

(G) "PORTION OF A COUNTY" MEANS A GEOGRAPHIC PART OF A COUNTY NOT LISTED IN SUBSECTION (F) OF THIS SECTION THAT WAS SERVED BY A MEDICARE PLUS CHOICE MANAGED CARE PROVIDER PRIOR TO JANUARY 1, 2000, AND IS NO LONGER SERVED.

(H) "PLAN" MEANS THE SHORT-TERM PRESCRIPTION DRUG SUBSIDY PLAN ESTABLISHED UNDER THIS SUBTITLE.

15-602.

(A) A CARRIER THAT IS REQUIRED TO PROVIDE THE SHORT-TERM PRESCRIPTION DRUG SUBSIDY PLAN UNDER § 15-606(C) OF THE INSURANCE ARTICLE SHALL:

(1) SIGN A CONTRACT WITH THE SECRETARY AGREEING TO PROVIDE PRESCRIPTION DRUG BENEFITS TO ELIGIBLE INDIVIDUALS FOR A PERIOD OF AT LEAST 2 YEARS;

(2) EXCEPT AS OTHERWISE REQUIRED UNDER STATE OR FEDERAL LAW, AGREE NOT TO ALTER THE LEVEL OR TYPES OF BENEFITS PROVIDED UNDER THE PLAN THROUGHOUT THE 2-YEAR PERIOD OF THE CONTRACT;

(3) AGREE TO HOLD ENROLLEE PREMIUMS AT THE SAME LEVEL THROUGHOUT THE 2-YEAR CONTRACT PERIOD;

(4) AGREE TO CONTINUE TO SERVE AT LEAST THE SAME MEDICALLY UNDERSERVED COUNTIES OR PORTIONS OF COUNTIES THROUGHOUT THE 2-YEAR CONTRACT PERIOD; AND

(5) MAKE ALL PERFORMANCE REVIEW AND FINANCIAL RECORDS AVAILABLE FOR REVIEW BY THE SECRETARY AND THE MARYLAND INSURANCE ADMINISTRATION.

(B) THE CARRIER IS NOT REQUIRED, IN PROVIDING THE PLAN, TO OFFER ANY OTHER BENEFIT OTHERWISE REQUIRED UNDER TITLE 19, SUBTITLE 7 OF THE HEALTH - GENERAL ARTICLE OR TITLE 15, SUBTITLE 8 OF THE INSURANCE ARTICLE.

15-603.

(A) THE PLAN PROVIDED UNDER THIS SUBTITLE SHALL:

(1) THROUGHOUT THE 2-YEAR CONTRACT PERIOD, PROVIDE BENEFITS TO NOT MORE THAN 15,000 ENROLLEES AT ANY ONE TIME WHO ARE ELIGIBLE INDIVIDUALS AND WHO RESIDE IN ANY OF THE MEDICALLY UNDERSERVED COUNTIES OR PORTIONS OF COUNTIES;

(2) SET THE MONTHLY PREMIUM CHARGED AN ENROLLEE AT \$40;

(3) SET THE DEDUCTIBLE CHARGED AN ENROLLEE AT \$50 PER YEAR PER INDIVIDUAL;

(4) LIMIT THE CO-PAY CHARGED AN ENROLLEE TO:

(I) \$10 FOR A PRESCRIPTION FOR A GENERIC DRUG;