

sales materials concerning the distribution of premium dollars received from enrollees; requiring the Health Care Access and Cost Commission to develop certain definitions; defining certain terms; and generally relating to requiring certain carriers to disclose certain information in a certain manner in their marketing enrollment sales materials under certain circumstances.

BY adding to

Article - Insurance

Section 15-121

Annotated Code of Maryland

(1995 Volume and 1996 Supplement)

(As enacted by Chapter __ (H.B. 11) of the Acts of the General Assembly of 1997)

BY adding to

Article - Health - General

Section 19-706(n)

Annotated Code of Maryland

(1996 Replacement Volume and 1996 Supplement)

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:

Article - Insurance

15-121.

(A) (1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS INDICATED.

(2) "CARRIER" MEANS:

(I) AN INSURER;

(II) A NONPROFIT HEALTH SERVICE PLAN;

(III) A HEALTH MAINTENANCE ORGANIZATION;

(IV) A DENTAL PLAN ORGANIZATION; OR

(V) ANY PERSON OR ENTITY ACTING AS A THIRD PARTY ADMINISTRATOR; OR

(VI) EXCEPT FOR A MANAGED CARE ORGANIZATION AS DEFINED IN TITLE 15, SUBTITLE 1 OF THE HEALTH - GENERAL ARTICLE, AN ENTITY THAT HAS ORGANIZED A PROVIDER NETWORK FOR THE PURPOSE OF CONTRACTING DIRECTLY WITH A PURCHASER TO PROVIDE HEALTH CARE SERVICES TO INDIVIDUALS OR GROUPS UNDER A CAPITATED OR OTHER RISK SHARING ARRANGEMENT ANY OTHER PERSON THAT PROVIDES HEALTH BENEFIT PLANS SUBJECT TO REGULATION BY THE STATE.