

(p) (1) Except as provided in paragraph (3) of this subsection, individual enrollees and subscribers of health maintenance organizations issued certificates of authority to operate in this State shall not be liable to any health care provider for any covered services provided to the enrollee or subscriber.

(2) (i) A health care provider or any representative of a health care provider may not collect or attempt to collect from any subscriber or enrollee any money owed to the health care provider by a health maintenance organization issued a certificate of authority to operate in this State.

(ii) A health care provider or any representative of a health care provider may not maintain any action against any subscriber or enrollee to collect or attempt to collect any money owed to the health care provider by a health maintenance organization issued a certificate of authority to operate in this State.

(3) Notwithstanding any other provision of this subsection, a health care provider or representative of a health care provider may collect or attempt to collect from a subscriber or enrollee:

(i) Any copayment or coinsurance sums owed by the subscriber or enrollee to a health maintenance organization issued a certificate of authority to operate in this State for covered services provided by the health care provider; [or]

~~(ii) ANY MEDICARE COPAYMENT OR DEDUCTIBLE OWED BY THE SUBSCRIBER OR ENROLLEE TO A HEALTH CARE PROVIDER OR A REPRESENTATIVE OF A HEALTH CARE PROVIDER FOR COVERED SERVICES PROVIDED BY THE HEALTH CARE PROVIDER WHEN MEDICARE IS THE PRIMARY INSURER AND A HEALTH MAINTENANCE ORGANIZATION IS THE SECONDARY INSURER; OR~~

(ii) IF MEDICARE IS THE PRIMARY INSURER AND A HEALTH MAINTENANCE ORGANIZATION IS THE SECONDARY INSURER, ANY AMOUNT UP TO THE MEDICARE APPROVED OR LIMITING AMOUNT, AS SPECIFIED UNDER THE SOCIAL SECURITY ACT, THAT IS NOT OWED TO THE HEALTH CARE PROVIDER BY MEDICARE OR THE HEALTH MAINTENANCE ORGANIZATION AFTER COORDINATION OF BENEFITS HAS BEEN COMPLETED, FOR MEDICARE COVERED SERVICES PROVIDED TO THE SUBSCRIBER OR ENROLLEE BY THE HEALTH CARE PROVIDER; OR

[(ii)](iii) Any payment or charges for services that are not covered services.

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2004.

May 26, 2004

The Honorable Michael E. Busch
Speaker of the House
State House
Annapolis, MD 21401

Dear Mr. Speaker: