- $\stackrel{\mbox{\scriptsize (2)}}{\sim}$  PROVIDED FINANCIAL OR IN KIND SUPPORT FOR PUBLIC HEALTH PROGRAMS:
- (3) EMPLOYED UNDERWRITING STANDARDS IN A MANNER THAT INCREASES THE AVAILABILITY OF ONE OR MORE HEALTH CARE SERVICES OR PRODUCTS:
- (4) EMPLOYED PRICING POLICIES THAT ENHANCE THE AFFORDABILITY OF HEALTH CARE SERVICES OR PRODUCTS AND RESULT IN A HIGHER MEDICAL LOSS RATIO THAN THAT ESTABLISHED BY A COMPARABLE FOR PROFIT HEALTH INSURER; OR
- $\{(2)\}$  (5) served the public interest by any method or practice approved by the Commissioner.
- (e) (D) [(1)] [A] NOTWITHSTANDING SUBSECTION (D) (C) OF THIS SECTION, A nonprofit health service plan that is subject to this section and issues comprehensive health care benefits in the State shall:
- (1) OFFER A COMPREHENSIVE BENEFIT, OPEN ENROLLMENT PRODUCT PRODUCTS IN THE INDIVIDUAL MARKET;
- (2) OFFER AN OPEN ENROLLMENT PRODUCT PRODUCTS IN THE SMALL EMPLOYER GROUP MARKET IN ACCORDANCE WITH TITLE 15, SUBTITLE 12 OF THIS ARTICLE; AND
- (3) administer and subsidize the Senior Prescription Drug Program established under Title 14, Subtitle 5, Part II of this title.
- $\{(2)\}$  (F) (E) The subsidy required under the Senior Prescription Drug Program may not exceed the value of the nonprofit health service plan's premium tax exemption under  $\{6-101(b)\}$  of this article.
- [(f)] (G)- (1) Each SUBJECT TO PARAGRAPH (2) OF THIS SUBSECTION, EACH report filed with the Commissioner under subsection (e) (B) of this section is a public record.
- (2) IN ACCORDANCE WITH § 10 617(D) OF THE STATE COVERNMENT ARTICLE, THE COMMISSIONER SHALL DENY INSPECTION OF ANY PART OF A REPORT FILED UNDER SUBSECTION (B) OF THIS SECTION THAT THE COMMISSIONER DETERMINES CONTAINS CONFIDENTIAL COMMERCIAL INFORMATION OR CONFIDENTIAL FINANCIAL INFORMATION.

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- (a) By November 1 of each year, the Commissioner shall issue an order notifying each nonprofit health service plan that is required to file a report under \\$ 14-106 of this subtitle of whether the plan has satisfied the requirements of \\$ 14-106 of this subtitle.
- (b) {(1)} If the Commissioner determines that a nonprofit health service plan has not satisfied the requirements of § 14 106 of this subtitle, [the nonprofit health