P4, C3, J4 CF SB 476

By: Delegates Gaines, Aumann, Barkley, Bronrott, DeBoy, Haynes, Healey, Jones, and F. Turner

Introduced and read first time: February 7, 2008

Assigned to: Appropriations

AN ACT concerning

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## A BILL ENTITLED

2	Department of Budget and Management – Health and Welfare Benefits Program – Information from and Liability of Health Insurance Carriers
4	FOR the purpose of requiring certain health insurance carriers to provide certain
5	information in a certain manner to the Department of Budget and Management,
6	at the request of the Department, about individuals who are eligible for benefits
7	under the State Employee and Retiree Health and Welfare Benefits Program or
8	are Program recipients; requiring certain health insurance carriers to accept the
9	Program's right of recovery and the assignment to the Program of certain rights
10	under certain circumstances; prohibiting certain health insurance carriers from
11	denying or otherwise affecting a health insurance policy or contract due to the
12	eligibility of an individual for Program benefits or receipt by an individual of
13	benefits under the Program; defining a certain term; and generally relating to
14	health insurance carriers and the State Employee and Retiree Health and
15	Welfare Benefits Program.
16	BY adding to
17	Article – Health – General
18	Section 19–706(ppp)
19	Annotated Code of Maryland
20	(2005 Replacement Volume and 2007 Supplement)
21	BY adding to
22	Article – State Personnel and Pensions
23	Section 2–517

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

(2004 Replacement Volume and 2007 Supplement)

MARYLAND, That the Laws of Maryland read as follows:

[Brackets] indicate matter deleted from existing law.

Annotated Code of Maryland



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## Article - Health - General

- 2 19–706.
- 3 (PPP) THE PROVISIONS OF § 2–517 OF THE STATE PERSONNEL AND 4 PENSIONS ARTICLE APPLY TO HEALTH MAINTENANCE ORGANIZATIONS.
- 5 Article State Personnel and Pensions
- 6 **2–517.**
- 7 (A) IN THIS SECTION, "CARRIER" MEANS:
- 8 (1) A HEALTH INSURER;
- 9 (2) A NONPROFIT HEALTH SERVICE PLAN;
- 10 (3) A HEALTH MAINTENANCE ORGANIZATION; AND
- 11 (4) A DENTAL PLAN ORGANIZATION.
- 12 (B) (1) A CARRIER SHALL PROVIDE, AT THE REQUEST OF THE
- 13 DEPARTMENT, INFORMATION ABOUT INDIVIDUALS WHO ARE ELIGIBLE FOR
- 14 BENEFITS UNDER THE PROGRAM OR ARE PROGRAM RECIPIENTS SO THAT THE
- 15 DEPARTMENT MAY DETERMINE WHETHER THE INDIVIDUAL IS RECEIVING
- 16 HEALTH CARE COVERAGE FROM THE CARRIER AND THE NATURE OF THAT
- 17 COVERAGE.
- 18 (2) A CARRIER SHALL PROVIDE THE INFORMATION REQUIRED
- 19 UNDER THIS SUBSECTION IN A MANNER PRESCRIBED BY THE DEPARTMENT.
- 20 (C) A CARRIER SHALL ACCEPT THE PROGRAM'S RIGHT OF RECOVERY
- 21 AND THE ASSIGNMENT TO THE PROGRAM OF ANY RIGHT OF AN INDIVIDUAL OR
- 22 OTHER ENTITY TO PAYMENT FROM THE CARRIER FOR AN ITEM OR SERVICE FOR
- 23 WHICH PAYMENT HAS BEEN MADE UNDER THE PROGRAM IF THE CARRIER HAS A
- 24 LEGAL OBLIGATION TO MAKE PAYMENT FOR THE ITEM OR SERVICE.
- 25 (D) A CARRIER MAY NOT REJECT, DENY, LIMIT, CANCEL, REFUSE TO
- 26 RENEW, INCREASE THE RATES OF, AFFECT THE TERMS OR CONDITIONS OF, OR
- 27 OTHERWISE AFFECT A HEALTH INSURANCE POLICY OR CONTRACT FOR A
- 28 REASON BASED WHOLLY OR PARTLY ON:
- 29 (1) THE ELIGIBILITY OF AN INDIVIDUAL TO RECEIVE BENEFITS
- 30 UNDER THE PROGRAM; OR

- 1 (2) THE RECEIPT BY AN INDIVIDUAL OF BENEFITS UNDER THE 2 PROGRAM.
- SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect 4  $\,$  June 1, 2008.