

SENATE BILL 744

J1

(8lr2825)

ENROLLED BILL

—Finance/Health and Government Operations—

Introduced by **Senator Pugh**

Read and Examined by Proofreaders:

Proofreader.

Proofreader.

Sealed with the Great Seal and presented to the Governor, for his approval this

_____ day of _____ at _____ o'clock, _____ M.

President.

CHAPTER _____

1 AN ACT concerning

2 **Task Force on Health Care Access and Reimbursement – Additional Duties**

3 FOR the purpose of altering the charge to the Task Force on Health Care Access and
4 Reimbursement to develop certain recommendations; and generally relating to
5 the recommendations of the Task Force on Health Care Access and
6 Reimbursement.

7 BY repealing and reenacting, with amendments,
8 Article – Health – General
9 Section 19–710.3(f)
10 Annotated Code of Maryland
11 (2005 Replacement Volume and 2007 Supplement)

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

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

Underlining indicates amendments to bill.

~~Strike out~~ indicates matter stricken from the bill by amendment or deleted from the law by amendment.

Italics indicate opposite chamber / conference committee amendments.



1 **Article - Health - General**

2 19-710.3.

3 (f) The Task Force shall develop recommendations regarding:

4 (1) Specific options that are available, given limitations of the federal
5 ERISA law, to change physician and other health care provider reimbursements, if
6 needed;7 (2) The sufficiency of present statutory formulas for the
8 reimbursement of noncontracting physicians and other health care providers by health
9 maintenance organizations;10 (3) Whether the Maryland Insurance Administration and the Attorney
11 General currently have sufficient authority to regulate rate setting and
12 market-related practices of health insurance carriers that may have the effect of
13 unreasonably reducing reimbursements;14 (4) Whether there is a need to enhance the ability of physicians and
15 other health care providers to negotiate reimbursement rates with health insurance
16 carriers, without unduly impairing the ability of the carriers to appropriately manage
17 their provider networks;18 (5) Whether there is a need to establish a rate-setting system for
19 physicians and other health care providers similar to the system established to set
20 hospital rates in Maryland;21 (6) The advisability of the use of payment methods linked to quality of
22 care or outcomes; [and]23 (7) The need to prohibit a health insurance carrier from requiring
24 health care providers who join a provider network of the carrier to also serve on a
25 provider network of a different carrier; ~~AND~~26 **(8) WHETHER THERE IS A NEED TO PROVIDE INCENTIVES FOR**
27 **PHYSICIANS AND OTHER HEALTH CARE PROVIDERS TO BE AVAILABLE TO**
28 **PROVIDE CARE ON EVENINGS AND ON WEEKENDS; AND**29 **(9) THE ABILITY OF PRIMARY CARE PHYSICIANS TO BE**
30 **REIMBURSED FOR MENTAL HEALTH SERVICES PERFORMED WITHIN THEIR SCOPE**
31 **OF PRACTICE.**32 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
33 June 1, 2008.

Approved:

Governor.

President of the Senate.

Speaker of the House of Delegates.