

BY: Finance Committee

AMENDMENTS TO HOUSE BILL NO. 1271

(Third Reading File Bill)

AMENDMENT NO. 1

On page 1, strike beginning with “requiring” in line 4 down through “Commission” in line 5 and substitute “requiring the Maryland Medical Assistance Program to provide, subject to certain limitations and requirements, comprehensive medical care and other health care services for certain parents”; strike beginning with “as” in line 6 down through “functions” in line 7; strike beginning with “requiring” in line 9 down through “date;” in line 10; in line 10, strike “duties;”; strike beginning with “terms” in line 10 down through “composition,” in line 11; in line 11, strike the fourth comma and substitute “and”; in lines 11 and 12, strike “, and executive director”; strike beginning with “requiring” in line 12 down through “Assembly;” in line 14; in line 14, strike “certain powers” and substitute “a certain power”; in line 15, strike “do” and substitute “does”; and strike beginning with “establishing” in line 15 down through “Commission;” in line 16.

On pages 1 and 2, strike beginning with “requiring” in line 23 on page 1 down through “manner;” in line 2 on page 2.

On page 2, strike beginning with “requiring” in line 3 down through “date;” in line 16 and substitute “requiring the Commission to establish certain standing committees; providing for the composition and duties of the standing committees;”; in line 16, strike “Commission”; in line 19, after “Fund;” insert “providing that grants awarded to community health resources from the Fund may be used for certain purposes;”; strike beginning with “adopt” in line 19 down through “purposes” in line 21 and substitute “submit certain reports to the Governor and the General Assembly on or before certain dates”; and strike beginning with “establishing” in line 21 down through “Program;” in line 41.

On page 3, strike beginning with “providing” in line 10 down through “Fund;” in line 11; in line 13, strike “a certain provision” and substitute “certain provisions”; strike beginning with “requiring” in line 23 down through “waiver;” in line 28; in line 31, strike “a certain study” and

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substitute “certain studies”; and strike beginning with “requiring” in line 33 down through “contingencies;” in line 39 and substitute “requiring the Maryland Insurance Administration, in consultation with the Maryland Health Care Commission, to report certain information to certain committees of the General Assembly on or before certain dates;”.

On page 4, in line 2, strike “19-2114” and substitute “19-2111”; strike beginning with the semicolon in line 4 down through “Program” in line 6; and in line 11, strike “19-303” and substitute “15-103(a)”.

On pages 4 and 5, strike in their entirety the lines beginning with line 34 on page 4 through line 1 on page 5, inclusive.

AMENDMENT NO. 2

On pages 5 through 7, strike in their entirety the lines beginning with line 27 on page 5 through line 19 on page 7, inclusive, and substitute:

“15-103.

(a) (1) The Secretary shall administer the Maryland Medical Assistance Program.

(2) The Program:

(i) Subject to the limitations of the State budget, shall provide comprehensive medical and other health care services for indigent individuals or medically indigent individuals or both;

(ii) Shall provide, subject to the limitations of the State budget, comprehensive medical and other health care services for all eligible pregnant women whose family income is at or below 250 percent of the poverty level, as permitted by the federal law;

(iii) Shall provide, subject to the limitations of the State budget, comprehensive medical and other health care services for all eligible children currently under the age of 1 whose family income falls below 185 percent of the poverty level, as permitted by federal law;

(iv) Shall provide, subject to the limitations of the State budget, family

planning services to women currently eligible for comprehensive medical care and other health care under item (ii) of this paragraph for 5 years after the second month following the month in which the woman delivers her child;

(v) Shall provide, subject to the limitations of the State budget, comprehensive medical and other health care services for all children from the age of 1 year up through and including the age of 5 years whose family income falls below 133 percent of the poverty level, as permitted by the federal law;

(vi) Shall provide, subject to the limitations of the State budget, comprehensive medical care and other health care services for all children born after September 30, 1983 who are at least 6 years of age but are under 19 years of age whose family income falls below 100 percent of the poverty level, as permitted by federal law;

