

19-2113.

~~(A) THE COMMISSION, IN COLLABORATION WITH THE MARYLAND HEALTH INSURANCE PLAN COMMUNITY HEALTH RESOURCES AND LOCAL HEALTH DEPARTMENTS, SHALL DEVELOP A SPECIALTY CARE NETWORK FOR INDIVIDUALS:~~

~~(1) WITH FAMILY INCOME THAT DOES NOT EXCEED 200% OF THE FEDERAL POVERTY LEVEL; AND~~

~~(2) WHO ARE REFERRED THROUGH A COMMUNITY HEALTH RESOURCE.~~

~~(B) THE SPECIALTY CARE NETWORK SHALL:~~

~~(1) CONSIST OF HEALTH CARE PRACTITIONERS WHO AGREE TO PROVIDE CARE TO INDIVIDUALS REFERRED THROUGH A COMMUNITY HEALTH RESOURCE FOR A DISCOUNTED FEE ESTABLISHED BY THE COMMISSION AND THE MARYLAND HEALTH INSURANCE PLAN; AND~~

~~(2) INCLUDE HEALTH CARE PRACTITIONERS WHO HISTORICALLY HAVE SERVED THE UNINSURED.~~

~~(C) INDIVIDUALS RECEIVING HEALTH CARE THROUGH THE SPECIALTY CARE NETWORK SHALL PAY FOR SPECIALTY CARE ACCORDING TO A SLIDING FEE SCALE DEVELOPED BY THE COMMISSION.~~

~~(D) IN ADDITION TO PATIENT FEES, SPECIALTY CARE OFFICE BASED SPECIALTY CARE VISITS, DIAGNOSTIC TESTING, AND LABORATORY TESTS SHALL BE SUBSIDIZED BY FUNDS PROVIDED FROM:~~

~~(1) STRATEGIC CONTRIBUTION PAYMENTS IN THE CIGARETTE RESTITUTION FUND ESTABLISHED UNDER § 7-317 OF THE STATE FINANCE AND PROCUREMENT ARTICLE; AND~~

~~(2) AN ASSESSMENT ON HOSPITALS UNDER § 19-219(F) OF THIS TITLE.~~

~~(3) GENERAL FUNDS; AND~~

~~(2) MONEY COLLECTED FROM A NONPROFIT HEALTH MAINTENANCE ORGANIZATION IN ACCORDANCE WITH § 6-121 OF THE INSURANCE ARTICLE.~~

~~(E) (1) THE COMMISSION, IN COLLABORATION WITH THE MARYLAND HEALTH INSURANCE PLAN, SHALL DETERMINE THE FUNDS NEEDED FOR SUBSIDIES FOR SPECIALTY CARE.~~

~~(E) THE COMMISSION SHALL PROVIDE SUBSIDIES TO COMMUNITY HEALTH RESOURCES FOR OFFICE BASED SPECIALTY CARE VISITS, DIAGNOSTIC TESTING, AND LABORATORY TESTS.~~

~~(2) IF FUNDS PROVIDED FROM THE STRATEGIC CONTRIBUTION PAYMENTS IN THE CIGARETTE RESTITUTION FUND ESTABLISHED UNDER § 7-317 OF THE STATE FINANCE AND PROCUREMENT ARTICLE ARE INSUFFICIENT TO COVER~~