTRACTING PROVIDER FOR THE PURPOSES OF DETERMINING THE ASSETS 28 AND ACCOUNTS OF A BANKRUPT CONTRACTING PROVIDER. 29 The health maintenance organization and the contracting provider [(d)](E) 30 shall comply with the plan. 31 [(e)](1) The health maintenance organization shall monitor the 32 contracting provider to assure compliance with the plan, and the health maintenance 33 organization shall notify the contracting provider whenever a failure to comply with 34 the plan occurs. [Upon] SUBJECT TO SUBPARAGRAPH (II) OF THIS PARAGRAPH, 35 36 UPON the failure of the contracting provider to comply with the plan following notice 37 of noncompliance, or upon termination of the administrative service provider contract 38 for any reason, the health maintenance organization shall assume the FINANCIAL 39 RESPONSIBILITY FOR AND THE administration of any payments due UNDER THE 40 ADMINISTRATIVE SERVICE PROVIDER CONTRACT from the contracting provider to

41 external providers on behalf of the contracting provider.

6 CONTRACT;

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- 1 (II) THE FINANCIAL AND ADMINISTRATIVE RESPONSIBILITIES OF A
  2 HEALTH MAINTENANCE ORGANIZATION UNDER AN ADMINISTRATIVE SERVICE
  3 PROVIDER CONTRACT:
  4 1. ARE NOT LIMITED BY THE VALUE OF THE ASSETS OF A
  5 SEGREGATED FUND ESTABLISHED UNDER AN ADMINISTRATIVE SERVICE PROVIDER
- 7 2. EXIST IRRESPECTIVE OF WHETHER THE CONTRACTING 8 PROVIDER IS INSOLVENT: AND
- 9 3. EXIST IRRESPECTIVE OF ANY CONTRARY OR LIMITING 10 CONTRACT PROVISION.
- 11 [(f)] (G) The plan and all supporting documentation submitted in connection 12 with the plan shall be treated as confidential and proprietary, and may not be
- 13 disclosed except as otherwise required by law.
- 14 [(g)] (H) On July 1, 1991, any health maintenance organization which has 15 existing contracts or arrangements subject to this section shall file a plan under this 16 section within 120 days.
- 17 SECTION 2. AND BE IT FURTHER ENACTED, That the Maryland Insurance
- 18 Administration shall report to the Governor, and, in accordance with § 2-1246 of the
- 19 State Government Article, to the General Assembly on or before December 1, 2000 on
- 20 the effects of this Act and any recommendations for further legislative or regulatory
- 21 action related to administrative service provider contracts.
- 22 SECTION 3. AND BE IT FURTHER ENACTED, That this Act is an emergency
- 23 measure, is necessary for the immediate preservation of the public health and safety,
- 24 has been passed by a yea and nay vote supported by three-fifths of all the members
- 25 elected to each of the two Houses of the General Assembly, and shall take effect from
- 26 the date it is enacted.