HOUSE BILL 411

C3

7lr2178 CF 7lr2210

By: **Delegates Nathan–Pulliam, Benson, Burns, Costa, and Donoghue** Introduced and read first time: February 5, 2007 Assigned to: Health and Government Operations

A BILL ENTITLED

1 AN ACT concerning

2 Health Insurance - Managed Care Organizations - Service Count Ratio

- FOR the purpose of requiring that certain regulations adopted by the Secretary of Health and Mental Hygiene, in consultation with the Maryland Insurance Commissioner, establish a mechanism to include a certain service count ratio as a condition under which a certain adjustment to capitation payments for certain managed care organizations will be waived; and generally relating to capitation payments for managed care organizations.
- 9 BY repealing and reenacting, without amendments,
- 10 Article Insurance
- 11 Section 15–605(c)(5)
- 12 Annotated Code of Maryland
- 13 (2006 Replacement Volume and 2006 Supplement)
- 14 BY repealing and reenacting, with amendments,
- 15 Chapter 193 of the Acts of the General Assembly of 2005
- 16 Section 2
- 17 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF 18 MARYLAND, That the Laws of Maryland read as follows:

20 15–605.

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW. [Brackets] indicate matter deleted from existing law.



HOUSE BILL 411

1 (c) (5)The Secretary of Health and Mental Hygiene, in consultation with 2 the Commissioner and in accordance with their memorandum of understanding, may 3 adjust capitation payments for a managed care organization or for the Maryland 4 Medical Assistance Program of a managed care organization that is a certified health 5 maintenance organization: 6 (i) if the loss ratio is less than 80% during calendar year 1997; 7 and 8 (ii) during each subsequent calendar year if the loss ratio is less 9 than 85%. 10 Chapter 193 of the Acts of 2005 SECTION 2. AND BE IT FURTHER ENACTED, That: 11 12 Prior to making any adjustments to capitation payments for a managed (a) 13 care organization, the Secretary of Health and Mental Hygiene, in consultation with 14 the Maryland Insurance Commissioner, shall adopt regulations to implement the 15 provisions of § 15-605(c)(5) of the Insurance Article. (b) The regulations adopted under subsection (a) of this section shall: 16 establish the definition of "loss ratio" for uniform application by all 17 (1)18 managed care organizations; 19 (2)establish procedures requiring the Secretary of Health and Mental Hygiene to consider the financial performance of a managed care organization in prior 20 21 periods;

(3) establish standard data collection and reporting requirements for
 all managed care organizations;

- (4) consistent with the provisions of § 15–605(c)(5) of the Insurance
 Article, establish a process for allowing a managed care organization to appeal a
 decision of the Secretary of Health and Mental Hygiene to adjust a managed care
 organization's capitation payments; [and]
- 28 (5) establish a mechanism for, and conditions under which, an 29 adjustment to the capitation rates of a managed care organization are made; **AND**

 $\mathbf{2}$

1 (6) ESTABLISH A MECHANISM TO INCLUDE AN ABOVE MANAGED 2 CARE ORGANIZATION AVERAGE SERVICE COUNT RATIO FOR EVALUATION AND 3 MANAGEMENT SERVICES AS A CONDITION UNDER WHICH THE CAPITATION 4 ADJUSTMENT WILL BE WAIVED IF THE LOSS RATIO IS MORE THAN 80%, BUT 5 LESS THAN 85%, AS DETERMINED BY THE SERVICE COUNT RATIO REPORT 6 PRODUCED BY THE DEPARTMENT OF HEALTH AND MENTAL HYGIENE.

(c) The Secretary of Health and Mental Hygiene shall adopt any additional
regulations necessary to carry out the provisions of § 16–605(c)(5) of the Insurance
Article and the goals of the Health Choice Program.

10 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect 11 June 1, 2007.