(vii) Shall provide, subject to the limitations of the State budget, comprehensive medical care and other health care services for all legal immigrants who meet Program eligibility standards and who arrived in the United States before August 22, 1996, the effective date of the federal Personal Responsibility and Work Opportunity Reconciliation Act, as permitted by federal law;

(viii) Shall provide, subject to the limitations of the State budget and any other requirements imposed by the State, comprehensive medical care and other health care services for all legal immigrant children under the age of 18 years and pregnant women who meet Program eligibility standards and who arrived in the United States on or after August 22, 1996, the effective date of the federal Personal Responsibility and Work Opportunity Reconciliation Act;

(IX) SHALL PROVIDE, SUBJECT TO THE LIMITATIONS OF THE STATE BUDGET AND ANY OTHER REQUIREMENTS IMPOSED BY THE STATE, COMPREHENSIVE MEDICAL CARE AND OTHER HEALTH CARE SERVICES FOR ALL PARENTS:

1. OF CHILDREN WHO ARE ELIGIBLE FOR SERVICES UNDER THE PROGRAM OR THE MARYLAND CHILDREN'S HEALTH PROGRAM; AND

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2. WHOSE ANNUAL HOUSEHOLD INCOME:

A. FOR FISCAL YEAR 2006 AND FISCAL YEAR 2007, IS AT OR BELOW 116 PERCENT OF THE POVERTY LEVEL, AS PERMITTED BY FEDERAL LAW; AND

B. FOR FISCAL YEAR 2008 AND EACH FOLLOWING FISCAL YEAR, IS AT OR BELOW 150 PERCENT OF THE POVERTY LEVEL, AS PERMITTED BY FEDERAL LAW;

[(ix)] (X) May include bedside nursing care for eligible Program recipients; and

[(x)] (XI) Shall provide services in accordance with funding restrictions included in the annual State budget bill.

(3) Subject to restrictions in federal law or waivers, the Department may impose cost-sharing on Program recipients.”.

AMENDMENT NO. 3

On page 7, after line 34, insert:

“SECTION 2. AND BE IT FURTHER ENACTED, That the Laws of Maryland read as follows:

Article - Health - General”.

On page 8, in line 7, after “NONPROFIT” insert “OR FOR PROFIT”; in line 9, strike “§ 19-2109(A)(2)” and substitute “§ 19-2108(A)(2) OF THIS SUBTITLE”; after line 22, insert:

“(X) A HISTORIC MARYLAND PRIMARY CARE PROVIDER;”;

in lines 23 and 24, strike “(X)” and “(XI)”, respectively, and substitute “(XI)” and “(XII)”, respectively; in line 27, after “COMMISSION” insert “IN THE DEPARTMENT”; strike lines 28 and

29 in their entirety; and in line 30, strike “(C)” and substitute “(B)”.

On page 9, strike in their entirety lines 7 through 22, inclusive; in line 23, strike “(7)” and substitute “(B)”; in line 25, after “RACIAL” insert “AND GENDER”; and in line 27, strike “ANNUALLY,”.

On page 10, strike in their entirety lines 1 through 8, inclusive; in line 9, strike “19-2106.” and substitute “19-2105.”; strike in their entirety lines 14 through 17, inclusive, and substitute:

“(B) A MEMBER OF THE COMMISSION:

(1) MAY NOT RECEIVE COMPENSATION; BUT”;

in line 18, after “(2)” insert “IS ENTITLED TO”; in line 20, strike “(D) (1)” and substitute “(C) (1)”; strike in their entirety lines 22 and 23; in line 24, strike “(3)” and substitute “(2)”; and in line 26, strike “19-2107.” and substitute “19-2106.”.

On page 11, in line 19, after “MEETING;” insert “AND”; in line 22, strike “; AND” and substitute a period; and strike in their entirety lines 23 through 36, inclusive, and substitute:

“19-2107.”.

