

(B) IN GENERAL.

EACH ENTITY SUBJECT TO THIS SECTION SHALL:

(1) HAVE A CERTIFICATE ISSUED UNDER TITLE 19, SUBTITLE 13 OF THE HEALTH - GENERAL ARTICLE;

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

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

(C) DISPUTED CLAIMS.

NOTWITHSTANDING ANY OTHER PROVISION OF THIS ARTICLE, IF THE MEDICAL NECESSITY OF PROVIDING A COVERED BENEFIT IS DISPUTED, AN ENTITY SUBJECT TO THIS SECTION THAT DOES NOT MEET THE REQUIREMENTS OF SUBSECTION (B) OF THIS SECTION SHALL PAY ANY PERSON 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 § 19-319(D) OF THE HEALTH - GENERAL ARTICLE.

REVISOR'S NOTE: This section is new language derived without substantive change from former Art. 48A, §§ 354HH, 470Y, and 477-II.

In subsection (a) of this section, the reference to insurers and nonprofit health service plans that propose to issue or deliver "individual" health insurance policies or contracts in the State is added to clarify the applicability of this section.

Also in subsection (a) of this section, the former reference to a "health" insurer is deleted as unnecessary in light of the reference to insurers that issue or deliver "health insurance" policies or contracts.

In subsection (b)(1) and (2) of this section, the references to having a certificate "issued under" Title 19, Subtitle 13 of the Health - General Article are substituted for the former references to having a certificate "in accordance with" Title 19, Subtitle 13 of the Health - General Article for clarity.

In subsection (b)(3) of this section, the reference to delegating "utilization review" to a hospital utilization review program is added for clarity.

In subsection (c) of this section, the reference to an "entity subject to this section" is substituted for the former references to a "nonprofit health service plan", an "insurer", and a "health insurer" in light of subsection (a) of this section.

Also in subsection (c) of this section, the former phrase "for claims" is deleted as surplusage.