

# HOUSE BILL 974

J5

(5lr2569)

## ENROLLED BILL

— Health and Government Operations/Finance —

Introduced by **Delegates Shetty, Bagnall, Cullison, D. Jones, Kaufman, Pena-Melnyk, and ~~Solomon~~ Solomon, Alston, Bhandari, Guzzone, Hill, S. Johnson, Kaiser, Kerr, Lopez, Martinez, Rosenberg, Ross, Taveras, White Holland, Woods, and Woorman**

Read and Examined by Proofreaders:

\_\_\_\_\_  
Proofreader.

\_\_\_\_\_  
Proofreader.

Sealed with the Great Seal and presented to the Governor, for his approval this \_\_\_\_\_ day of \_\_\_\_\_ at \_\_\_\_\_ o'clock, \_\_\_\_\_ M.

\_\_\_\_\_  
Speaker.

### CHAPTER \_\_\_\_\_

1 AN ACT concerning

2 **Health Insurance – Preventive Services – High Deductible Health Plans and**  
3 **Enforcement Authority**

4 FOR the purpose of *clarifying the application of certain health insurance preventive services*  
5 *coverage requirements to certain high deductible health plans*; requiring the  
6 Maryland Insurance Commissioner to enforce certain provisions of law related to  
7 preventive services consistent with ~~federal rules and guidance~~ certain  
8 recommendations and guidelines set by certain federal agencies in effect on a certain  
9 date; and generally relating to health insurance preventive services.

10 BY repealing and reenacting, with amendments,  
11 Article – Insurance

---

#### 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.

*Italics indicate opposite chamber/conference committee amendments.*



1 Section 15–1A–10  
2 Annotated Code of Maryland  
3 (2017 Replacement Volume and 2024 Supplement)

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

6 **Article – Insurance**

7 15–1A–10.

8 (a) [Except] **SUBJECT TO SUBSECTION ~~(D)~~ (E) OF THIS SECTION AND EXCEPT**  
9 as provided in subsections (b) ~~and~~, (c), **AND (D)** of this section, a carrier shall provide  
10 coverage for and may not impose any cost-sharing requirements, including copayments,  
11 coinsurance, or deductibles for:

12 (1) evidence-based items or services that have in effect a rating of A or B  
13 in the [current] ~~MOST-RECENT~~ recommendations of the United States Preventive Services  
14 Task Force with respect to the individual involved;

15 (2) immunizations for routine use in children, adolescents, and adults that  
16 have in effect a recommendation from the Advisory Committee on Immunization Practices  
17 of the Centers for Disease Control and Prevention with respect to the individual involved,  
18 if the recommendation:

19 (i) has been adopted by the Director of the Centers for Disease  
20 Control and Prevention; and

21 (ii) is listed on the Immunization Schedules of the Centers for  
22 Disease Control and Prevention for routine use;

23 (3) with respect to infants, children, and adolescents, evidence-informed  
24 preventive care and screenings provided for in comprehensive guidelines supported by the  
25 Health Resources and Services Administration; and

26 (4) with respect to women:

27 (i) to the extent not provided in item (ii) of this item, preventive care  
28 and screenings as provided for in comprehensive guidelines supported by the Health  
29 Resources and Services Administration for purposes of § 2713(a)(4) of the federal Public  
30 Health Service Act; and

31 (ii) subject to § 15–826(c) of this title, contraceptive coverage as  
32 provided for in comprehensive guidelines supported by the Health Resources and Services  
33 Administration for purposes of § 2713(a)(4) of the federal Public Health Service Act.

(b) To the extent that cost-sharing is otherwise allowed under federal or State law, a health benefit plan that uses a network of providers may impose cost-sharing requirements on the coverage described in subsection (a) of this section for items or services delivered by an out-of-network provider.

**(C) (1) IN THIS SUBSECTION, “HIGH DEDUCTIBLE HEALTH PLAN” HAS THE MEANING STATED IN 26 U.S.C. § 223(C)(2).**

**(2) IF AN INSURED OR ENROLLEE IS COVERED UNDER A HIGH DEDUCTIBLE HEALTH PLAN, A CARRIER MAY APPLY THE DEDUCTIBLE REQUIREMENT OF THE HIGH DEDUCTIBLE HEALTH PLAN TO THE COVERAGE REQUIRED UNDER SUBSECTION (A) OF THIS SECTION, UNLESS THE COMMISSIONER DETERMINES THAT THE COVERAGE IS INCLUDED IN THE SAFE HARBOR PROVISIONS FOR PREVENTIVE CARE UNDER 26 U.S.C. § 223(C)(2)(C).**

~~(D)~~ (D) This section may not be construed to prohibit a carrier from providing coverage for services in addition to those recommended by the United States Preventive Services Task Force or to deny coverage for services that are not recommended by the Task Force.

~~(E)~~ (E) ~~(1)~~ ~~THE~~ SUBJECT TO § 15-826(C) OF THIS TITLE:

**(1) THE COMMISSIONER SHALL ENFORCE THIS SECTION CONSISTENT WITH ~~FEDERAL RULES AND GUIDANCE~~ THE RECOMMENDATIONS AND GUIDELINES IN EFFECT ON DECEMBER 31, 2024, SET BY THE UNITED STATES PREVENTIVE SERVICES TASK FORCE, THE ADVISORY COMMITTEE ON IMMUNIZATION PRACTICES OF THE CENTERS FOR DISEASE CONTROL AND PREVENTION, OR THE HEALTH RESOURCES AND SERVICES ADMINISTRATION, AND RELATED FEDERAL RULES OR GUIDANCE; AND**

**(2) ~~THE~~ THE COMMISSIONER MAY ADOPT REGULATIONS:**

**(I) NECESSARY TO CARRY OUT THIS SECTION, CONSISTENT WITH FEDERAL STATUTES, RULES, AND GUIDANCE IN EFFECT:**

**1. ON DECEMBER 31, 2024; OR**

**2. AT A LATER DATE THAT ENHANCE THE SCOPE OF PREVENTIVE SERVICES TO THE BENEFIT OF CONSUMERS IN THE STATE; ~~AND~~ OR**

**(II) ~~RELATED TO~~ TO REQUIRE CARRIERS TO PROVIDE COVERAGE WITHOUT IMPOSING COST-SHARING REQUIREMENTS, INCLUDING COPAYMENTS, COINSURANCE, OR DEDUCTIBLES, FOR ANY FUTURE PREVENTIVE SERVICES RECOMMENDATIONS AND GUIDELINES ISSUED AFTER DECEMBER 31,**

1 **2024, BY THE UNITED STATES PREVENTIVE SERVICES TASK FORCE, THE ADVISORY**  
2 **COMMITTEE ON IMMUNIZATION PRACTICES OF THE CENTERS FOR DISEASE**  
3 **CONTROL AND PREVENTION, OR THE HEALTH RESOURCES AND SERVICES**  
4 **ADMINISTRATION, ~~OR~~ AND RELATED FEDERAL RULES OR GUIDANCE.**

5 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect June  
6 1, 2025.

Approved:

\_\_\_\_\_  
Governor.

\_\_\_\_\_  
Speaker of the House of Delegates.

\_\_\_\_\_  
President of the Senate.