SENATE BILL 704

C3, C4

0lr1521 CF HB 1073

By: Senators Garagiola and Frosh, Frosh, Exum, Kelley, Middleton, and Pugh Introduced and read first time: February 10, 2010 Assigned to: Finance

Committee Report: Favorable with amendments Senate action: Adopted with floor amendments Read second time: March 25, 2010

CHAPTER _____

1 AN ACT concerning

Insurance - Coordination of Benefits - Health Insurance and Personal Injury Protection

4 FOR the purpose of providing that certain health maintenance organization contracts. $\mathbf{5}$ health insurance policies, and policies of nonprofit health service plans are 6 subject to certain provisions of law relating to coordination of benefits with 7personal injury protection coverage under motor vehicle liability insurance 8 policies; prohibiting the contracts and policies from containing authorizing 9 certain health maintenance organization contracts, health insurance policies or 10 contracts, and policies or contracts of nonprofit health service plans to contain a provision that requires certain personal injury protection benefits to be paid 11 12before benefits under the contracts and policies under certain circumstances; 13 prohibiting a motor vehicle liability insurer from making a payment to a health 14maintenance organization, an insurer, or a nonprofit health service plan unless a certain authorization is provided to the motor vehicle liability insurer; 15defining the term "insured" or "named insured" for purposes of certain 1617 provisions of law relating to personal injury protection coverage to include an individual entitled to hospital, medical, or surgical benefits under certain health 18 19insurance policies or contracts; providing for the application of this Act; and 20generally relating to coordination of health insurance and personal injury 21protection benefits.

- 22 BY repealing and reenacting, without amendments,
- 23 Article Health General
- 24 Section 19–713.1(d)

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.



$\frac{1}{2}$	Annotated Code of Maryland (2009 Replacement Volume)		
${3 \atop {4} \atop {5} \atop {6} \atop {7}}$	BY repealing and reenacting, with amendments, Article – Health – General Section 19–713.1(e) Annotated Code of Maryland (2009 Replacement Volume)		
8 9 10 11 12	BY repealing and reenacting, without amendments, Article – Insurance Section 15–104(b) Annotated Code of Maryland (2006 Replacement Volume and 2009 Supplement)		
$13 \\ 14 \\ 15 \\ 16 \\ 17$	BY adding to Article – Insurance Section 15–104(d) Annotated Code of Maryland (2006 Replacement Volume and 2009 Supplement)		
18 19 20 21 22	BY repealing and reenacting, with amendments, Article – Insurance Section 19–507 Annotated Code of Maryland (2006 Replacement Volume and 2009 Supplement)		
$\begin{array}{c} 23\\ 24 \end{array}$	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:		
25	Article – Health – General		
26	19–713.1.		
27 28 29 30	(d) Notwithstanding § $19-701(g)(3)$ of this subtitle, a contract between a health maintenance organization and its subscribers or a group of subscribers may contain a provision allowing the health maintenance organization to be subrogated to a cause of action that a subscriber has against another person:		
31 32 33	(1) To the extent that any actual payments made by the health maintenance organization result from the occurrence that gave rise to the cause of action; or		
$\frac{34}{35}$	(2) For a nonprofit health maintenance organization that exclusively contracts with a group of physicians to provide or to arrange for the provision of health		

care services for its enrollees, for any service provided by the health maintenance

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organization as a result of the occurrence that gave rise to the cause of action, per the 1 $\mathbf{2}$ fee schedule established by the nonprofit health maintenance organization. (1) 3 Subsection (d) of this section does not allow a contract between a (e) 4 health maintenance organization and its subscribers or a group of subscribers to $\mathbf{5}$ contain a provision allowing the health maintenance organization to recover any 6 payments made to a subscriber under [a personal injury protection] THE PERSONAL 7INJURY PROTECTION COVERAGE OF A MOTOR VEHICLE LIABILITY INSURANCE 8 policy. 9 (2) A CONTRACT BETWEEN A HEALTH MAINTENANCE 10 ORGANIZATION AND ITS SUBSCRIBERS OR A GROUP OF SUBSCRIBERS: 11 (I) IS SUBJECT TO THE PROVISIONS OF § 19-507(C) OF THE 12**INSURANCE ARTICLE; AND** 13(III) MAY NOT CONTAIN A PROVISION THAT REQUIRES 14PERSONAL INJURY PROTECTION BENEFITS UNDER A MOTOR VEHICLE LIABILITY INSURANCE POLICY TO BE PAID BEFORE BENEFITS UNDER THE CONTRACT. 1516 (2) SUBJECT TO § 19–507(C)(3) OF THE INSURANCE ARTICLE, A 17CONTRACT BETWEEN A HEALTH MAINTENANCE ORGANIZATION AND ITS 18 SUBSCRIBERS OR A GROUP OF SUBSCRIBERS MAY CONTAIN A PROVISION THAT 19**REQUIRES PERSONAL INJURY PROTECTION BENEFITS UNDER A MOTOR** 20VEHICLE LIABILITY INSURANCE POLICY TO BE PAID BEFORE BENEFITS UNDER 21THE CONTRACT. 22Article – Insurance 2315 - 104.In accordance with regulations that the Commissioner adopts, the 24(b) 25Commissioner shall allow health insurance policies and policies of nonprofit health 26service plans to contain nonduplication provisions or provisions to coordinate coverage 27with: 28other health insurance policies, including commercial individual, (1)29group, and blanket policies and policies of nonprofit health service plans; 30 subscriber contracts that are issued by health maintenance (2)31organizations; and 32other established programs under which the insured may make a (3)33 claim.