On page 12, in line 1, strike “(C) (1)” and substitute “(A)”; in line 4, strike “(2)” and substitute “(B)”; in lines 4 and 5, strike “PARAGRAPH (1) OF THIS SUBSECTION” and substitute “SUBSECTION (A) OF THIS SECTION”; in line 8, strike “19-2109.” and substitute “19-2108.”; in line 11, after “ESTABLISH” insert “BY REGULATION”; in line 13, strike “(I) IDENTIFY” and substitute “ESTABLISH BY REGULATION”; strike beginning with “WHICH” in line 15 down through the second “SERVICES” in line 17; in line 17, strike “AND”; strike in their entirety lines 18 through 20, inclusive; in lines 25 and 28, strike “(5)” and “(6)”, respectively, and substitute “(6)” and “(7)”, respectively; after line 24, insert:

“(5) ESTABLISH BY REGULATION THE CRITERIA FOR COMMUNITY HEALTH RESOURCES TO QUALIFY FOR CAPITAL AND OPERATING GRANTS AND PROCEDURES FOR APPLYING FOR CAPITAL AND OPERATING GRANTS;”;

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in line 29, after “ESTABLISH” insert “BY REGULATION”; and strike in their entirety lines 32 through 34, inclusive.

On page 13, in line 14, strike “(11)” and substitute “(10)”; strike beginning with “SERVE” in line 1 down through “HEALTH” in line 2 and substitute “WORK IN CONJUNCTION WITH THE OFFICE OF PRIMARY”; strike in their entirety lines 5 through 13, inclusive; in line 14, strike “EXPAND” and substitute “EVALUATE, IN CONSULTATION WITH THE MARYLAND TECHNOLOGY GROUP, THE FEASIBILITY OF EXPANDING”; after line 18, insert:

“(11) (I) IDENTIFY METHODS TO INCREASE THE REIMBURSEMENT RATES PAID BY PUBLIC AND PRIVATE INSURERS TO HEALTH CARE PROVIDERS WHO PROVIDE SERVICES THROUGH COMMUNITY HEALTH RESOURCES; AND

(II) IDENTIFY METHODS TO FACILITATE REIMBURSEMENT PROVIDED TO HEALTH CARE PROVIDERS WHO PROVIDE SERVICES THROUGH COMMUNITY HEALTH RESOURCES, INCLUDING METHODS TO MAKE THE PROVIDER AN EMPLOYEE OF THE COMMUNITY HEALTH RESOURCE;

(12) IDENTIFY METHODS, IN CONSULTATION WITH THE MARYLAND HEALTH CARE COMMISSION, TO ENCOURAGE EMPLOYERS TO MAKE HEALTH CARE COVERAGE AVAILABLE FOR UNINSURED, LOW-INCOME WORKERS, INCLUDING:

(I) ALTERNATIVES TO TRADITIONAL HEALTH INSURANCE THAT STILL PROVIDE TAX BENEFITS TO EMPLOYERS OR EMPLOYEES FOR OBTAINING COVERAGE; AND

(II) “THREE-SHARE” PROGRAMS THAT DIVIDE COSTS AMONG THE EMPLOYER, THE EMPLOYEE, AND THE GOVERNMENT;”;

in line 19, strike “(12)” and substitute “(13)”; in the same line, strike “DEVELOP AND IMPLEMENT PROGRAMS TO PROVIDE INCENTIVES TO” and substitute “MAKE RECOMMENDATIONS ON HOW TO CREATE INCENTIVES FOR”; and in line 21, strike “, INCLUDING PROGRAMS:” and substitute “; AND”

(14) DEVELOP A TOLL-FREE HOTLINE TO:

(I) DETERMINE A CALLER'S POTENTIAL ELIGIBILITY FOR HEALTH CARE SERVICES;

(II) ASSIST CALLERS IN COMPLETING APPLICATION FORMS FOR HEALTH CARE SERVICES;

(III) REFER CALLERS TO COMMUNITY HEALTH RESOURCES THAT ARE CLOSE TO THE CALLER'S RESIDENCE OR WORKPLACE; AND

(IV) PROVIDE OUTREACH SERVICES TO EDUCATE AND INFORM INDIVIDUALS OF THE AVAILABILITY OF COMMUNITY HEALTH RESOURCES AND THE ELIGIBILITY CRITERIA OF COMMUNITY HEALTH RESOURCES.

