

(E) "DISCOUNT MEDICAL PLAN ORGANIZATION" MEANS AN ENTITY THAT:

(1) CONTRACTS DIRECTLY OR INDIRECTLY WITH PROVIDERS OR PROVIDER NETWORKS TO PROVIDE MEDICAL SERVICES AT A DISCOUNT TO PLAN MEMBERS; AND

(2) DETERMINES THE CHARGE TO PLAN MEMBERS.

(F) "HOSPITAL SERVICES" HAS THE MEANING STATED IN § 19-201 OF THE HEALTH - GENERAL ARTICLE.

(G) "MEDICAL SERVICES" MEANS ANY CARE, SERVICE, OR TREATMENT OF ILLNESS OR DYSFUNCTION OF, OR INJURY TO, THE HUMAN BODY, INCLUDING PHYSICIAN CARE, OUTPATIENT SERVICES, AMBULANCE SERVICES, DENTAL CARE SERVICES, VISION CARE SERVICES, MENTAL HEALTH SERVICES, SUBSTANCE ABUSE SERVICES, CHIROPRACTIC SERVICES, PODIATRIC CARE SERVICES, AND LABORATORY SERVICES.

(H) "MEDICARE PRESCRIPTION DRUG PLAN" MEANS A PLAN THAT PROVIDES A MEDICARE PART D PRESCRIPTION DRUG BENEFIT IN ACCORDANCE WITH THE REQUIREMENTS OF THE FEDERAL MEDICARE MODERNIZATION ACT.

(I) "PLAN MEMBER" MEANS ANY INDIVIDUAL WHO PAYS FEES, DUES, CHARGES, OR OTHER FINANCIAL CONSIDERATION FOR THE RIGHT TO RECEIVE THE BENEFITS OF A DISCOUNT MEDICAL PLAN OR A DISCOUNT DRUG PLAN.

(J) "PROVIDER" MEANS:

(1) ANY PERSON OR INSTITUTION WHICH IS CONTRACTED, DIRECTLY OR INDIRECTLY, WITH A DISCOUNT MEDICAL PLAN ORGANIZATION TO PROVIDE MEDICAL SERVICES TO PLAN MEMBERS; OR

(2) ANY PERSON OR INSTITUTION WHICH IS CONTRACTED, DIRECTLY OR INDIRECTLY, WITH A DISCOUNT DRUG PLAN ORGANIZATION TO PROVIDE PHARMACEUTICAL SUPPLIES, PRESCRIPTION DRUGS, OR MEDICAL EQUIPMENT AND SUPPLIES TO PLAN MEMBERS.

(K) "STATE PRESCRIPTION DRUG PLAN" MEANS ANY DISCOUNT PLAN OPERATED BY A STATE AGENCY.

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