

~~may not on the average be less than 80 percent of the aggregate payments in that full calendar year to preferred providers for similar services in the same geographic area pursuant to the providers' agreements to provide the services under their provider service agreements.~~

~~(4) FOR THE COMPREHENSIVE STANDARD HEALTH BENEFIT PLAN ESTABLISHED UNDER THE PROVISIONS OF § 700 OF THIS ARTICLE, THE AGGREGATE PAYMENTS IN ANY FULL CALENDAR YEAR MADE UNDER THIS PARAGRAPH TO NONPREFERRED PROVIDERS AFTER ALL DEDUCTIBLE AND COPAYMENT PROVISIONS HAVE BEEN APPLIED MAY NOT ON THE AVERAGE BE LESS THAN 75 PERCENT OF THE AGGREGATE PAYMENTS IN THAT FULL CALENDAR YEAR TO PREFERRED PROVIDERS FOR SIMILAR SERVICES IN THE SAME GEOGRAPHIC AREA IN ACCORDANCE WITH THE PROVIDERS' AGREEMENTS TO PROVIDE THE SERVICES UNDER THEIR PROVIDER SERVICE AGREEMENTS.~~

~~Article — Health — General~~

~~19-710.~~

~~(R) (1) EXCEPT AS PROVIDED IN PARAGRAPH (3) OF THIS SUBSECTION, A HEALTH MAINTENANCE ORGANIZATION IS SUBJECT TO THE PROVISIONS OF ARTICLE 48A, § 657 OF THE CODE.~~

~~(2) THE PROVISIONS OF SUBSECTION (O) OF THIS SECTION DO NOT APPLY TO ANY CHARGES BY A PROVIDER NOT UNDER A WRITTEN CONTRACT WITH A HEALTH MAINTENANCE ORGANIZATION FOR PROFESSIONAL SERVICES RENDERED UNDER THIS SUBSECTION WHO, PRIOR TO PROVIDING SERVICES, DISCLOSES TO THE PATIENT:~~

~~(I) THAT THE PROVIDER IS NOT UNDER A WRITTEN CONTRACT WITH THE PATIENT'S HEALTH MAINTENANCE ORGANIZATION; AND~~

~~(II) THE PROVIDER'S CHARGES FOR THE SERVICES.~~

~~(3) PARAGRAPH (1) OF THIS SUBSECTION DOES NOT APPLY TO SERVICES PROVIDED SOLELY THROUGH EMPLOYEES OF THE HEALTH MAINTENANCE ORGANIZATION.~~

Article 48A — Insurance Code

490BB.

(A) (1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS INDICATED.

(2) (1) "CARRIER" MEANS:

1. AN INSURER;
2. A NONPROFIT HEALTH SERVICE PLAN;
3. A HEALTH MAINTENANCE ORGANIZATION;
4. A DENTAL PLAN ORGANIZATION; OR