(B) IN DEVELOPING CRITERIA UNDER SUBSECTION (A)(6) OF THIS SUBSECTION FOR COMMUNITY HEALTH RESOURCES TO QUALIFY FOR CAPITAL AND OPERATING GRANTS, THE COMMISSION SHALL:

(1) CONSIDER GEOGRAPHIC BALANCE; AND

(2) GIVE PRIORITY TO COMMUNITY HEALTH RESOURCES THAT:

(I) IN ADDITION TO NORMAL BUSINESS HOURS, HAVE EVENING AND WEEKEND HOURS OF OPERATION; OR

(II) HAVE PARTNERED WITH A HOSPITAL TO ESTABLISH A REVERSE REFERRAL PROGRAM AT THE HOSPITAL.

(C) IN DEVELOPING A TOLL-FREE HOTLINE UNDER SUBSECTION (A)(14) OF THIS SECTION, THE COMMISSION SHALL COORDINATE TO THE EXTENT PRACTICABLE WITH ANY EXISTING TOLL-FREE HOTLINE.”.

On pages 13 and 14, strike in their entirety the lines beginning with line 22 on page 13

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through line 16 on page 14, inclusive.

On page 14, in line 20, strike “AND”; in the same line, after “HOSPITALS” insert “, COMMUNITY HEALTH RESOURCES, PHYSICIANS, AND ANY OTHER APPROPRIATE PERSONS”; in line 22, strike “SUBSECTION (G)” and substitute “SUBSECTION (A)(14)”; and strike in their entirety lines 25 through 38, inclusive.

On page 15, strike in their entirety lines 1 through 25, inclusive; in line 26, strike “19-2111.” and substitute “19-2109.”; strike in their entirety lines 27 through 31, inclusive, and substitute:

“(A) TO FACILITATE THE WORK OF THE COMMISSION, THE COMMISSION SHALL ESTABLISH THE FOLLOWING STANDING COMMITTEES:

(1) THE COMMITTEE ON CAPITAL AND OPERATIONAL FUNDING;

(2) THE COMMITTEE ON HOSPITAL AND COMMUNITY HEALTH RESOURCES RELATIONS; AND

(3) THE COMMITTEE ON SCHOOL-BASED COMMUNITY HEALTH CENTER EXPANSION.

(B) (1) THE COMMITTEE ON CAPITAL AND OPERATIONAL FUNDING SHALL BE COMPRISED OF:

(I) AT LEAST ONE MEMBER OF THE COMMISSION;

(II) THE SECRETARY OF THE DEPARTMENT, OR THE SECRETARY’S DESIGNEE;

(III) THE SECRETARY OF THE DEPARTMENT OF BUDGET AND MANAGEMENT, OR THE SECRETARY’S DESIGNEE;

(IV) THE EXECUTIVE DIRECTOR OF THE MARYLAND HEALTH AND HIGHER EDUCATIONAL FACILITIES AUTHORITY, OR THE EXECUTIVE DIRECTOR’S DESIGNEE; AND

(V) ONE REPRESENTATIVE OF EACH OF THE FOLLOWING, APPOINTED BY THE COMMISSION:

1. LOCAL HEALTH DEPARTMENTS;
2. FEDERALLY QUALIFIED HEALTH CENTERS; AND
3. COMMUNITY HEALTH RESOURCES.

(2) THE COMMITTEE SHALL:";

and in line 32, strike "(1)" and substitute "(I)".

On page 16, in lines 1, 2, 3, 6, 9, 11, 13, 15, and 18, strike "(2)", "(1)", "(3)", "(4)", "(I)", "(II)", "(III)", "(5)", and "(6)", respectively, and substitute "(II)", "(I)", "(III)", "(IV)", "1.", "2.", "3.", "(V)", and "(VII)", respectively; in line 1, before "ASSIST" insert "DEVELOP A PROGRAM TO"; in line 6, strike "ESTABLISH A CAPITAL BOND COMMITTEE TO" and substitute "DEVELOP A PROGRAM TO"; strike beginning with "AS" in line 7 down through "ARTICLE" in line 8; in lines 9 and 10 and 11 and 12, in each instance, strike "COMMUNITY HEALTH RESOURCES" and substitute "FEDERALLY QUALIFIED HEALTH CENTERS"; strike beginning with "THE" in line 16 down through "ARTICLE" in line 17 and substitute "CAPITAL BOND FINANCING PROGRAMS FOR FEDERALLY QUALIFIED HEALTH CENTERS"; in line 17, strike "AND"; after line 17, insert:

