

BENEFICIARY WHO UTILIZES CERTAIN DESIGNATED LOW-COST HOSPITALS, DIFFERENT FROM THE BENEFITS OFFERED FOR UTILIZATION OF OTHER HOSPITALS, SHALL BASE ITS DESIGNATION OF A LOW-COST HOSPITAL ON INFORMATION WHICH:

(1) EXCLUDES THE REASONABLE COST OF MEDICAL EDUCATION AS DETERMINED BY THE HEALTH SERVICES COST REVIEW COMMISSION;

(2) EXCLUDES THE REASONABLE COST OF UNCOMPENSATED CARE AS DETERMINED BY THE HEALTH SERVICES COST REVIEW COMMISSION; AND

(3) EXCLUDES ANY HOSPITAL FROM CONSIDERATION THAT IS DETERMINED BY THE HEALTH RESOURCES PLANNING COMMISSION TO BE A SOLE COMMUNITY PROVIDER;

(4) EXCLUDES THE AMOUNT IN RATES AS APPROVED BY THE HEALTH SERVICES COST REVIEW COMMISSION FOR UNDERGRADUATE NURSING EDUCATION;

{4} (5) EXCLUDES THE COST, AS DETERMINED BY THE HEALTH SERVICES COST REVIEW COMMISSION, ASSOCIATED WITH--

{1} ANY SHOCK TRAUMA FACILITY; -OR

{11}--ANY-SPECIALTY-CARE-UNIT, AND

{3} {5} (6) COMPARES HOSPITALS ON A REGIONAL BASIS UNLESS THE INSURER DEMONSTRATES TO THE SATISFACTION OF THE INSURANCE COMMISSIONER THAT A STATEWIDE COMPARISON IS MORE APPROPRIATE UNDER THE CIRCUMSTANCES.

(B) A NONPROFIT HEALTH SERVICE PLAN PROVIDING BENEFITS UNDER A PLAN DEFINED IN SUBSECTION (A) OF THIS SECTION MAY NOT SUBSIDIZE THE BENEFITS OFFERED UNDER SUCH PLAN FROM PREMIUMS EARNED BY OTHER BENEFIT PLANS OR PROGRAMS.

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(A) IN THIS SECTION, "HEALTH CARE PROVIDER" MEANS:

(1) A LICENSED HEALTH CARE PROFESSIONAL;

(2) AN ADMINISTRATOR OF A HOSPITAL; OR

{3}--A-TRUSTEE-OF-A-HOSPITAL, -OR

{4} (3) AN EMPLOYEE OF A HEALTH CARE PROFESSIONAL OR HOSPITAL.

(B) NO MORE THAN 25% OF THE BOARD OF DIRECTORS OF A NONPROFIT HEALTH SERVICE PLAN SHALL BE HEALTH CARE PROVIDERS.

(C) THE COMMISSIONER MAY ADOPT RULES AND REGULATIONS WHICH LIMIT THE REPRESENTATION OF HEALTH CARE PROVIDERS ON A