SENATE BILL 130

C3 9lr0474

By: Senator Forehand

Introduced and read first time: January 16, 2009

Assigned to: Finance

A BILL ENTITLED

1 AN ACT concerning

Health Insurance	- Use of Pre	escription In	formation
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- FOR the purpose of providing that certain insurers, nonprofit health service plans, and health maintenance organizations may only exhibit, discuss, or reveal any part of the contents of a prescription to certain persons; prohibiting certain carriers from denying, canceling, or refusing to renew an individual health policy solely because of the prescription drug history of an insured; and generally relating to the use of prescription information by health insurers.
- 9 BY adding to

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- 10 Article Health General
- 11 Section 19–706(ttt)
- 12 Annotated Code of Maryland
- 13 (2005 Replacement Volume and 2008 Supplement)
- 14 BY adding to
- 15 Article Insurance
- 16 Section 15–132 and 15–509
- 17 Annotated Code of Maryland
- 18 (2006 Replacement Volume and 2008 Supplement)
- 19 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
- 20 MARYLAND, That the Laws of Maryland read as follows:
- 21 Article Health General
- 22 19–706.
- 23 (TTT) THE PROVISIONS OF §§ 15–132 AND 15–509 OF THE INSURANCE
- 24 ARTICLE APPLY TO HEALTH MAINTENANCE ORGANIZATIONS.



1 Article – Insurance

- 2 **15–132.**
- 3 (A) THIS SECTION APPLIES TO:
- 4 (1) INSURERS AND NONPROFIT HEALTH SERVICE PLANS THAT
- 5 PROVIDE, DIRECTLY OR THROUGH A PHARMACY BENEFITS MANAGER,
- 6 COVERAGE FOR PRESCRIPTION DRUGS UNDER HEALTH INSURANCE POLICIES
- 7 OR CONTRACTS THAT ARE ISSUED OR DELIVERED IN THE STATE; AND
- 8 (2) HEALTH MAINTENANCE ORGANIZATIONS THAT PROVIDE,
- 9 DIRECTLY OR THROUGH A PHARMACY BENEFITS MANAGER, COVERAGE FOR
- 10 PRESCRIPTION DRUGS UNDER CONTRACTS THAT ARE ISSUED OR DELIVERED IN
- 11 THE STATE.
- 12 (B) AN ENTITY SUBJECT TO THIS SECTION AND ITS EMPLOYEES AND
- 13 CONTRACTORS MAY ONLY EXHIBIT, DISCUSS, OR REVEAL ANY PART OF THE
- 14 CONTENTS OF A PRESCRIPTION WITH:
- 15 (1) THE PATIENT OR THE AUTHORIZED REPRESENTATIVE OF THE
- 16 PATIENT;
- 17 (2) THE PRESCRIBER OR OTHER LICENSED HEALTH CARE
- 18 PROVIDER PROVIDING CARE FOR THE PATIENT:
- 19 (3) A LICENSED PHARMACIST SERVING THE PATIENT; OR
- 20 (4) A PERSON AUTHORIZED BY LAW TO RECEIVE THE
- 21 **INFORMATION.**
- 22 (C) THIS SECTION DOES NOT PROHIBIT:
- 23 (1) ANY LEGITIMATE PEER REVIEW CONDUCTED BY A HOSPITAL,
- 24 PHYSICIAN GROUP PRACTICE, HEALTH MAINTENANCE ORGANIZATION, OR
- 25 OTHER ENTITY ENGAGED IN THE REVIEW OF ONE OF ITS LICENSED OR
- 26 CREDENTIALED HEALTH CARE PROVIDERS; OR
- 27 (2) THE INTERNAL REVIEW OF PRESCRIBING INFORMATION BY AN
- 28 ENTITY SUBJECT TO THIS SECTION FOR QUALITY ASSURANCE OR PAYMENT
- 29 **PURPOSES.**
- 30 **15–509.**

- 1 (a) In this section, "carrier" has the meaning stated in $\$ 2 15–1301 of this title.
- 3 (B) A CARRIER MAY NOT DENY, CANCEL, OR REFUSE TO RENEW AN 4 INDIVIDUAL HEALTH INSURANCE POLICY SOLELY BECAUSE OF THE 5 PRESCRIPTION DRUG HISTORY OF AN INSURED.
- 6 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect 7 October 1, 2009.