

EITHER EMPLOYEES OR PARTNERS OF THE HEALTH MAINTENANCE ORGANIZATION; OR

(II) UNDER ARRANGEMENTS WITH ONE OR MORE GROUPS OF PHYSICIANS, WHO ARE ORGANIZED ON A GROUP PRACTICE OR INDIVIDUAL PRACTICE BASIS, UNDER WHICH EACH GROUP:

1. IS COMPENSATED FOR ITS SERVICES PRIMARILY ON THE BASIS OF AN AGGREGATE FIXED SUM OR ON A PER CAPITA BASIS; AND

2. IS PROVIDED WITH AN EFFECTIVE INCENTIVE TO AVOID UNNECESSARY INPATIENT USE, WHETHER THE INDIVIDUAL PHYSICIAN MEMBERS OF THE GROUP ARE PAID ON A FEE-FOR-SERVICE OR OTHER BASIS.

REVISOR'S NOTE: This subsection formerly appeared as Article 43, § 842(a), except the second clause of item (1) of that subsection.

In the introductory clause of this subsection, the former reference to "the District of Columbia" is deleted as unnecessary in light of the definition of "state".

The only other changes are in style.

Defined terms: "Commissioner" § 19-701  
"Department" § 1-101 "Physician" § 1-101  
"Includes"/"including" § 1-101 "State" § 1-101  
"Health care services" § 19-701  
"Member" § 19-701 "Subscriber" § 19-701  
"Person" § 1-101

(F) MEMBER.

"MEMBER" MEANS A PERSON WHO MAKES A CONTRACT OR ON WHOSE BEHALF A CONTRACT IS MADE WITH A HEALTH MAINTENANCE ORGANIZATION FOR HEALTH CARE SERVICES.

REVISOR'S NOTE: This subsection formerly appeared as Article 43, § 842(e).

The former reference to a member being referred to as an "enrollee" is deleted as unnecessary, since that term was not used in the former law. However, there is no intention to prohibit the use of the term by the deletion.

The only other changes are in style.

Defined terms: "Health care services" § 19-701  
"Health maintenance organization" § 19-701  
"Person" § 1-101