Chapter 745

# (House Bill 974)

## AN ACT concerning

# Health Insurance - Preventive Services - <u>High Deductible Health Plans and</u> Enforcement Authority

FOR the purpose of <u>clarifying the application of certain health insurance preventive services</u> <u>coverage requirements to certain high deductible health plans;</u> requiring the Maryland Insurance Commissioner to enforce certain provisions of law related to preventive services consistent with <u>federal rules and guidance</u> <u>certain recommendations and guidelines set by certain federal agencies</u> in effect on a certain date; and generally relating to health insurance preventive services.

BY repealing and reenacting, with amendments,

Article – Insurance

Section 15-1A-10

Annotated Code of Maryland

(2017 Replacement Volume and 2024 Supplement)

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

#### Article - Insurance

15-1A-10.

- (a) [Except] SUBJECT TO SUBSECTION (D) (E) OF THIS SECTION AND EXCEPT as provided in subsections (b) and, (c), AND (D) of this section, a carrier shall provide coverage for and may not impose any cost—sharing requirements, including copayments, coinsurance, or deductibles for:
- (1) evidence—based items or services that have in effect a rating of A or B in the [current] MOST RECENT recommendations of the United States Preventive Services Task Force with respect to the individual involved;
- (2) immunizations for routine use in children, adolescents, and adults that have in effect a recommendation from the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention with respect to the individual involved, if the recommendation:
- (i) has been adopted by the Director of the Centers for Disease Control and Prevention; and

- (ii) is listed on the Immunization Schedules of the Centers for Disease Control and Prevention for routine use;
- (3) with respect to infants, children, and adolescents, evidence—informed preventive care and screenings provided for in comprehensive guidelines supported by the Health Resources and Services Administration; and

#### (4) with respect to women:

- (i) to the extent not provided in item (ii) of this item, preventive care and screenings as provided for in comprehensive guidelines supported by the Health Resources and Services Administration for purposes of § 2713(a)(4) of the federal Public Health Service Act; and
- (ii) subject to § 15–826(c) of this title, contraceptive coverage as provided for in comprehensive guidelines supported by the Health Resources and Services 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).
- (e) (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.

### (D) (E) (E) 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, 2024, 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, OR THE HEALTH RESOURCES.

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

Approved by the Governor, May 20, 2025.