

~~(1) INSURERS AND NONPROFIT HEALTH SERVICE PLANS THAT PROVIDE HOSPITAL, MEDICAL, OR SURGICAL BENEFITS TO INDIVIDUALS OR GROUPS UNDER HEALTH INSURANCE POLICIES THAT ARE ISSUED OR DELIVERED IN THE STATE, AND~~

~~(2) HEALTH MAINTENANCE ORGANIZATIONS THAT PROVIDE HOSPITAL, MEDICAL, OR SURGICAL BENEFITS TO INDIVIDUALS OR GROUPS UNDER CONTRACTS THAT ARE ISSUED OR DELIVERED IN THE STATE.~~

~~(B) IF AN INSURED INDIVIDUAL IS TRANSPORTED BETWEEN HOSPITALS BY HELICOPTER IN ORDER TO RECEIVE COVERED SERVICES THAT ARE NOT IN RESPONSE TO AN EMERGENCY MEDICAL CONDITION, THE HELICOPTER TRANSPORTATION PROVIDER MAY NOT BILL OR SEEK REIMBURSEMENT FROM THE INSURED FOR ANY AMOUNT IN EXCESS OF THE AMOUNT PAID BY THE ENTITY SUBJECT TO THIS SECTION FOR THE HELICOPTER TRANSPORTATION REGARDLESS OF WHETHER THE PROVIDER IS UNDER CONTRACT WITH THE ENTITY SUBJECT TO THIS SECTION~~

(a) The Maryland Health Care Commission, in conjunction with the Health Services Cost Review Commission and the Maryland Institute for Emergency Medical Services Systems, and with the assistance of the Office of the Attorney General, shall study:

(1) the financial aspects of inter-hospital patient transfer and scene transport by air ambulance services operating in Maryland, including:

(i) the types and costs of operations;

(ii) charges for services provided, including billing practices; and

(iii) reimbursement by payors;

(2) state and federal laws applicable to the operation of air ambulance services in the State; and

(3) mechanisms available to the State to regulate financial aspects of air ambulance services and to ensure cost-effective use of air ambulance services for inter-hospital patient transfer and scene transport.

(b) On or before December 1, 2006, the Maryland Health Care Commission, the Health Services Cost Review Commission, and the Maryland Institute for Emergency Medical Services Systems shall submit a report on the study and any findings and recommendations to the Governor and, in accordance with § 2-1246 of the State Government Article, to the Senate Finance Committee and the House Health and Government Operations Committee.

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect October July 1, 2006.

Approved May 2, 2006.