

(ii) 1. Each carrier participating in the substantial, [affordable, and available] AVAILABLE, AND AFFORDABLE coverage differential program shall contribute an amount to the Short-Term Prescription Drug Subsidy Plan that is equal to [the total derived by multiplying \$5.4 million] 37.5 PERCENT OF THE VALUE OF THE DIFFERENTIAL PROVIDED TO THAT CARRIER [by the percentage of the total benefit to all carriers from the substantial, affordable, and available coverage differential that the carrier receives on January 1, 2000] DURING THE PREVIOUS YEAR.

2. On OR BEFORE July 1 of each year, the Health Services Cost Review Commission shall calculate each carrier's contribution and assess the contribution as provided in this subsection.

(iii) 1. The last carrier to provide Medicare Plus Choice coverage in medically underserved counties [or portions of counties] shall use an amount equal to the contribution derived under subparagraph (ii) of this paragraph to provide the Short-Term Prescription Drug Subsidy Plan created under Title 15, Subtitle 6 of the Health - General Article.

2. The carrier is not required, in providing the plan under this subparagraph, to offer any other benefit otherwise required under Title 19, Subtitle 7 of the Health - General Article or Subtitle 8 of this title.

(iv) The Health Services Cost Review Commission shall annually assess [any] EACH carrier [other than the carrier described under subparagraph (iii) of this paragraph] for the carrier's contribution and shall transfer the contribution to the Treasurer of the State, for payment into the Short-Term Prescription Drug Subsidy Fund created under § 15-604 of the Health - General Article.

[(v) If a carrier withdraws from the substantial, affordable, and available coverage program, the Commission shall recalculate the contributions to the prescription drug subsidy plan for the remaining carriers.]

SECTION 5. AND BE IT FURTHER ENACTED, That the Laws of Maryland read as follows:

**Chapter 565 of the Acts of 2000**

SECTION 2. AND BE IT FURTHER ENACTED, That the Health Services Cost Review Commission may not take steps to eliminate or adjust the differential in hospital rates provided to carriers [who] THAT provide a substantial, [affordable, and available] AVAILABLE, AND AFFORDABLE product in the nongroup market, under § 15-606 of the Insurance Article and the regulations of the Commission, as those rates were in effect on January 1, 2000 until the later of the termination of the Short-Term Prescription Drug Subsidy Plan created under [this Act] TITLE 15, SUBTITLE 6 OF THE HEALTH - GENERAL ARTICLE or the end of June 30, [2002] 2003.

[SECTION 4. AND BE IT FURTHER ENACTED, That, if the Secretary of Health and Mental Hygiene is notified by the federal Health Care Financing Administration that any provision of Short-Term Prescription Drug Subsidy Plan or of this Act will invalidate the Maryland Medicare Waiver or cause a reduction in the