"(VI) IDENTIFY ANY FEDERAL OR STATE FUNDING SOURCES THAT MAY BE AVAILABLE TO COMMUNITY HEALTH RESOURCES, INCLUDING FINANCIAL ASSISTANCE THROUGH THE MARYLAND HEALTH AND HIGHER EDUCATIONAL FACILITIES AUTHORITY; AND";

and after line 20, insert:

"(C) (1) THE COMMITTEE ON HOSPITAL AND COMMUNITY HEALTH RESOURCES RELATIONS SHALL BE COMPRISED OF:

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(I) AT LEAST ONE MEMBER OF THE COMMISSION; AND

(II) ONE REPRESENTATIVE OF EACH OF THE FOLLOWING,
APPOINTED BY THE COMMISSION:

1. HOSPITALS;

2. COMMUNITY HEALTH RESOURCES;

3. HOSPITAL-BASED PHYSICIANS; AND

4. PHYSICIAN SPECIALISTS.

(2) THE COMMITTEE SHALL:

(I) MAKE RECOMMENDATIONS TO THE COMMISSION ON
PROPOSALS TO ENCOURAGE HOSPITALS AND COMMUNITY HEALTH RESOURCES TO
PARTNER TO INCREASE ACCESS TO HEALTH CARE; AND

(II) ESTABLISH A REVERSE REFERRAL PILOT PROGRAM UNDER
WHICH A HOSPITAL WILL IDENTIFY AND ASSIST PATIENTS IN ACCESSING HEALTH
CARE SERVICES THROUGH A COMMUNITY HEALTH RESOURCE.”.

On pages 16 through 18, strike in their entirety the lines beginning with line 21 on page 16 through line 25 on page 18, inclusive.

On page 18, in line 26, strike “(H)” and substitute “(D)”; in the same line, strike “ADVISORY COUNCIL” and substitute “COMMITTEE ON SCHOOL-BASED COMMUNITY HEALTH CENTER EXPANSION”; in the same line, after “SHALL” insert “BE COMPRISED OF:”

(I) AT LEAST ONE MEMBER OF THE COMMISSION;

(II) THE SECRETARY OF THE DEPARTMENT, OR THE
SECRETARY’S DESIGNEE;

(III) ONE REPRESENTATIVE FROM THE GOVERNOR’S OFFICE FOR CHILDREN, YOUTH, AND FAMILIES, APPOINTED BY THE GOVERNOR;

(IV) A LOCAL SUPERINTENDENT OF SCHOOLS, APPOINTED BY THE PUBLIC SCHOOL SUPERINTENDENTS ASSOCIATION OF MARYLAND; AND

(V) THE FOLLOWING MEMBERS, APPOINTED BY THE COMMISSION:

1. A REPRESENTATIVE OF A SCHOOL-BASED HEALTH CENTER;

2. A NURSE PRACTITIONER OR A PHYSICIAN ASSISTANT; AND

3. A CONSUMER.

(2) THE COMMITTEE SHALL”;

in line 27, strike “RELATED TO THE EXPANSION OF” and substitute “ON HOW TO EXPAND”; in line 30, strike “(2)” and substitute “(3)”; in the same line, strike “(1)” and substitute “(2)”; and in line 31, strike “ADVISORY COUNCIL SHALL IDENTIFY THE FOLLOWING” and substitute “COMMITTEE SHALL”.

