

~~{(b)} (c) (1) [A] IF A preferred provider insurance policy offered by an insurer under this subtitle [shall provide] PROVIDES for payment of services rendered by nonpreferred providers, THE INSURER SHALL ESTABLISH PAYMENT as provided in this subsection.~~

~~(2) Unless the insurer demonstrates to the satisfaction of the Commissioner that an alternative level of payment is more appropriate, aggregate payments made in a full calendar year to nonpreferred providers, after all deductible and copayment provisions have been applied, on average may not be less than 80% of the aggregate payments made in that full calendar year to preferred providers for similar services, in the same geographic area, under their provider service contracts.~~

~~(D) A PREFERRED PROVIDER INSURANCE POLICY SHALL ALLOW DIRECT ACCESS TO SPECIALISTS.~~

~~{(c)} (E) (1) In this subsection, "unfair discrimination" means an act, method of competition, or practice engaged in by an insurer:~~

~~(i) that is prohibited by Title 27, Subtitle 2 of this article; or~~

~~(ii) that, although not specified in Title 27, Subtitle 2 of this article, the Commissioner believes is unfair or deceptive and that results in the institution of an action by the Commissioner under § 27-104 of this article.~~

~~(2) If the rates for each institutional provider under a preferred provider insurance policy offered by an insurer vary based on individual negotiations, geographic differences, or market conditions and are approved by the Health Services Cost Review Commission, the rates do not constitute unfair discrimination under this article.~~

14-205.1.

(A) THE COMMISSIONER MAY AUTHORIZE AN INSURER OR NONPROFIT HEALTH SERVICE PLAN TO OFFER A PREFERRED PROVIDER INSURANCE POLICY THAT CONDITIONS THE PAYMENT OF BENEFITS ON THE USE OF PREFERRED PROVIDERS IF THE INSURER OR NONPROFIT HEALTH SERVICE PLAN:

(1) HAS DEMONSTRATED TO THE SECRETARY OF HEALTH AND MENTAL HYGIENE THAT THE PROVIDER PANEL OF THE INSURER OR NONPROFIT HEALTH SERVICE PLAN COMPLIES WITH THE REGULATIONS ADOPTED UNDER § 19-705.1(B)(1)(II) OF THE HEALTH - GENERAL ARTICLE; AND