Department of Legislative Services

Maryland General Assembly 2001 Session

FISCAL NOTE

Senate Bill 511

(Senators Roesser and Teitelbaum)

Finance

Economic Matters

Health Insurance - Requirements for Providers to Serve on Provider Panels - Dental Plans

This bill prohibits a health insurance carrier that offers dental plans from requiring a dental provider, as a condition of participation or continuation on a provider panel, to serve on another of the carrier's health benefit plan provider panels. A carrier that offers health care services as a Medicaid managed care organization (MCO) may require dental providers to serve on their MCO provider panel.

Fiscal Summary

State Effect: Any additional dental provider contracts reviewed by the Maryland Insurance Administration (MIA) could be handled with existing budgeted resources.

Local Effect: None.

Small Business Effect: Minimal. Small business dental providers would not be required to serve on additional provider panels as a condition of participation with a carrier.

Analysis

Current Law: A health insurer, nonprofit health service plan, or HMO (carrier) that contracts with health care providers through one or more provider panels is prohibited from requiring a provider, as a condition of participation or continuation on a provider panel, to serve on another of the carrier's health benefit plan provider panels. A carrier that offers health care services as a Medicaid managed care organization (MCO) may

require providers to serve on their MCO provider panel. A carrier that offers a dental plan is not prohibited from requiring these types of provider panel arrangements.

Additional Information

Prior Introductions: None.

Cross File: None.

Information Source(s): Department of Health and Mental Hygiene (Medicaid),

Maryland Insurance Administration, Department of Legislative Services

Fiscal Note History: First Reader – March 4, 2001

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