

ENTITLED TO RECEIVE HEALTH CARE SERVICES FROM PREFERRED PROVIDERS AT NO COST, AT A REDUCED FEE, OR UNDER MORE FAVORABLE TERMS THAN IF THE INSURED OR SUBSCRIBER RECEIVED SIMILAR SERVICES FROM A NONPREFERRED PROVIDER.

REVISOR'S NOTE: This subsection is new language derived without substantive change from former Art. 48A, § 655(e).

The reference to "an arrangement under which" the insured or subscriber is entitled to receive health care services is added for clarity.

Defined terms: "Insured" § 14-201

"Nonpreferred provider" § 14-201

"Preferred provider" § 14-201

"Preferred provider insurance policy" § 14-201

"Subscriber" § 14-201

(E) PREFERRED PROVIDER.

"PREFERRED PROVIDER" MEANS A PROVIDER THAT HAS ENTERED INTO A PROVIDER SERVICE CONTRACT.

REVISOR'S NOTE: This subsection is new language derived without substantive change from former Art. 48A, § 655(f).

The former references to the other parties to a provider service contract are deleted as unnecessary in light of the use of the defined term "provider service contract".

Defined terms: "Provider" § 14-201

"Provider service contract" § 14-201

(F) PREFERRED PROVIDER INSURANCE POLICY.

"PREFERRED PROVIDER INSURANCE POLICY" MEANS:

(1) A POLICY OR INSURANCE CONTRACT THAT IS ISSUED OR DELIVERED IN THE STATE BY AN INSURER, UNDER WHICH HEALTH CARE SERVICES ARE TO BE PROVIDED TO THE INSURED BY A PREFERRED PROVIDER ON A PREFERENTIAL BASIS; OR

(2) ANOTHER CONTRACT THAT IS OFFERED BY AN EMPLOYER, THIRD PARTY ADMINISTRATOR, OR OTHER ENTITY, UNDER WHICH HEALTH CARE SERVICES ARE TO BE PROVIDED TO THE SUBSCRIBER BY A PREFERRED PROVIDER ON A PREFERENTIAL BASIS.

REVISOR'S NOTE: This subsection is new language derived without substantive change from former Art. 48A, § 655(g).

In items (1) and (2) of this subsection, the references to health "care" services are added for clarity and consistency with subsections (d), (g), and (h) of this section and § 14-204(1) of this subtitle.