

all patients in the hospital; authorizing the conducting of a utilization review program by an independent nonhospital affiliated review agent; requiring certain persons to perform the utilization review program; providing for the approval and recertification of a utilization review program; providing for penalties if a hospital fails to provide a utilization review program; requiring the Secretary of Health and Mental Hygiene, in consultation with certain health care providers and payors, to establish certain minimum standards for a utilization review program; providing that a patient may not be charged for days disallowed under a utilization review program under certain circumstances; providing that a hospital is exempt from requiring a utilization review program for certain patients; providing that the Secretary may waive standards for federally-mandated utilization review programs under certain circumstances; requiring certain insurance coverage for outpatient services and second opinions under certain circumstances; providing for a report to the General Assembly under this Act; providing for multiple effective dates; creating a Joint Committee on Health Care Cost Containment, to be appointed by the President of the Senate and Speaker of the House of Delegates; providing for the staff, responsibilities, and termination of the Joint Committee; ~~creating--a--Joint-Committee-on-Health-Care-Cost Containment,-to-be-appointed-by-the-President-of-the--Senate and-the-Speaker-of-the-House-of-Delegates,-providing-for-the staff--and--responsibilities--of--the--Joint--Committee;~~ and generally relating to a utilization review program for hospital patients.

BY adding to

Article - Health - General  
Section 19-319(d)  
Annotated Code of Maryland  
(1982 Volume and 1984 Supplement)

BY adding to

Article 48A - Insurance Code  
Section 354CC, 470V, and 477CC  
Annotated Code of Maryland  
(1979 Replacement Volume and 1984 Supplement)

Preamble

WHEREAS, The provision of medically unnecessary or inappropriate care and the provision of care in an economically inefficient manner contribute to the escalation in health care costs; and