

Annotated Code of Maryland  
(1994 Replacement Volume and 1999 Supplement)

BY adding to

Article - Health - General  
Section 15-103(f)  
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(1994 Replacement Volume and 1999 Supplement)

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:

**Article - Health - General**

15-102.5.

(a) [A] SUBJECT TO § 15-103(F) OF THIS SUBTITLE, A health maintenance organization that requires its panel providers to participate in a managed care organization shall establish a mechanism, subject to review by the Secretary, which provides for equitable distribution of enrollees and which ensures that a provider will not be assigned a disproportionate number of enrollees.

(b) Nothing in this section may be interpreted as prohibiting a provider from voluntarily accepting additional enrollees.

15-103.

(b) (23) (i) The Department shall adopt regulations relating to enrollment, disenrollment, and enrollee appeals.

(ii) [An] SUBJECT TO SUBSECTION (F)(4) AND (5) OF THIS SECTION, AN enrollee may disenroll from a managed care organization:

1. Without cause in the month following the anniversary date of the enrollee's enrollment; and

2. For cause, at any time as determined by the Secretary.

(F) (1) THE DEPARTMENT SHALL ESTABLISH MECHANISMS FOR:

(I) IDENTIFYING A PROGRAM RECIPIENT'S PRIMARY CARE PROVIDER AT THE TIME OF ENROLLMENT INTO A MANAGED CARE PROGRAM; AND

(II) MAINTAINING CONTINUITY OF CARE WITH THE PRIMARY CARE PROVIDER IF:

1. THE PROVIDER HAS A CONTRACT WITH A MANAGED CARE ORGANIZATION OR A CONTRACTED MEDICAL GROUP OF A MANAGED CARE ORGANIZATION TO PROVIDE PRIMARY CARE SERVICES; AND

2. THE RECIPIENT DESIRES TO CONTINUE CARE WITH THE PROVIDER.