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$\frac{1}{2}$	(d) Health insurance policies and policies of nonprofit health service plans:			
$\frac{3}{4}$	(1) ARE SUBJECT TO THE PROVISIONS OF § 19–507(C) OF THIS ARTICLE; AND			
5	(2) MAY NOT CONTAIN A PROVISION THAT REQUIRES PERSONAL			
6	INJURY PROTECTION BENEFITS UNDER A MOTOR VEHICLE LIABILITY			
7	INSURANCE POLICY TO BE PAID BEFORE BENEFITS UNDER THE POLICIES.			
8	(D) SUBJECT TO § 19–507(C)(3) OF THIS ARTICLE, A POLICY OR			
9	CONTRACT BETWEEN AN INSURER OR A NONPROFIT HEALTH SERVICE PLAN AND			
10	ITS INSURERS INSUREDS OR SUBSCRIBERS OR A GROUP OF INSUREDS			
11	OR SUBSCRIBERS MAY CONTAIN A PROVISION THAT REQUIRES PERSONAL			
12	INJURY PROTECTION BENEFITS UNDER A MOTOR VEHICLE LIABILITY			
13	INSURANCE POLICY TO BE PAID BEFORE BENEFITS UNDER THE POLICY OR			
14	CONTRACT.			
15	19–507.			
16	(A) IN THIS SECTION, "INSURED" OR "NAMED INSURED" INCLUDES AN			
17	INDIVIDUAL ENTITLED TO HOSPITAL, MEDICAL, OR SURGICAL BENEFITS UNDER			
18	A HEALTH INSURANCE POLICY OR CONTRACT ISSUED BY:			
19	(1) AN INSURER;			
20	(2) A NONPROFIT HEALTH SERVICE PLAN; OR			
21	(3) A HEALTH MAINTENANCE ORGANIZATION.			
$\begin{array}{c} 22\\ 23 \end{array}$	[(a)] (B) The benefits described in § 19–505 of this subtitle shall be payable without regard to:			
$\begin{array}{c} 24 \\ 25 \end{array}$	(1) the fault or nonfault of the named insured or the recipient of benefits in causing or contributing to the motor vehicle accident; and			
$\begin{array}{c} 26 \\ 27 \end{array}$	(2) any collateral source of medical, hospital, or wage continuation benefits.			
28 29 30 31	[(b)] (C) (1) Subject to paragraph <u>PARAGRAPHS</u> (2) <u>AND (3)</u> of this subsection, if the insured has both coverage for the benefits described in § 19–505 of this subtitle and a collateral source of medical, hospital, or wage continuation benefits, the insurer or insurers may coordinate the policies to provide for nonduplication of			

32 benefits, subject to appropriate reductions in premiums for one or both of the policies

33 approved by the Commissioner.

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2	(i)	elect to coordinate the policies by indicating in writing which
3	policy is to be the primary	y policy; or

The named insured may:

4 (ii) reject the coordination of policies and nonduplication of 5 benefits.

6 (3) THE MOTOR VEHICLE LIABILITY INSURER MAY NOT MAKE A 7 PAYMENT TO A HEALTH MAINTENANCE ORGANIZATION, AN INSURER, OR A 8 NONPROFIT HEALTH SERVICE PLAN UNLESS THE HEALTH MAINTENANCE 9 ORGANIZATION, INSURER, OR NONPROFIT HEALTH SERVICE PLAN PROVIDES 10 THE MOTOR VEHICLE LIABILITY INSURER WRITTEN AUTHORIZATION FOR THE 11 PAYMENT FROM THE INSURED.

12 [(c)] (D) An insurer that issues a policy that contains the coverage 13 described in § 19–505 of this subtitle may not impose a surcharge or retier the policy 14 for a claim or payment made under that coverage and, at the time the policy is issued, 15 shall notify the policyholder in writing that a surcharge may not be imposed and the 16 policy may not be retiered for a claim or payment made under that coverage.

17 [(d)] (E) An insurer that provides the benefits described in § 19–505 of this 18 subtitle does not have a right of subrogation and does not have a claim against any 19 other person or insurer to recover any benefits paid because of the alleged fault of the 20 other person in causing or contributing to a motor vehicle accident.

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall apply to all
policies, contracts, and health benefit plans issued, delivered, or renewed in the State
on or after October 1, 2010.

24 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect 25 October 1, 2010.

Approved:

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(2)

Governor.

President of the Senate.

Speaker of the House of Delegates.