On page 19, in line 1, after “(I)” insert “EVALUATE THE FEASIBILITY OF DEVELOPING”; in lines 1 and 2, strike “AND SLIDING SCALE FEES”; in line 4, after “(II)” insert “EVALUATE THE FEASIBILITY OF DEVELOPING”; in line 7, after “(III)” insert “IDENTIFY”; in line 10, after “(IV)” insert “IDENTIFY”; in line 12, strike the second “AND”; in line 13, after “(V)” insert “EVALUATE THE FEASIBILITY OF DEVELOPING”; in line 16, after “(VI)” insert “IDENTIFY”; and strike in their entirety lines 18 through 25, inclusive, and substitute:

“(E) EACH STANDING COMMITTEE ESTABLISHED UNDER THIS SECTION

SHALL SUBMIT THE FOLLOWING REPORTS TO THE COMMISSION ON ITS ACTIVITIES AND ANY FINDINGS AND RECOMMENDATIONS REQUIRED UNDER THIS SECTION:

- (1) AN INTERIM REPORT ON OR BEFORE JUNE 1, 2005; AND
- (2) A FINAL REPORT ON OR BEFORE JUNE 1, 2006.

19-2110.

(A) THE COMMISSION SHALL SUBMIT THE FOLLOWING REPORTS TO THE GOVERNOR AND, IN ACCORDANCE WITH § 2-1246 OF THE STATE GOVERNMENT ARTICLE, TO THE GENERAL ASSEMBLY, ON ITS ACTIVITIES, FINDINGS, AND RECOMMENDATIONS, INCLUDING THE ACTIVITIES, FINDINGS, AND RECOMMENDATIONS OF ITS STANDING COMMITTEES:

- (1) AN INTERIM REPORT ON OR BEFORE JUNE 30, 2005; AND
- (2) A FINAL REPORT ON OR BEFORE JUNE 30, 2006.

(B) THE FINAL REPORT OF THE COMMISSION SHALL INCLUDE:

(1) A PLAN FOR TRANSITIONING RESPONSIBILITY FOR ANY ONGOING DUTIES OF THE COMMISSION AND ITS STANDING COMMITTEES UNDER THIS SUBTITLE TO THE DEPARTMENT; AND

(2) RECOMMENDATIONS FOR LEGISLATIVE CHANGES NECESSARY TO IMPLEMENT THE PLAN UNDER ITEM (1) OF THIS SUBSECTION.

SECTION 3. AND BE IT FURTHER ENACTED, That the Laws of Maryland read as follows:

Article - Health - General”.

AMENDMENT NO. 4

On page 19, in line 26, strike “19-2114.” and substitute “19-2111.”; in lines 28 and 29, in

each instance, strike “COMMISSION”; and in line 34, strike “(1)”.

On page 20, in line 1, strike “(I)” and substitute “(1)”; in line 3, after “ARTICLE;” insert “AND”; strike in their entirety lines 17 through 19, inclusive; in line 20, strike “(III)” and substitute “(2)”; in line 22, strike “(1)”; in lines 23, 24, 27, and 30, strike “(I)”, “(II)”, “(III)”, and “(IV)”, respectively, and substitute “(1)”, “(2)”, “(3)”, and “(4)”, respectively; in line 27, strike “\$10,000,000” and substitute “\$5,000,000”; in line 28, strike “2006, WITH INFLATIONARY ADJUSTMENTS IN SUBSEQUENT YEARS.” and substitute “2005”; in line 30, strike “SUBJECT TO THE APPROVAL OF A FEDERAL WAIVER,”; in line 32, after “PAYMENTS” insert “, INCLUDING PAYMENTS FOR SPECIALTY MENTAL HEALTH SERVICES UNDER THE MENTAL HYGIENE ADMINISTRATION,”; in the same line, strike “200” and substitute “150”; in line 33, after “LEVEL” insert “, IN ACCORDANCE WITH § 15-103(A)(2)(IX) OF THIS ARTICLE”; and in line 34, strike “(V)” and substitute “(5)”.

On page 21, in line 1, strike “(VI)” and substitute “(6)”; in line 2, after “INCREASE” insert “AND MAINTAIN REIMBURSEMENT”; in the same line, strike “TO HEALTH CARE PROVIDERS WITHIN” and substitute “FOR SPECIALTY CARE SERVICES PROVIDED TO ENROLLEES IN”; in line 3, after “PROGRAM” insert “, AS FOLLOWS:”

