

SENATE BILL 728

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C3

2001 Regular Session
(11r2703)

ENROLLED BILL
-- Finance/Economic 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 Maintenance Organizations - Reimbursement of Noncontracting**
3 **~~Providers-~~ Providers for Services Rendered to Trauma Patients at**
4 **Designated Trauma Centers**

5 FOR the purpose of requiring a health maintenance organization to pay certain
6 claims submitted by ~~certain noncontracting~~ providers of ~~medical care~~ health
7 care services rendered to a trauma patient in certain trauma centers at a certain
8 rate under certain circumstances; providing for the termination of this Act
9 under certain circumstances; authorizing a health maintenance organization to
10 require a noncontracting trauma physician to provide certain information;
11 requiring a trauma center to make certain information available under certain
12 circumstances; altering a certain definition; defining certain terms; providing for
13 the application of this Act; and generally relating to the reimbursement of
14 noncontracting providers by a health maintenance organization for ~~medical care~~
15 health care services rendered at a trauma center.

16 BY repealing and reenacting, with amendments,

1 Article - Health - General
2 Section ~~19-710.1(b)~~ 19-710.1(a) and (b)
3 Annotated Code of Maryland
4 (2000 Replacement Volume)

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

7 **Article - Health - General**

8 19-710.1.

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

10 (2) "Enrollee" means a subscriber or member of the health maintenance
11 organization.

12 (3) "Covered service" means a health care service included in the benefit
13 package of the health maintenance organization and rendered to an enrollee of the
14 health maintenance organization by a health care provider, including a physician or
15 hospital, not under written contract with the health maintenance organization].:

16 (i) Pursuant to a verbal or written referral by the enrollee's health
17 maintenance organization or by a provider under written contract with the enrollee's
18 health maintenance organization; or

19 (ii) That has been preauthorized or otherwise approved either
20 verbally or in writing by the enrollee's health maintenance organization or a provider
21 under written contract with the enrollee's health maintenance organization].

22 (4) "Adjunct claims documentation" means an abstract of an enrollee's
23 medical record which describes and summarizes the diagnosis and treatment of, and
24 services rendered to, the enrollee, INCLUDING, IN THE CASE OF TRAUMA RENDERED IN
25 A TRAUMA CENTER, AN OPERATIVE REPORT, A DISCHARGE SUMMARY, A MARYLAND
26 AMBULANCE INFORMATION SYSTEMS FORM, OR A MEDICAL RECORD.

27 (5) "INSTITUTE" MEANS THE MARYLAND INSTITUTE FOR EMERGENCY
28 MEDICAL SERVICES SYSTEMS.

29 (6) (I) "TRAUMA CENTER" MEANS A PRIMARY ADULT RESOURCE
30 CENTER, LEVEL I TRAUMA CENTER, LEVEL II TRAUMA CENTER, LEVEL III TRAUMA
31 CENTER, OR PEDIATRIC TRAUMA CENTER THAT HAS BEEN DESIGNATED BY THE
32 INSTITUTE TO PROVIDE CARE TO TRAUMA PATIENTS.

33 (II) "TRAUMA CENTER" INCLUDES AN OUT-OF-STATE PEDIATRIC
34 FACILITY THAT HAS ENTERED INTO AN AGREEMENT WITH THE INSTITUTE TO
35 PROVIDE CARE TO TRAUMA PATIENTS.

1 (7) "TRAUMA PATIENT" MEANS A PATIENT THAT IS EVALUATED OR
 2 TREATED IN A TRAUMA CENTER AND IS ENTERED INTO THE STATE TRAUMA
 3 REGISTRY AS A TRAUMA PATIENT.

4 (8) "TRAUMA PHYSICIAN" MEANS A LICENSED PHYSICIAN WHO HAS
 5 BEEN CREDENTIALLED OR DESIGNATED BY A TRAUMA CENTER TO PROVIDE CARE TO
 6 A TRAUMA PATIENT AT A TRAUMA CENTER.

