

(1) FOR EACH YEAR THAT AN ALLOCATION IS MADE TO THE RATE STABILIZATION ACCOUNT:

(I) THE AMOUNT OF MONEY APPLIED FOR BY MEDICAL PROFESSIONAL LIABILITY INSURERS DURING THE PREVIOUS CALENDAR YEAR;

(II) BY CLASSIFICATION AND GEOGRAPHIC TERRITORY, THE AMOUNT OF MONEY DISBURSED TO MEDICAL PROFESSIONAL LIABILITY INSURERS ON BEHALF OF HEALTH CARE PROVIDERS DURING THE PREVIOUS CALENDAR YEAR;

(III) BY CLASSIFICATION AND GEOGRAPHIC TERRITORY, THE NUMBER OF HEALTH CARE PROVIDERS ELECTING NOT TO RECEIVE A RATE REDUCTION, CREDIT, OR REFUND IN THE PREVIOUS CALENDAR YEAR; ~~AND~~

(IV) THE COSTS INCURRED BY THE COMMISSIONER IN ADMINISTERING THE RATE STABILIZATION ACCOUNT DURING THE PREVIOUS CALENDAR YEAR, INCLUDING A JUSTIFICATION OF THE AUDIT COSTS INCURRED UNDER § 19-805(I) OF THIS SUBTITLE; AND

~~(IV)~~ (V) THE AMOUNT OF MONEY AVAILABLE IN THE RATE STABILIZATION ACCOUNT ON THE LAST DAY OF THE PREVIOUS CALENDAR YEAR;

(2) THE AMOUNT OF MONEY AVAILABLE IN THE FUND AND THE MEDICAL ASSISTANCE PROGRAM ACCOUNT ON THE LAST DAY OF THE PREVIOUS CALENDAR YEAR;

(3) (I) THE AMOUNT OF MONEY DISBURSED TO THE MARYLAND MEDICAL ASSISTANCE PROGRAM UNDER § 19-807 OF THIS SECTION;

(II) THE AMOUNT OF INCREASE IN FEE-FOR-SERVICE HEALTH CARE PROVIDER RATES; AND

(III) THE AMOUNT OF INCREASE IN CAPITATION PAYMENTS TO MANAGED CARE ORGANIZATIONS; AND

(4) THE REPORT OF AUDITED RECEIPTS AND DISBURSEMENTS OF THE FUND AS REQUIRED UNDER SUBSECTION (A) OF THIS SECTION.

24-201.

(a) In this subtitle the following words have the meanings indicated.

(G) "SURPLUS" DOES NOT INCLUDE DEBT OF THE SOCIETY INCURRED IN ACCORDANCE WITH § 3-116(B) OF THIS ARTICLE TO ENABLE IT TO COMPLY WITH A SURPLUS REQUIREMENT.

24-211.

(b) [(1)] Any rate filing by the Society shall include the information required under subsection (a) of this section.

[(2) Before any rate filing by the Society which would result in an aggregate increase in premium of greater than 7.5% may become effective, the