

CHAPTER 233

(Senate Bill 176)

AN ACT concerning

Health Insurance – Summary Explanation of Benefits

FOR the purpose of requiring a nonprofit health service plan and a health insurer to provide a an annual summary explanation of benefits to an insured individual under certain circumstances ~~at certain times~~; requiring the summary explanation of benefits to include certain information; providing for a delayed effective date; and generally relating to a summary explanation of benefits by a nonprofit health service plan and a health insurer.

BY adding to

Article 48A – Insurance Code

Section 354KK, 470AA, and 477KK

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

354KK.

(A) EVERY NONPROFIT HEALTH SERVICE PLAN PROPOSING TO ISSUE OR DELIVER A HEALTH INSURANCE POLICY OR CONTRACT OR ADMINISTER A HEALTH BENEFIT PROGRAM THAT PROVIDES HOSPITAL, MEDICAL, OR SURGICAL BENEFITS ON AN EXPENSE INCURRED BASIS SHALL PROVIDE A TO AN INSURED INDIVIDUAL WHO HAS FILED A CLAIM DESCRIBED UNDER SUBSECTION (B) OF THIS SECTION AN ANNUAL SUMMARY EXPLANATION OF BENEFITS TO AN INSURED INDIVIDUAL WITHIN 3 MONTHS AFTER:

~~(1) A COVERED INPATIENT HOSPITALIZATION; OR~~

~~(2) A COVERED OUTPATIENT SURGICAL PROCEDURE THAT COVERS THE PRECEDING 12-MONTH PERIOD.~~

(B) THE SUMMARY EXPLANATION OF BENEFITS REQUIRED UNDER SUBSECTION (A) OF THIS SECTION SHALL PROVIDE A SUMMARY OF:

(1) ALL CLAIMS FILED BY HEALTH CARE PROVIDERS FOR SERVICES RENDERED TO THE INSURED INDIVIDUAL OR COVERED DEPENDENT OF THE INSURED INDIVIDUAL DURING AN INPATIENT HOSPITALIZATION OR AN OUTPATIENT SURGICAL PROCEDURE;