

(I) AN AUTHORIZED INSURER THAT PROVIDES HEALTH INSURANCE IN THE STATE;

- (ii) a nonprofit health service plan;
- (iii) a health maintenance organization;
- (iv) a dental plan organization; or

(v) except for a managed care organization as defined in Title 15, Subtitle 1 of the Health – General Article, any other person that provides health benefit plans subject to regulation by the State.

(3) (I) "HEALTH BENEFIT PLAN" MEANS:

1. A HOSPITAL OR MEDICAL ~~POLICY POLICY, CONTRACT, OR CERTIFICATE, INCLUDING THOSE ISSUED UNDER MULTIPLE EMPLOYER TRUSTS OR ASSOCIATIONS LOCATED IN MARYLAND OR ANY OTHER STATE COVERING MARYLAND RESIDENTS;~~

2. A HOSPITAL OR MEDICAL POLICY, CONTRACT, OR CERTIFICATE ISSUED BY A NONPROFIT HEALTH SERVICE PLAN ~~THAT COVERS MARYLAND RESIDENTS;~~

3. A HEALTH MAINTENANCE ORGANIZATION CONTRACT; OR

4. A DENTAL PLAN.

(II) "HEALTH BENEFIT PLAN" DOES NOT INCLUDE ONE OR MORE, OR ANY COMBINATION OF THE FOLLOWING:

1. LONG-TERM CARE INSURANCE;

2. DISABILITY INSURANCE;

3. ACCIDENTAL TRAVEL AND ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE;

4. CREDIT HEALTH INSURANCE;

5. ANY INSURANCE, MEDICAL POLICY, OR CERTIFICATE FOR WHICH PAYMENT OF BENEFITS ARE IS CONDITIONED ON A DETERMINATION OF MEDICAL NECESSITY MADE SOLELY BY THE TREATING HEALTH CARE PROVIDER NOT ACTING ON BEHALF OF THE CARRIER;

6. ANY OTHER INSURANCE, MEDICAL POLICY, OR CERTIFICATE FOR WHICH PAYMENT OF BENEFITS IS NOT CONDITIONED ON A DETERMINATION OF MEDICAL NECESSITY; OR

7. A HEALTH BENEFIT PLAN ISSUED BY A MANAGED CARE ORGANIZATION, AS DEFINED IN TITLE 15, SUBTITLE 1 OF THE HEALTH – GENERAL ARTICLE.