HOUSE BILL 878

CF SB 313

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By: Delegate Mizeur Introduced and read first time: February 10, 2010 Assigned to: Health and Government Operations

Committee Report: Favorable with amendments House action: Adopted Read second time: March 24, 2010

CHAPTER _____

1 AN ACT concerning

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Health Insurance - Annual Preventive Care

3 FOR the purpose of prohibiting certain insurers, nonprofit health service plans, and 4 health maintenance organizations that provide covered benefits for annual $\mathbf{5}$ preventive care from denying coverage solely because a certain number of days 6 has not elapsed since the previous annual preventive care occurred; requiring 7the certain insurers, nonprofit health service plans, and health maintenance 8 organizations to provide coverage for the certain types of annual preventive care 9 if certain conditions are met; prohibiting certain provisions from being 10 construed to require coverage for a certain service; making certain requirements applicable to health maintenance organizations; defining a certain term; 11 12providing for the application of this Act; and generally relating to health 13 insurance coverage for annual preventive care.

- 14BY adding to
- Article Insurance 15
- 16 Section 15–134
- 17Annotated Code of Maryland
- 18 (2006 Replacement Volume and 2009 Supplement)
- 19BY adding to
- 20Article – Health – General
- 21Section 19–706(cccc)
- 22Annotated Code of Maryland
- 23(2009 Replacement Volume)

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

Underlining indicates amendments to bill.

Strike out indicates matter stricken from the bill by amendment or deleted from the law by amendment.



1 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF $\mathbf{2}$ MARYLAND, That the Laws of Maryland read as follows: 3 **Article – Insurance** 15 - 134.4 (1) IN THIS SECTION, "ANNUAL PREVENTIVE CARE" MEANS AN $\mathbf{5}$ (A) 6 ANNUAL PREVENTIVE VISIT, SCREENING, OR EXAMINATION THAT IS A COVERED 7 BENEFIT UNDER A POLICY OR CONTRACT ISSUED OR DELIVERED BY AN ENTITY 8 SUBJECT TO THIS SECTION. 9 (2) "ANNUAL PREVENTIVE CARE" INCLUDES, IF THE SERVICE IS A 10 **COVERED BENEFIT:** 11 (I) AN ANNUAL CHILD WELLNESS VISIT; **(II)** 12A ROUTINE GYNECOLOGICAL VISIT; AND 13 (III) A SCREENING TEST OR EXAMINATION FOR COLORECTAL 14CANCER, CHLAMYDIA, HUMAN PAPILLOMAVIRUS, PROSTATE CANCER, OR 15**BREAST CANCER; AND** 16 (IV) AN ANNUAL VISION VISIT THAT INCLUDES A VISION 17**EXAMINATION.** 18 **(B)** THIS SECTION APPLIES TO: 19 (1) INSURERS AND NONPROFIT HEALTH SERVICE PLANS THAT 20PROVIDE HOSPITAL, MEDICAL, OR SURGICAL BENEFITS TO INDIVIDUALS OR 21GROUPS ON AN EXPENSE-INCURRED BASIS UNDER HEALTH INSURANCE 22POLICIES OR CONTRACTS THAT ARE ISSUED OR DELIVERED IN THE STATE; AND 23(2) HEALTH MAINTENANCE ORGANIZATIONS THAT PROVIDE 24HOSPITAL, MEDICAL, OR SURGICAL BENEFITS TO INDIVIDUALS OR GROUPS 25UNDER CONTRACTS THAT ARE ISSUED OR DELIVERED IN THE STATE. 26(C) AN ENTITY SUBJECT TO THIS SECTION THAT PROVIDES COVERED 27**BENEFITS FOR ANNUAL PREVENTIVE CARE**[‡] 28(1) **MAY NOT DENY COVERAGE FOR THE ANNUAL PREVENTIVE** 29**CARE SOLELY BECAUSE 365 DAYS HAVE NOT YET ELAPSED SINCE THE PREVIOUS**

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30 ANNUAL PREVENTIVE CARE OCCURRED; AND

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1	(2) SHALL PROVIDE COVERAGE FOR THE ANNUAL PREVENTIVE
2	CARE IF:
3	(+) (1) THE ANNUAL PREVENTIVE CARE IS PROVIDED NO
4	MORE THAN 45 DAYS BEFORE THE ANNIVERSARY DATE FOR THE ANNUAL
5	PREVENTIVE CARE ONCE AT ANY TIME DURING THE PLAN YEAR ESTABLISHED IN
6	THE POLICY OR CONTRACT; AND
7 8	(H) (2) ANY OTHER REQUIREMENTS FOR COVERAGE OF THE ANNUAL PREVENTIVE CARE ARE MET.
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9	(D) THIS SECTION MAY NOT BE CONSTRUED TO REQUIRE COVERAGE
10	FOR A SERVICE NOT OTHERWISE REQUIRED BY LAW.
11	Article – Health – General
12	19–706.
13	(CCCC) THE REQUIREMENTS OF § 15-134 OF THE INSURANCE
14	ARTICLE APPLY TO HEALTH MAINTENANCE ORGANIZATIONS.
15	SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall apply to all
16	policies, contracts, and health benefit plans issued, delivered, or renewed in the State
17	on or after October 1, 2010, or, for policies, contracts, and health benefit plans in effect
18	in the State on October 1, 2010, but not subject to renewal before October 1, 2011, no
19	<u>later than October 1, 2011.</u>

Approved:

Governor.

Speaker of the House of Delegates.

President of the Senate.