

in public programs, such as Medicaid and Medicare, when such participation is consistent with the mission of the nonprofit health service plan and does not impair the financial condition of the nonprofit health service plan.

SECTION 9. AND BE IT FURTHER ENACTED, That a nonprofit health service plan that is subject to § 14-115(d) of the Insurance Article, as enacted by Section 1 of this Act, shall:

(1) work with the Maryland Insurance Administration, the Department of Aging, and other appropriate entities to study, and if feasible and desirable develop, a State arrangement to offer health insurance coverage to individuals who are eligible for the federal tax credit under § 35 of the Internal Revenue Code; and

(2) on or before August 1, 2003, in accordance with § 2-1246 of the State Government Article, report to the Senate Finance Committee and the House Health and Government Operations Committee on the results of its study.

SECTION 3. 10. AND BE IT FURTHER ENACTED, That this Act shall take effect June 1, 2003. Section 6 of this Act shall remain effective for a period of 5 years and, at the end of May 31, 2008, with no further action required by the General Assembly, Section 6 of this Act shall be abrogated and of no further force and effect.

### Article - Insurance

14-102.

(A) THE PURPOSE OF THIS SUBTITLE IS:

(1) TO REGULATE THE FORMATION AND OPERATION OF NONPROFIT HEALTH SERVICE PLANS IN THE STATE; AND

(2) TO PROMOTE THE FORMATION AND EXISTENCE OF NONPROFIT HEALTH SERVICE PLANS IN THE STATE THAT:

(I) ARE COMMITTED TO A NONPROFIT CORPORATE STRUCTURE;

(II) SEEK TO PROVIDE INDIVIDUALS, BUSINESSES, AND OTHER GROUPS WITH AFFORDABLE AND ACCESSIBLE HEALTH INSURANCE; AND

(III) RECOGNIZE A RESPONSIBILITY TO CONTRIBUTE TO THE IMPROVEMENT OF THE OVERALL HEALTH STATUS OF MARYLAND RESIDENTS.

(B) A NONPROFIT HEALTH SERVICE PLAN THAT COMPLIES WITH THE PROVISIONS OF THIS SUBTITLE IS DECLARED TO BE A PUBLIC BENEFIT CORPORATION THAT IS EXEMPT FROM TAXATION AS PROVIDED BY LAW.

(C) THE MISSION OF A NONPROFIT HEALTH SERVICE PLAN SHALL BE TO:

(1) PROVIDE AFFORDABLE AND ACCESSIBLE HEALTH INSURANCE TO THE PLAN'S INSURED AND THOSE PERSONS INSURED OR ISSUED HEALTH BENEFIT PLANS BY AFFILIATES OR SUBSIDIARIES OF THE PLAN;

(2) ASSIST AND SUPPORT PUBLIC AND PRIVATE HEALTH CARE INITIATIVES FOR INDIVIDUALS WITHOUT HEALTH INSURANCE; AND