CHAPTER 82

(Senate Bill 164)

AN ACT concerning

Insurance - Filing and Approval of Forms and Rates

FOR the purpose of extending the period of time within which the Insurance Commissioner may review certain forms and rates to determine compliance with applicable provisions of law before those forms are deemed approved by operation of law; removing the extension period for certain filing; and generally relating to the filing with and approval by the Insurance Commissioner of forms and rates.

BY repealing and reenacting, with amendments,

Article 48A - Insurance Code

Section 356(a), 375(b), and 436H(b) and (c)

Annotated Code of Maryland

(1991 Replacement Volume and 1991 Supplement)

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:

Article 48A - Insurance Code

356.

(a) No corporation subject to the provisions of this subtitle shall amend its certificate of incorporation, its bylaws, the terms and provisions of contracts executed or to be executed with hospitals, physicians, chiropodists, chiropractors, pharmacists, dentists, psychologists, or optometrists, and the terms and provisions of contracts issued, or proposed to be issued, to subscribers of the plan, until such proposed amendments have been first submitted to, and approved by, the Insurance Commissioner, and payment made of the fees provided for by § 41 of this article; nor shall any change be made in the table of rates charged, or proposed to be charged, to subscribers for any form of contract issued or to be issued for hospital, medical, chiropodial, chiropractic, pharmaceutical, dental, psychological, or optometric care until such proposed change has been submitted to, and approved by, the Insurance Commissioner. Each amendment shall be on file for a waiting period of [45] 60 working days before it becomes effective. When in the Commissioner's opinion an amendment is not accompanied by the information needed to support it and the Commissioner does not have sufficient information to determine whether the filing meets the requirements of this section, the nonprofit health service plan shall be required to furnish the needed information and in this event the waiting period shall be suspended and shall recommence as of the date the information is furnished. Upon written application by the nonprofit health service plan, the Commissioner may authorize an amendment which he has reviewed to become effective before the expiration of the waiting period or any extension thereof or at any later date. A filing shall be deemed approved unless disapproved by the Commissioner within the waiting period or any extension thereof. The Commissioner shall disapprove or modify