

(II) A GROUP HEALTH PLAN, AS DEFINED IN § 607(1) OF THE EMPLOYEE RETIREMENT INCOME SECURITY ACT OF 1974; OR

(III) AN ENTITY OFFERING A SERVICE BENEFIT PLAN AS DEFINED BY FEDERAL LAW.

(3) "HEALTH INSURANCE COVERAGE" MEANS ANY TYPE OF HEALTH CARE COVERAGE UNDER WHICH MEDICAL CARE SERVICES CAN BE PROVIDED TO THE CHILD THROUGH AN INSURER.

(B) AN INSURER MAY NOT CONSIDER WHETHER AN INDIVIDUAL IS ELIGIBLE FOR OR IS RECEIVING MEDICAL ASSISTANCE FROM THIS OR ANY OTHER STATE UNDER 42 U.S.C. § 1396A WHEN:

(1) DETERMINING THE ELIGIBILITY OF THE INDIVIDUAL FOR ENROLLMENT IN HEALTH INSURANCE COVERAGE; OR

(2) CALCULATING ANY PAYMENTS FOR BENEFITS FOR WHICH THE INDIVIDUAL IS ELIGIBLE UNDER THE HEALTH INSURANCE COVERAGE.

(C) UPON PRESENTATION OF A CLAIM TO AN INSURER, THE STATE SHALL BE REIMBURSED BY THE INSURER TO THE EXTENT THAT:

(1) THE STATE HAS PAID FOR COVERED EXPENSES UNDER THE MARYLAND MEDICAL ASSISTANCE PROGRAM FOR MEDICAL CARE SERVICES PROVIDED TO AN ELIGIBLE INDIVIDUAL; AND

(2) THE HEALTH CARE SERVICES PROVIDED UNDER THE MARYLAND MEDICAL ASSISTANCE PROGRAM ARE ALSO INCLUDED UNDER THE INDIVIDUAL'S HEALTH INSURANCE COVERAGE PROVIDED BY THE INSURER.

(D) AN INSURER MAY NOT IMPOSE REQUIREMENTS ON A STATE AGENCY, WHICH HAS BEEN ASSIGNED THE RIGHTS OF AN INDIVIDUAL WHO IS ELIGIBLE FOR MEDICAL ASSISTANCE AND WHO HAS HEALTH INSURANCE COVERAGE FROM THE INSURER, THAT ARE DIFFERENT FROM REQUIREMENTS APPLICABLE TO AN AGENT OR ASSIGNEE OR ANY OTHER INDIVIDUAL SO COVERED.

SECTION 2. AND BE IT FURTHER ENACTED, That the Laws of Maryland read as follows:

Article – Family Law

10-109.

The Administration shall approve for child support services any individual who [:

(1) cannot afford private counsel; and

(2)] files an application and pays a fee for child support services as required by the Administration.