

(D) SAME — DIRECT PAYMENT OF HOSPITAL OR MEDICAL SERVICES.

(1) SUBJECT TO PARAGRAPH (2) OF THIS SUBSECTION, A POLICY OF BLANKET HEALTH INSURANCE MAY CONTAIN A PROVISION THAT ALL OR PART OF THE BENEFITS PROVIDED BY THE POLICY FOR HOSPITAL, NURSING, MEDICAL, OR SURGICAL SERVICES, AT THE INSURER'S OPTION, MAY BE PAID DIRECTLY TO THE HOSPITAL OR PERSON THAT PROVIDES THE SERVICES.

(2) A POLICY OF BLANKET HEALTH INSURANCE MAY NOT REQUIRE THAT HOSPITAL, NURSING, MEDICAL, OR SURGICAL SERVICES BE PROVIDED BY A PARTICULAR HOSPITAL OR PERSON.

(3) A DIRECT PAYMENT MADE UNDER PARAGRAPH (1) OF THIS SUBSECTION DISCHARGES THE INSURER'S OBLIGATION WITH RESPECT TO THE AMOUNT PAID.

REVISOR'S NOTE: This section is new language derived without substantive change from former Art. 48A, § 477.

In subsection (d)(1) of this section, the term "benefits" is substituted for the former term "indemnities" for clarity and consistency with other provisions of this article.

Defined terms: "Blanket health insurance" § 15-301

"Insurer" § 1-101

"Person" § 1-101

"Policy" § 1-101

15-310. SOLICITATION OF COVERAGE UNDER POLICY ISSUED IN OTHER JURISDICTION.

A PERSON MAY NOT SOLICIT COVERAGE IN THE STATE UNDER A POLICY OF GROUP HEALTH INSURANCE OR BLANKET HEALTH INSURANCE ISSUED IN ANOTHER JURISDICTION WITHOUT THE PRIOR WRITTEN APPROVAL OF THE COMMISSIONER, UNLESS THE TYPE OF GROUP TO BE COVERED CONFORMS SUBSTANTIALLY TO ONE OF THE GROUPS DESCRIBED IN § 15-302 OR § 15-305 OF THIS SUBTITLE.

REVISOR'S NOTE: This section is new language derived without substantive change from former Art. 48A, § 477A.

Defined terms: "Commissioner" § 1-101

"Blanket health insurance" § 15-301

"Group health insurance" § 15-301

"Person" § 1-101

"Policy" § 1-101