- (2) a nonprofit health service plan;
- (3) a health maintenance organization;
- (4) a dental plan organization; or
- (5) any other person that provides health benefit plans subject to regulation by the State.
- (b) (1) The Maryland Health Care Commission shall adopt regulations that specify a plan for substantial, available, and affordable coverage that shall be offered in the nongroup market by a carrier that qualifies for an approved purchaser differential under regulations adopted by the Health Services Cost Review Commission.
- (2) <u>In establishing a plan under this subsection, the Maryland Health Care Commission shall judge preventive services, medical treatments, procedures, and related health services based on:</u>
 - (i) their effectiveness in improving the health of individuals;
- (ii) their impact on maintaining and improving health and encouraging consumers to use only the health care services they need; and
 - (iii) their impact on the affordability of health care coverage.
 - (3) The Maryland Health Care Commission may exclude from the plan:
- (i) a health care service, benefit, coverage, or reimbursement for covered health care services that is required under this article or the Health General Article to be provided or offered in a health benefit plan that is issued or delivered in the State by a carrier; or
- (ii) reimbursement required by statute, by a health benefit plan for a service when that service is performed by a health care provider who is licensed under the Health Occupations Article and whose scope of practice includes that service.
- (4) The plan shall include uniform deductibles and cost-sharing associated with its benefits, as determined by the Maryland Health Care Commission.
- (5) <u>In establishing cost-sharing as part of the plan, the Maryland Health</u> Care Commission shall:
- (i) include cost-sharing and other incentives to help consumers use only the health care services they need;
- (ii) balance the effect of cost-sharing in reducing premiums and in affecting utilization of appropriate services; and
- (iii) limit the total cost-sharing that may be incurred by an individual in a year.