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The stylistic errors occurred in and the antiquated language was contained in Ch. 553 of the Acts of 1963.

The stylistic errors were noted by the Michie Company.

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- (b) A nonprofit health service plan or a Blue Cross or Blue Shield plan may not reveal specific medical information contained in a subscriber's medical records to any person unless:
  - (1) It is authorized by the subscriber; [or]
- (2) It is providing information requested by or in furtherance of the purpose of a medical review committee, accreditation board, or commission, or in response to legal process; [or]
- (3) It is furnishing information to another nonprofit health service plan or Blue Cross or Blue Shield plan or an insurance company for the purpose of coordinating benefit payments under more than one sickness and accident, dental, or hospital medical contract; [or]
- (4) It is providing information to governmental agencies in the performance of their lawful duties as authorized by an act of the General Assembly or the United States Congress; [or]
- (5) When providing information at the request of a researcher for the purpose of medical and health care research pursuant to a protocol approved by an institutional review board; or
- (6) It is furnishing information pursuant to a cost containment contractual obligation for the purpose of verifying that the benefits paid by the nonprofit health service plan were contractually proper, or it is providing information to a third party payor which does not reveal specific medical information and is required for an audit of the billing made by the plan to the payor.

DRAFTER'S NOTE: This corrects extraneous conjunctions in Article 48A, § 354-O(b).

The extraneous disjunctive conjunctions, "or", were contained in Ch. 728 of the Acts of 1978.

The extraneous conjunctions were noted by the Michie Company.

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