

In subsection (a)(2) of this section, the former reference to a "profit ... or mutual" health service plan is deleted for accuracy since no profit or mutual health service plans exist in the State.

Defined terms: "Health insurance" § 1-101
"Insurer" § 1-101
"Policy" § 1-101

14-203. REGULATIONS.

THE COMMISSIONER MAY ADOPT REGULATIONS TO ENFORCE THIS SUBTITLE.

REVISOR'S NOTE: This section is new language derived without substantive change from former Art. 48A, § 659.

The former reference to the Commissioner adopting "necessary" regulations is deleted as unnecessary in light of the Commissioner's discretion in adopting regulations.

Defined term: "Commissioner" § 1-101

14-204. AUTHORITY OF INSURERS.

SUBJECT TO THE APPROVAL OF THE COMMISSIONER, AN INSURER MAY:

(1) OFFER OR ADMINISTER A HEALTH BENEFIT PROGRAM UNDER WHICH THE INSURER OFFERS PREFERRED PROVIDER INSURANCE POLICIES THAT LIMIT, THROUGH THE USE OF PROVIDER SERVICE CONTRACTS, THE NUMBERS AND TYPES OF PROVIDERS OF HEALTH CARE SERVICES ELIGIBLE FOR PAYMENT AS PREFERRED PROVIDERS; AND

(2) ESTABLISH TERMS AND CONDITIONS THAT PROVIDERS MUST MEET TO QUALIFY FOR PAYMENT AS PREFERRED PROVIDERS.

REVISOR'S NOTE: This section is new language derived without substantive change from former Art. 48A, § 656.

Defined terms: "Commissioner" § 1-101
"Insurer" § 1-101
"Preferred provider" § 14-201
"Preferred provider insurance policy" § 14-201
"Provider" § 14-201
"Provider service contract" § 14-201

14-205. BENEFITS FOR HEALTH CARE SERVICES; PAYMENTS TO AND RATES FOR PROVIDERS.

(A) BENEFITS FOR HEALTH CARE SERVICES.

IF A PREFERRED PROVIDER INSURANCE POLICY OFFERED BY AN INSURER PROVIDES BENEFITS FOR A SERVICE THAT IS WITHIN THE LAWFUL SCOPE OF PRACTICE OF A HEALTH CARE PROVIDER LICENSED UNDER THE HEALTH OCCUPATIONS ARTICLE, AN INSURED COVERED BY THE PREFERRED PROVIDER INSURANCE POLICY IS ENTITLED TO RECEIVE THE BENEFITS FOR THAT SERVICE