
By: **Senator Astle**

Introduced and read first time: February 1, 2002

Assigned to: Finance

A BILL ENTITLED

1 AN ACT concerning

2 **Health Maintenance Organizations - Reimbursement of Noncontracting**
3 **Providers - Emergency Services**

4 FOR the purpose of requiring a health maintenance organization to reimburse a
5 hospital emergency facility provider not under contract with the health
6 maintenance organization for certain services at a certain rate; defining certain
7 terms; providing for the application of this Act; making this Act subject to a
8 certain contingency; and generally relating to the reimbursement of
9 noncontracting providers by health maintenance organizations for certain
10 services.

11 BY repealing and reenacting, with amendments,
12 Article - Health - General
13 Section 19-710.1(a) and (b)
14 Annotated Code of Maryland
15 (2000 Replacement Volume and 2001 Supplement)

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

18 **Article - Health - General**

19 19-710.1.

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

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

23 (3) "Covered service" means a health care service included in the benefit
24 package of the health maintenance organization and rendered to an enrollee of the
25 health maintenance organization by a health care provider, including a physician or
26 hospital, not under written contract with the health maintenance organization.

27 (4) "Adjunct claims documentation" means an abstract of an enrollee's
28 medical record which describes and summarizes the diagnosis and treatment of, and

1 services rendered to, the enrollee, including, in the case of trauma rendered in a
2 trauma center, an operative report, a discharge summary, a Maryland Ambulance
3 Information Systems form, or a medical record.

4 (5) "EMERGENCY SERVICES" MEANS THOSE HEALTH CARE SERVICES
5 THAT ARE PROVIDED IN A HOSPITAL EMERGENCY FACILITY AFTER THE SUDDEN
6 ONSET OF A MEDICAL CONDITION THAT MANIFESTS ITSELF BY SYMPTOMS OF
7 SUFFICIENT SEVERITY, INCLUDING SEVERE PAIN, THAT THE ABSENCE OF
8 IMMEDIATE MEDICAL ATTENTION COULD REASONABLY BE EXPECTED BY A
9 PRUDENT LAYPERSON, WHO POSSESSES AN AVERAGE KNOWLEDGE OF HEALTH AND
10 MEDICINE, TO RESULT IN:

- 11 (I) PLACING THE PATIENT'S HEALTH IN SERIOUS JEOPARDY;
- 12 (II) SERIOUS IMPAIRMENT TO BODILY FUNCTIONS; OR
- 13 (III) SERIOUS DYSFUNCTION OF ANY BODILY ORGAN OR PART.

14 [(5)] (6) "Institute" means the Maryland Institute for Emergency
15 Medical Services Systems.

16 [(6)] (7) (i) "Trauma center" means a primary adult resource center,
17 level I trauma center, level II trauma center, level III trauma center, or pediatric
18 trauma center that has been designated by the institute to provide care to trauma
19 patients.

20 (ii) "Trauma center" includes an out-of-state pediatric facility that
21 has entered into an agreement with the institute to provide care to trauma patients.

22 [(7)] (8) "Trauma patient" means a patient that is evaluated or treated
23 in a trauma center and is entered into the State trauma registry as a trauma patient.

24 [(8)] (9) "Trauma physician" means a licensed physician who has been
25 credentialed or designated by a trauma center to provide care to a trauma patient at
26 a trauma center.

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

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

33 (ii) Shall pay the claim submitted by:

34 1. A hospital at the rate approved by the Health Services
35 Cost Review Commission;

1 2. A trauma physician for trauma care rendered to a trauma
2 patient in a trauma center, at the greater of:

3 A. 140% of the rate paid by the Medicare program, as
4 published by the Health Care Financing Administration, for the same covered service,
5 to a similarly licensed provider; or

6 B. The rate as of January 1, 2001 that the health
7 maintenance organization paid in the same geographic area, for the same covered
8 service, to a similarly licensed provider; [and]

9 3. A HOSPITAL EMERGENCY FACILITY PROVIDER FOR
10 EMERGENCY SERVICES OR SERVICES DESCRIBED IN § 19-712.5 OF THIS SUBTITLE, AT
11 THE GREATER OF:

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

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

18 [3.] 4. Any other health care provider at the greater of:

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

22 B. The rate as of January 1, 2000 that the health
23 maintenance organization paid in the same geographic area, for the same covered
24 service, to a similarly licensed provider not under written contract with the health
25 maintenance organization.

26 (2) A health maintenance organization shall disclose, on request of a
27 health care provider not under written contract with the health maintenance
28 organization, the reimbursement rate required under paragraph (1)(ii)2 and 3 of this
29 subsection.

30 (3) (i) Subject to subparagraph (ii) of this paragraph, a health
31 maintenance organization may require a trauma physician not under contract with
32 the health maintenance organization to submit appropriate adjunct claims
33 documentation and to include on the uniform claim form a provider number assigned
34 to the trauma physician by the health maintenance organization.

35 (ii) If a health maintenance organization requires a trauma
36 physician to include a provider number on the uniform claim form in accordance with
37 subparagraph (i) of this paragraph, the health maintenance organization shall assign
38 a provider number to a trauma physician not under contract with the health
39 maintenance organization at the request of the physician.

1 (4) A trauma center, on request from a health maintenance organization,
2 shall verify that a licensed physician is credentialed or otherwise designated by the
3 trauma center to provide trauma care.

4 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall apply to
5 services rendered on or after July 1, 2002.

6 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect
7 July 1, 2002, contingent on the repeal or extension of the June 30, 2002 sunset
8 provision for § 19-710.1 contained in § 5, Chapter 275, Acts of 2000, and if the sunset
9 provision is not repealed or extended before the effective date of this Act, this Act shall
10 be null and void without the necessity of further action by the General Assembly.