

VETOES

370 470Y.

(A) EACH INSURER PROPOSING TO ISSUE OR DELIVER A HEALTH INSURANCE POLICY OR CONTRACT OR TO ADMINISTER A HEALTH BENEFIT PROGRAM WHICH PROVIDES FOR THE COVERAGE OF HOSPITAL BENEFITS AND THE UTILIZATION REVIEW OF THOSE BENEFITS SHALL: ~~MEET---THE REQUIREMENTS--OF--TITLE--19,--SUBTITLE--13--OF--THE--HEALTH---GENERAL ARTICLE-~~

(1) HAVE A CERTIFICATE IN ACCORDANCE WITH TITLE 19, SUBTITLE 13 OF THE HEALTH - GENERAL ARTICLE;

(2) CONTRACT WITH A PRIVATE REVIEW AGENT THAT HAS A CERTIFICATE IN ACCORDANCE WITH TITLE 19, SUBTITLE 13 OF THE HEALTH - GENERAL ARTICLE; OR

(3) CONTRACT WITH OR DELEGATE TO A HOSPITAL UTILIZATION REVIEW PROGRAM APPROVED UNDER § 19-319(D) OF THE HEALTH - GENERAL ARTICLE.

(B) NOTWITHSTANDING ANY OTHER PROVISION OF THIS ARTICLE, FOR CLAIMS WHERE THE MEDICAL NECESSITY OF THE PROVISION OF A COVERED BENEFIT IS DISPUTED, AN INSURER THAT DOES NOT MEET THE REQUIREMENTS OF SUBSECTION (A) OF THIS SECTION SHALL PAY ANY PERSON OR HOSPITAL ENTITLED TO REIMBURSEMENT UNDER THE POLICY, CONTRACT, OR CERTIFICATE IN ACCORDANCE WITH THE DETERMINATION OF MEDICAL NECESSITY BY THE HOSPITAL UTILIZATION REVIEW PROGRAM APPROVED UNDER TITLE 19, SUBTITLE 13 OF THE HEALTH - GENERAL ARTICLE.

477-II.

(A) EACH HEALTH INSURER PROPOSING TO ISSUE OR DELIVER IN THIS STATE A GROUP OR BLANKET HEALTH INSURANCE POLICY OR TO ADMINISTER A HEALTH BENEFIT PROGRAM WHICH PROVIDES FOR THE COVERAGE OF HOSPITAL BENEFITS AND THE UTILIZATION REVIEW OF THOSE BENEFITS SHALL: ~~MEET--THE--REQUIREMENTS--OF--TITLE--19,--SUBTITLE--13--OF--THE--HEALTH---GENERAL--ARTICLE-~~

(1) HAVE A CERTIFICATE IN ACCORDANCE WITH TITLE 19, SUBTITLE 13 OF THE HEALTH - GENERAL ARTICLE;

(2) CONTRACT WITH A PRIVATE REVIEW AGENT THAT HAS A CERTIFICATE IN ACCORDANCE WITH TITLE 19, SUBTITLE 13 OF THE HEALTH - GENERAL ARTICLE; OR

(3) CONTRACT WITH OR DELEGATE TO A HOSPITAL UTILIZATION REVIEW PROGRAM APPROVED UNDER § 19-319(D) OF THE HEALTH - GENERAL ARTICLE.

(B) NOTWITHSTANDING ANY OTHER PROVISION OF THIS ARTICLE, FOR CLAIMS WHERE THE MEDICAL NECESSITY OF THE PROVISION OF A COVERED BENEFIT IS DISPUTED, A HEALTH INSURER THAT DOES NOT MEET