

adverse decision when a patient was not insured by or an enrollee of the entity the private review agent is affiliated with and except for when determinations of appropriateness or medical necessity, the services would not be covered in whole or in part under the policy or contract.

Senate Bill 350, which was passed by the General Assembly and signed by me on May 27, 1999, accomplishes the same purpose. Therefore, it is not necessary for me to sign House Bill 345.

Sincerely,
Parris N. Glendening
Governor

House Bill 345

AN ACT concerning

Health Insurance - Private Review Agents - Coverage Determinations and Retroactive Adverse Decisions

FOR the purpose of ~~altering the circumstances under which a private review agent may retrospectively render an adverse decision regarding preauthorized or approved health care services; and generally relating to private review agents and retroactive adverse decisions in health insurance~~ repealing certain circumstances under which a private review agent may render a retroactive adverse decision for preauthorized health care services based on a lack of coverage for an individual or a specific health care service; requiring that certain group health insurance contracts contain a provision requiring certain entities to continue to pay the premium for an insured individual until notice of termination of coverage for that individual has been received by the carrier; and generally relating to coverage determinations by insurers and retroactive adverse decisions based on such determinations.

BY repealing and reenacting, with amendments,

Article - Insurance
Section 15-10B-07(c)
Annotated Code of Maryland
(1997 Volume and 1998 Supplement)

BY adding to

Article - Insurance
Section 15-303(f)
Annotated Code of Maryland
(1997 Volume and 1998 Supplement)

BY adding to

Article - Health - General
Section 19-706(ff)