

Article - Insurance

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§15-10A-06.

(a) On a quarterly basis, each carrier shall submit to the Commissioner, on the form the Commissioner requires, a report that describes:

- (1) the activities of the carrier under this subtitle, including:
 - (i) the outcome of each grievance filed with the carrier;
 - (ii) the number and outcomes of cases that were considered emergency cases under § 15-10A-02(b)(2)(i) of this subtitle;
 - (iii) the time within which the carrier made a grievance decision on each emergency case;
 - (iv) the time within which the carrier made a grievance decision on all other cases that were not considered emergency cases;
 - (v) the number of grievances filed with the carrier that resulted from an adverse decision involving length of stay for inpatient hospitalization as related to the medical procedure involved; and
 - (vi) the number of adverse decisions issued by the carrier under § 15-10A-02(f) of this subtitle and the type of service at issue in the adverse decisions; and
- (2) the number and outcome of all other cases that are not subject to activities of the carrier under this subtitle that resulted from an adverse decision involving the length of stay for inpatient hospitalization as related to the medical procedure involved.

(b) The Commissioner shall:

- (1) compile an annual summary report based on the information provided:
 - (i) under subsection (a) of this section; and
 - (ii) by the Secretary under § 19-705.2(e) of the Health - General Article; and
- (2) provide copies of the summary report to the Governor and, subject to § 2-1246 of the State Government Article, to the General Assembly.

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