

SENATE BILL 469

C3

8lr2535
CF 8lr2866

By: **Senator Della**

Introduced and read first time: February 1, 2008

Assigned to: Finance

A BILL ENTITLED

1 AN ACT concerning

2 **Health Insurance – Special Services, Procedures, or Reports –**
3 **Reimbursement**

4 FOR the purpose of prohibiting certain carriers from denying reimbursement for or
5 bundling into another procedure code certain services, procedures, or reports
6 under certain circumstances; requiring certain carriers to pay certain claims in
7 accordance with certain provisions of law; providing that certain provisions of
8 law are applicable to health maintenance organizations; defining certain terms;
9 and generally relating to reimbursement for services, procedures, or reports by
10 health insurance carriers.

11 BY adding to
12 Article – Health – General
13 Section 19–706(ppp)
14 Annotated Code of Maryland
15 (2005 Replacement Volume and 2007 Supplement)

16 BY adding to
17 Article – Insurance
18 Section 15–1009.1
19 Annotated Code of Maryland
20 (2006 Replacement Volume and 2007 Supplement)

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

23 **Article – Health – General**

24 19–706.

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 (PPP)THE PROVISIONS OF § 15-1009.1 OF THE INSURANCE ARTICLE
2 APPLY TO HEALTH MAINTENANCE ORGANIZATIONS.

3 Article – Insurance

4 15-1009.1.

5 (A) (1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE
6 MEANINGS INDICATED.

7 (2) “CARRIER” MEANS:

8 (I) AN INSURER;

9 (II) A NONPROFIT HEALTH SERVICE PLAN;

10 (III) A HEALTH MAINTENANCE ORGANIZATION;

11 (IV) A DENTAL PLAN ORGANIZATION; OR

12 (V) ANY OTHER PERSON THAT PROVIDES HEALTH BENEFIT
13 PLANS SUBJECT TO REGULATION BY THE STATE.

14 (3) “SPECIAL SERVICE, PROCEDURE, OR REPORT” MEANS ANY
15 SERVICE, PROCEDURE, OR REPORT FOR WHICH A SPECIAL SERVICES,
16 PROCEDURES, OR REPORTS CODE EXISTS IN THE CURRENT PROCEDURAL AND
17 TERMINOLOGY (CPT) CODE BOOK, AS ADOPTED BY THE AMERICAN MEDICAL
18 ASSOCIATION.

19 (B) A CARRIER MAY NOT DENY REIMBURSEMENT FOR OR BUNDLE INTO
20 ANOTHER PROCEDURE CODE ANY SPECIAL SERVICE, PROCEDURE, OR REPORT
21 IF THE SPECIAL SERVICE, PROCEDURE, OR REPORT IS PROVIDED BY A HEALTH
22 PROVIDER:

23 (1) IN CONJUNCTION WITH OR RELATED TO THE PROVISION OF A
24 COVERED HEALTH CARE SERVICE TO AN ENROLLEE OR SUBSCRIBER OF THE
25 CARRIER; OR

26 (2) AT THE REQUEST OF THE CARRIER.

27 (C) A CARRIER SHALL PAY A CLAIM FOR A SPECIAL SERVICE,
28 PROCEDURE, OR REPORT IN ACCORDANCE WITH §§ 15-1005 AND 15-1008 OF
29 THIS SUBTITLE.

1 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
2 July 1, 2008.