(5) THE REPORT OF AUDITED RECEIPTS AND DISBURSEMENTS OF THE FUND AS REQUIRED UNDER SUBSECTION (R) OF THIS SECTION.

SECTION 3. AND BE IT FURTHER ENACTED, That §§ 3–2A–01, 3–2A–05(h), and 5–615 of the Courts Article and § 1–401 of the Health Occupations Article, as enacted by Section 1 of this Act, shall be construed to apply only prospectively and may not be applied or interpreted to have any effect on or application to any cause of action arising before the effective date of this Act.

SECTION 4. AND BE IT FURTHER ENACTED, That §§ 3–2A–04(b), 3–2A–06(b), (f), and (i), 3–2A–06C, 3–2A–06D, 3–2A–08A, 8–306, and 9–124 and 3–2A–08A of the Courts Article and § 14–405 of the Health Occupations Article, as enacted by Section 1 of this Act, shall be construed to apply only prospectively and may not be applied or interpreted to have any effect on or application to any claim filed in the Health Claims Arbitration Office or case filed in a court before the effective date of this Act.

SECTION 5. AND BE IT FURTHER ENACTED, That the Office of Legislative Audits shall audit the Health Claims Arbitration Fund under § 3 2A 03A of the Courts Article and the transactions of the Health Claims Arbitration Office to determine the amount of any money remaining in the Health Claims Arbitration Fund and any outstanding obligations of the Health Claims Arbitration Office as of October 1, 2005. On or before December 1, 2005, the Office of Legislative Audits shall submit a report of the audit, subject to § 2 1246 of the State Government Article, to the Legislative Policy Committee. On or before January 1, 2006, the Health Claims Arbitration Office shall return any unspent money identified in the audit report to the General Fund, on the effective date of this Act, the Health Claims Arbitration Office shall be renamed the Health Care Alternative Dispute Resolution Office. The publishers of the Annotated Code of Maryland, in consultation with and subject to the approval of the Department of Legislative Services, shall correct all references in the Code to the Health Claims Arbitration Office, including any references enacted in this Act, that are rendered incorrect by this Section.

SECTION 6. AND BE IT FURTHER ENACTED, That, notwithstanding any other provision of law, the premium tax imposed under § 6–102 of the Insurance Article, as enacted by Section 1 of this Act, shall be applicable to:

- (1) capitation payments, supplemental payments, and bonus payments, made to managed care organizations on or after January 1, 2005; and
- (2) subscription charges or other amounts paid to a health maintenance organization on or after January 1, 2005, regardless of when the policy, contract, or health benefit plan as to which the payment was made was issued, delivered, or renewed.

SECTION 7. AND BE IT FURTHER ENACTED, That § 19–104(c) of the Insurance Article, as enacted by Section 1 of this Act, shall apply to all health care provider professional liability insurance policies and contracts issued, delivered, or renewed after the effective date of this Act.