REPRESENTATION IT PLACES BEFORE THE PUBLIC THAT THE NONPROFIT HEALTH SERVICE PLAN IS A PRIVATE NOT-FOR-PROFIT CORPORATION.

REVISOR'S NOTE: This section is new language derived without substantive change from former Art. 48A, § 354A-2.

14-104. STATEMENT OF PRINCIPAL CLAIMS PRACTICES.

(A) REQUIRED.

EACH NONPROFIT HEALTH SERVICE PLAN THAT PROVIDES HOSPITAL BENEFITS SHALL FURNISH A STATEMENT OF THE PLAN'S PRINCIPAL CLAIMS PRACTICES AS PART OF THE CERTIFICATE FORM OR BOOKLET DESCRIBING THE COVERAGE TO BE AFFORDED.

(B) CONTENTS.

THE STATEMENT SHALL INCLUDE PRACTICES FOR PAYMENT FOR:

- (1) SURGICAL PROCEDURES PERFORMED BY TWO OR MORE SURGEONS;
- (2) SERVICES PROVIDED IN-AREA BY NONPARTICIPATING PROVIDERS; AND
- (3) SERVICES PROVIDED OUT-OF-AREA BY AFFILIATED PLANS AND AFFILIATED PROVIDERS.

REVISOR'S NOTE: This section is new language derived without substantive change from former Art. 48A, § 354P.

14-105. FRAUDULENT HEALTH INSURANCE CLAIMS.

(A) RECOVERY OF COSTS AND EXPENSES — BY NONPROFIT HEALTH SERVICE PLAN.

IF A NONPROFIT HEALTH SERVICE PLAN IS SUCCESSFUL IN AN ACTION AGAINST A PERSON AUTHORIZED TO PROVIDE HEALTH CARE IN THE STATE, THE NONPROFIT HEALTH SERVICE PLAN MAY RECOVER THE COSTS AND EXPENSES REASONABLY INCURRED BY IT IN THE ACTION IF IT SHOWS THAT:

- (1) THE PERSON KNOWINGLY OR WILLFULLY MADE OR CAUSED TO BE MADE:
- (I) A FALSE STATEMENT OR REPRESENTATION OF A MATERIAL FACT IN AN APPLICATION FOR A BENEFIT OR PAYMENT FROM A NONPROFIT HEALTH SERVICE PLAN UNDER THIS SUBTITLE OR TITLE 15 OF THIS ARTICLE:
- (II) A FALSE STATEMENT OR REPRESENTATION OF A MATERIAL FACT FOR USE IN DETERMINING RIGHTS TO THOSE BENEFITS OR PAYMENTS; OR
- (III) A FALSE STATEMENT OR REPRESENTATION ABOUT A PROCEDURE, OPERATION, OR SERVICE ALLEGED TO HAVE BEEN PERFORMED; OR
 - (2) THE PERSON: