C3

8lr2039 CF HB 594

By: Senators Astle, Della, and Klausmeier

Introduced and read first time: February 1, 2008

Assigned to: Finance

	A BILL ENTITLED
1	AN ACT concerning
$\frac{2}{3}$	Health Insurance – Carrier Credentialing – Reimbursement of Providers of Health Care Services
4 5 6 7	FOR the purpose of requiring certain carriers to reimburse providers for certain health care services provided to enrollees on or after a certain date under certain circumstances; and generally relating to credentialing and reimbursement of providers of health care services.
8 9 10 11 12	BY repealing and reenacting, with amendments, Article – Insurance Section 15–112(d) Annotated Code of Maryland (2006 Replacement Volume and 2007 Supplement)
13 14	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:
15	Article - Insurance
16	15–112.
17 18	(d) (1) A provider that seeks to participate on a provider panel of a carrier shall submit an application to the carrier.
19 20 21	(2) (i) Subject to paragraph (3) of this subsection, the carrier, after reviewing the application, shall accept or reject the provider for participation on the carrier's provider panel.
22 23 24	(ii) If the carrier rejects the provider for participation on the carrier's provider panel, the carrier shall send to the provider at the address listed in the application written notice of the rejection.



- 1 (3) (i) Except as provided in paragraph (4) of this subsection, 2 within 30 days after the date a carrier receives a completed application, the carrier 3 shall send to the provider at the address listed in the application written notice of:
- 4 1. the carrier's intent to continue to process the provider's application to obtain necessary credentialing information; or
- 6 2. the carrier's rejection of the provider for participation 7 on the carrier's provider panel.
- 8 (ii) The failure of a carrier to provide the notice required under 9 subparagraph (i) of this paragraph is a violation of this article and the carrier is 10 subject to the penalties provided by § 4–113(d) of this article.
- 11 (iii) Except as provided in subsection (p) of this section, if, under 12 subparagraph (i)1 of this paragraph, a carrier provides notice to the provider of its 13 intent to continue to process the provider's application to obtain necessary 14 credentialing information, the carrier, within 120 days after the date the notice is 15 provided, shall:
- 16 accept or reject the provider for participation on the carrier's provider panel; and
- 18 2. send written notice of the acceptance or rejection to the provider at the address listed in the application.
- 20 (iv) The failure of a carrier to provide the notice required under subparagraph (iii)2 of this paragraph is a violation of this article and the carrier is subject to the provisions of and penalties provided by §§ 4–113 and 4–114 of this article.
- 24 (4) (i) A carrier that receives an incomplete application shall 25 return the application to the provider at the address listed in the application within 10 26 days after the date the application is received.
- 27 (ii) The carrier shall indicate to the provider what information 28 is needed to make the application complete.
- 29 (iii) The provider may return the completed application to the 30 carrier.
- 31 (iv) After the carrier receives the completed application, the 32 carrier is subject to the time periods established in paragraph (3) of this subsection.
- 33 (5) A carrier may charge a reasonable fee for an application submitted 34 to the carrier under this section.

1	(6) If a carrier accepts a provider for participation on
2	THE CARRIER'S PROVIDER PANEL, THE CARRIER SHALL REIMBURSE THE
3	PROVIDER FOR ANY COVERED HEALTH CARE SERVICES THAT THE PROVIDER
4	PROVIDES TO ENROLLEES OF THE CARRIER ON OR AFTER THE DATE THAT THE
5	PROVIDER'S COMPLETED APPLICATION WAS SUBMITTED TO THE CARRIER.

6 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect 7 October 1, 2008.