7 (b) (1) In addition to any other provisions of this subtitle, for a covered
 8 service rendered to an enrollee of a health maintenance organization by a health care
 9 provider not under written contract with the health maintenance organization, the
 10 health maintenance organization or its agent:

11 (i) Shall pay the health care provider within 30 days after the
 12 receipt of a claim in accordance with the applicable provisions of this subtitle; and

13 (ii) Shall pay the claim submitted by:

14 1. A hospital at the rate approved by the Health Services
 15 Cost Review Commission; [and]

16 ~~2. A PROVIDER OF MEDICAL CARE RENDERED AT A TRAUMA~~
 17 ~~CENTER, AS DESIGNATED BY THE MARYLAND INSTITUTE OF EMERGENCY MEDICAL~~
 18 ~~SERVICES SYSTEM, AT THE RATE BILLED OR AT THE USUAL, CUSTOMARY, AND~~
 19 ~~REASONABLE RATE; AND~~

20 ~~2. A HEALTH CARE PROVIDER FOR SERVICES RENDERED TO~~
 21 ~~A TRAUMA PATIENT IN A TRAUMA CENTER, AS DESIGNATED BY THE MARYLAND~~
 22 ~~INSTITUTE FOR EMERGENCY MEDICAL SERVICES SYSTEMS, AT THE GREATER OF:~~

23 ~~2. A TRAUMA PHYSICIAN FOR TRAUMA CARE RENDERED TO~~
 24 ~~A TRAUMA PATIENT IN A TRAUMA CENTER, AT THE GREATER OF:~~

25 ~~A. 140% OF THE RATE PAID BY THE MEDICARE PROGRAM, AS~~
 26 ~~PUBLISHED BY THE HEALTH CARE FINANCING ADMINISTRATION, FOR THE SAME~~
 27 ~~COVERED SERVICE, TO A SIMILARLY LICENSED PROVIDER; OR~~

28 ~~B. THE RATE AS OF JANUARY 1, 2001 THAT THE HEALTH~~
 29 ~~MAINTENANCE ORGANIZATION PAID IN THE SAME GEOGRAPHIC AREA, FOR THE~~
 30 ~~SAME COVERED SERVICE, TO A SIMILARLY LICENSED PROVIDER; AND~~

31 3. Any other health care provider at the greater of:

32 A. 125% of the rate the health maintenance organization
 33 pays in the same geographic area, for the same covered service, to a similarly licensed
 34 provider under written contract with the health maintenance organization; or

35 B. The rate as of January 1, 2000 that the health
 36 maintenance organization paid in the same geographic area, for the same covered

1 service, to a similarly licensed provider not under written contract with the health
2 maintenance organization.

3 (2) A health maintenance organization shall disclose, on request of a
4 health care provider not under written contract with the health maintenance
5 organization, the reimbursement rate required under paragraph (1)(i)2 AND 3 of this
6 subsection.

7 (3) (I) SUBJECT TO SUBPARAGRAPH (II) OF THIS PARAGRAPH, A
8 HEALTH MAINTENANCE ORGANIZATION MAY REQUIRE A TRAUMA PHYSICIAN NOT
9 UNDER CONTRACT WITH THE HEALTH MAINTENANCE ORGANIZATION TO SUBMIT
10 APPROPRIATE ADJUNCT CLAIMS DOCUMENTATION AND TO INCLUDE ON THE
11 UNIFORM CLAIM FORM A PROVIDER NUMBER ASSIGNED TO THE TRAUMA PHYSICIAN
12 BY THE HEALTH MAINTENANCE ORGANIZATION.

13 (II) IF A HEALTH MAINTENANCE ORGANIZATION REQUIRES A
14 TRAUMA PHYSICIAN TO INCLUDE A PROVIDER NUMBER ON THE UNIFORM CLAIM
15 FORM IN ACCORDANCE WITH SUBPARAGRAPH (I) OF THIS PARAGRAPH, THE HEALTH
16 MAINTENANCE ORGANIZATION SHALL ASSIGN A PROVIDER NUMBER TO A TRAUMA
17 PHYSICIAN NOT UNDER CONTRACT WITH THE HEALTH MAINTENANCE
18 ORGANIZATION AT THE REQUEST OF THE PHYSICIAN.

19 (4) A TRAUMA CENTER, ON REQUEST FROM A HEALTH MAINTENANCE
20 ORGANIZATION, SHALL VERIFY THAT A LICENSED PHYSICIAN IS CREDENTIALLED OR
21 OTHERWISE DESIGNATED BY THE TRAUMA CENTER TO PROVIDE TRAUMA CARE.

22 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall apply to
23 services rendered on or after October 1, 2001.

24 ~~SECTION 2. 3.~~ AND BE IT FURTHER ENACTED, That this Act shall take
25 effect ~~June 1, 2001~~ October 1, 2001. It shall remain effective until the taking effect of
26 the termination provision specified in Section ~~2~~ 5 of Chapter 275 of the Acts of the
27 General Assembly of 2000. If that termination provision takes effect, this Act shall be
28 abrogated and of no further force and effect. This Act may not be interpreted to have
29 any effect on that termination provision.