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By: Senators Van Hollen, Dorman, Pinsky, McFadden, Teitelbaum, Kelley, Ruben, Frosh, Lawlah, DeGrange, Exum, and Green Introduced and read first time: February 4, 2000 Assigned to: Finance Committee Report: Favorable with amendments Senate action: Adopted Read second time: March 8, 2000			
			CHAPTER
		1	AN ACT concerning
		2	Health Benefit Plans - Smoking Cessation - Coverage
3 4 5 6 7 8 9 10 11 12 13	FOR the purpose of requiring certain insurers, nonprofit health service plans, health maintenance organizations, and managed care organizations to provide coverage for certain treatment and assistance relating to participation in smoking cessation programs or treatment plans under certain circumstances; limiting certain coverage under this Act; providing for the application and construction of this Act; defining a certain term; requiring the Department of Health and Mental Hygiene to consider the requirements of this Act in the Department's review of managed care organizations' payment schedules; requiring that payments to managed care organizations be adjusted to reflect certain costs; and generally relating to coverage under health benefit plans for smoking cessation programs or treatment plans.		
14 15 16 17 18			
19 20 21 22 23	BY adding to Article - Health - General Section 19-706(nn) Annotated Code of Maryland (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 Insurance
- 4 15-835.
- 5 (A) IN THIS SECTION, A "QUIT ATTEMPT" MEANS A SMOKING CESSATION
- 6 PROGRAM THAT INCLUDES THE FOLLOWING CONSISTS OF:
- 7 (1) TWO OFFICE VISITS WITH THE PATIENT'S TREATING
- 8 PHYSICIAN OR OTHER APPROPRIATE LICENSED HEALTH CARE PROVIDER;
- 9 (2) ONE FOLLOW-UP PHONE CALL FROM THE TREATING PHYSICIAN, 10 APPROPRIATE LICENSED HEALTH CARE PROVIDER, OR AN APPROPRIATE DESIGNEE;
- 11 (3) A 2-MONTH SUPPLY OF DRUGS APPROVED FOR SMOKING CESSATION
- 12 PURPOSES BY THE FEDERAL FOOD AND DRUG ADMINISTRATION AS DEEMED
- 13 NECESSARY PRESCRIBED BY THE TREATING PHYSICIAN OR OTHER APPROPRIATE
- 14 LICENSED HEALTH CARE PROVIDER; AND
- 15 (4) 2 MONTHS OF COUNSELING OR SMOKING CESSATION CLASSES AS
- 16 DEEMED NECESSARY PRESCRIBED BY THE TREATING PHYSICIAN OR OTHER
- 17 APPROPRIATE LICENSED HEALTH CARE PROVIDER.
- 18 (B) THIS SECTION APPLIES TO:
- 19 (1) INSURERS AND NONPROFIT HEALTH SERVICE PLANS THAT PROVIDE
- 20 HOSPITAL, MEDICAL, OR SURGICAL BENEFITS TO INDIVIDUALS OR GROUPS ON AN
- 21 EXPENSE-INCURRED BASIS UNDER HEALTH INSURANCE POLICIES OR CONTRACTS
- 22 THAT ARE ISSUED OR DELIVERED IN THE STATE;
- 23 (2) HEALTH MAINTENANCE ORGANIZATIONS THAT PROVIDE HOSPITAL,
- 24 MEDICAL, OR SURGICAL BENEFITS TO INDIVIDUALS OR GROUPS UNDER CONTRACTS
- 25 THAT ARE ISSUED OR DELIVERED IN THE STATE; AND
- 26 (3) MANAGED CARE ORGANIZATIONS, AS DEFINED IN TITLE 15,
- 27 SUBTITLE 1 § 15-101 OF THE HEALTH GENERAL ARTICLE.
- 28 (C) AN ENTITY SUBJECT TO THIS SECTION THAT PROVIDES COVERAGE FOR
- 29 PRESCRIPTION DRUGS SHALL PROVIDE COVERAGE FOR UP TO THREE QUIT
- 30 ATTEMPTS PER FOR EACH ENROLLEE OR INSURED.
- 31 (D) THIS SECTION DOES NOT REQUIRE AN ENTITY SUBJECT TO THIS SECTION
- 32 TO PROVIDE COVERAGE FOR OVER-THE-COUNTER PRODUCTS.

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Article - Health - General

- 2 19-706.
- 3 (NN) THE REQUIREMENTS OF \S 15-835 OF THE INSURANCE ARTICLE APPLY TO
- 4 HEALTH MAINTENANCE ORGANIZATIONS.
- 5 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall apply to all
- 6 policies, contracts, and health benefits plans issued, delivered, or renewed in the
- 7 State on or after October 1, 2000. Any policy, contract, or health benefit plan in effect
- 8 before October 1, 2000 shall comply with the provisions of this Act no later than
- 9 October 1, 2001.
- 10 SECTION 3. AND BE IT FURTHER ENACTED, That:
- 11 (a) the Department of Health and Mental Hygiene shall consider the
- 12 requirements of this Act shall be considered as part of the Department of Health and
- 13 Mental Hygiene's in the Department's review of managed care organizations'
- 14 payment schedules; and
- 15 (b) payments to managed care organizations shall be adjusted <u>annually</u> to
- 16 reflect any additional costs incurred by the managed care organizations as a result of
- 17 the requirements of this Act.
- 18 SECTION 4. AND BE IT FURTHER ENACTED, That this Act shall take effect
- 19 October 1, 2000.