(I) IN FISCAL YEAR 2005, \$20,000,000 TO BE USED TO INCREASE REIMBURSEMENT RATES; AND

(II) IN FISCAL YEAR 2006 AND IN EACH FISCAL YEAR THEREAFTER, \$25,000,000 TO BE USED TO MAINTAIN THE REIMBURSEMENT RATE INCREASE”;

strike in their entirety lines 4 through 10, inclusive; in lines 11, 15, 17, 20, 22, and 26, strike “(3)”, “(II)”, “(III)”, “(IV)”, “(F)”, and “(G)”, respectively, and substitute “(F)”, “(1)”, “(2)”, “(3)”, “(G)”, and “(H)”, respectively; strike in their entirety lines 13 and 14; in line 23, strike “INVENTED” and substitute “INVESTED”; and in line 27, after “AUDITS” insert “AT LEAST ONCE EVERY 2 YEARS,”.

AMENDMENT NO. 5

On page 29, in line 30, after “annuities;” insert “and”; and in line 31, strike “1% FOR:” and

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substitute “2% for all other premiums, **INCLUDING:**”.

On page 30, strike beginning with the semicolon in line 3 down through “premiums” in line 4; in line 14, strike “COMMISSION”; and in the same line, strike “§ 19-2114” and substitute “§ 19-2111”.

AMENDMENT NO. 6

On pages 21 through 28, strike in their entirety the lines beginning with line 29 on page 21 through line 17 on page 28, inclusive.

AMENDMENT NO. 7

On pages 33 through 36, strike in their entirety the lines beginning with line 23 on page 33 through line 12 on page 36, inclusive.

On page 36, in line 13, strike “2.” and substitute “4.”.

On page 41, strike in their entirety lines 13 through 16, inclusive.

On pages 42 and 43, strike in their entirety the lines beginning with line 15 on page 42 through line 8 on page 43, inclusive.

On page 43, in lines 9 and 25, strike “7.” and “8.”, respectively, and substitute “5.” and “6.”, respectively; and in lines 12 and 18, in each instance, strike “1” and substitute “3”.

On pages 43 and 44, strike in their entirety the lines beginning with line 30 on page 43 through line 21 on page 44, inclusive.

On page 44, in line 22, strike “10.” and substitute “7.”.

On page 45, in line 7, after “shall” insert “:”

“(1)”;

in line 9, after “State” insert “; and”

“(2) (i) study the “Dirigo Health” plan enacted in Maine in 2003, the employer”

mandate enacted in California, and innovative health care coverage programs in other states; and
(ii) analyze the feasibility and desirability of implementing aspects of the “Dirigo Health” plan, the California employer mandate, or other innovative state health care coverage programs in Maryland”;

in line 12, after “community,” insert “union representatives,”; and in line 13, strike “4” and substitute “four”.

AMENDMENT NO. 8

On page 45, after line 17, insert:

“SECTION 8. AND BE IT FURTHER ENACTED, That, on or before July 1, 2005, and on or before July 1 of each following year, the Maryland Insurance Administration, in consultation with the Maryland Health Care Commission, shall report, in accordance with § 2-1246 of the State Government Article, to the Senate Finance Committee and the House Health and Government Operations Committee, for the prior calendar year, on:

(a) the number of individuals enrolled in health maintenance organizations in each of the individual, small group, and large group health insurance markets;

(b) the total premiums written in Maryland by health maintenance organizations and managed care organizations;

(c) the number of rate filings submitted to the Administration that attribute any rate increase to the application of the premium tax to health maintenance organizations under § 6-101 of the Insurance Article, as enacted by Section 3 of this Act; and

(d) the average increase in premium rates attributable to the application of the premium tax to health maintenance organizations under § 6-101 of the Insurance Article, as enacted by Section 3 of this Act.”.

AMENDMENT NO. 9

On page 45, strike in their entirety lines 18 and 19 and substitute:

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“SECTION 9. AND BE IT FURTHER ENACTED, That this Act shall take effect July 1, 2004. Sections 2 and 4 of this Act shall remain effective for a period of 2 years and, at the end of June 30, 2006, with no further action required by the General Assembly, Sections 2 and 4 of this Act shall be abrogated and of no further force and effect. Section 7 of this Act shall remain effective for a period of 1 year and, at the end of June 30, 2005, with no further action required by the General Assembly, Section 7 of this Act shall be abrogated and of no further force and effect.”.