

(B) AN INSURER WHO ISSUES OR DELIVERS A HEALTH INSURANCE POLICY TO ANY PERSON IN THE STATE MAY SEEK REPAYMENT FROM A HEALTH CARE PRACTITIONER OF ANY MONEYS PAID FOR ANY CLAIM, BILL, OR OTHER DEMAND OR REQUEST FOR PAYMENT FOR THE HEALTH CARE SERVICES THAT WERE DETERMINED BY THE APPROPRIATE REGULATORY LICENSING BOARD TO BE FURNISHED AS A RESULT OF A REFERRAL PROHIBITED BY § 1-302 OF THE HEALTH OCCUPATIONS ARTICLE.

(C) EVERY HEALTH INSURANCE POLICY ISSUED FOR DELIVERY IN THE STATE WHICH PROVIDES COVERAGE FOR HEALTH CARE SERVICES SHALL INCLUDE A PROVISION EXCLUDING PAYMENT OF ANY CLAIM, BILL, OR OTHER DEMAND OR REQUEST FOR PAYMENT FOR HEALTH CARE SERVICES DETERMINED TO BE FURNISHED AS A RESULT OF A REFERRAL PROHIBITED BY § 1-302 OF THE HEALTH OCCUPATIONS ARTICLE.

(D) AN INSURER SUBJECT TO THE PROVISIONS OF THIS SECTION SHALL REPORT TO THE COMMISSIONER AND THE APPROPRIATE REGULATORY BOARD ANY PATTERN OF CLAIMS, BILLS OR OTHER DEMANDS OR REQUESTS FOR PAYMENT SUBMITTED FOR A HEALTH CARE SERVICE PROVIDED AS A RESULT OF A REFERRAL PROHIBITED BY § 1-302 OF THE HEALTH OCCUPATIONS ARTICLE WITHIN 30 DAYS AFTER THAT INSURER HAS KNOWLEDGE OF THAT PATTERN.

(E) (1) NOTWITHSTANDING THE PROVISIONS OF THIS SECTION, AN INSURER REIMBURSING FOR HEALTH CARE SERVICES IS NOT REQUIRED TO AUDIT OR INVESTIGATE ANY CLAIM, BILL, OR OTHER DEMAND OR REQUEST FOR PAYMENT FOR THE PURPOSE OF DETERMINING WHETHER THOSE SERVICES WERE THE RESULT OF A PROHIBITED REFERRAL.

(2) ANY AUDIT OR INVESTIGATION OF ANY CLAIM, BILL, OR OTHER DEMAND OR REQUEST FOR PAYMENT FOR THE PURPOSE OF DETERMINING WHETHER THOSE SERVICES WERE THE RESULT OF A PROHIBITED REFERRAL ARE NOT GROUNDS TO DELAY PAYMENT OR WAIVE THE PROVISIONS OF § 470U OF THIS ARTICLE.

(F) FOR ANY CLAIM, BILL, OR REQUEST FOR PAYMENT THAT IS PAID AND SUBSEQUENTLY DETERMINED TO BE THE RESULT OF A PROHIBITED REFERRAL, AN INSURER MAY SEEK A REFUND OF THAT PAYMENT IN ACCORDANCE WITH THE PROVISIONS OF § 1-305 OF THE HEALTH OCCUPATIONS ARTICLE.

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(A) IN THIS SECTION, "HEALTH CARE PRACTITIONER", "HEALTH CARE ENTITY", AND "HEALTH CARE SERVICE" HAVE THE SAME MEANINGS AS PROVIDED IN § 1-301 OF THE HEALTH OCCUPATIONS ARTICLE.

(B) AN INSURER MAY SEEK REPAYMENT FROM A HEALTH CARE PROVIDER OF ANY MONEYS PAID FOR ANY CLAIM, BILL, OR OTHER DEMAND OR REQUEST FOR PAYMENT FOR THE HEALTH CARE SERVICES THAT WERE DETERMINED BY THE APPROPRIATE REGULATORY LICENSING BOARD TO BE FURNISHED AS A RESULT OF A REFERRAL PROHIBITED BY § 1-302 OF THE HEALTH OCCUPATIONS ARTICLE.