

(f) "Member" means a person who makes a contract or on whose behalf a contract is made with a health maintenance organization for health care services.

(h) "Subscriber" means a person who makes a contract with a health maintenance organization, either directly or through an insurer or marketing organization, under which the person or other designated persons are entitled to the health care services.

19-705.2.

(A) WITH THE ADVICE OF THE COMMISSIONER, THE SECRETARY SHALL ADOPT REGULATIONS TO ESTABLISH A SYSTEM FOR THE RECEIPT AND TIMELY INVESTIGATION OF COMPLAINTS OF MEMBERS AND SUBSCRIBERS OF HEALTH MAINTENANCE ORGANIZATIONS CONCERNING THE OPERATION OF ANY HEALTH MAINTENANCE ORGANIZATION IN THIS STATE.

(B) THE COMPLAINT SYSTEM SHALL INCLUDE:

(1) A PROCEDURE FOR ACKNOWLEDGING THE TIMELY ACKNOWLEDGEMENT OF RECEIPT OF A COMPLAINT WITHIN 30-DAYS;

(2) CRITERIA FOR DETERMINING THE APPROPRIATE LEVEL OF INVESTIGATION FOR A COMPLAINT CONCERNING QUALITY OF CARE; AND , INCLUDING:

(I) A DETERMINATION AS TO WHETHER THE MEMBER OR SUBSCRIBER WITH THE COMPLAINT PREVIOUSLY ATTEMPTED TO HAVE THE COMPLAINT RESOLVED; AND

(II) A DETERMINATION AS TO WHETHER A COMPLAINT SHOULD BE SENT TO THE MEMBER'S OR SUBSCRIBER'S HEALTH MAINTENANCE ORGANIZATION FOR RESOLUTION PRIOR TO INVESTIGATION UNDER THE PROVISIONS OF THIS SECTION; AND

(3) A PROCEDURE FOR THE REFERRAL TO THE COMMISSIONER OF ALL COMPLAINTS, OTHER THAN QUALITY OF CARE COMPLAINTS, FOR AN APPROPRIATE INVESTIGATION.

(C) IF A DETERMINATION IS MADE TO INVESTIGATE A COMPLAINT UNDER THE PROVISIONS OF THIS SECTION PRIOR TO THE MEMBER OR SUBSCRIBER ATTEMPTING TO OTHERWISE RESOLVE THE COMPLAINT, THE REASONS FOR THAT DETERMINATION SHALL BE DOCUMENTED.

(e) (D) NOTICE OF THE COMPLAINT SYSTEM ESTABLISHED UNDER THE PROVISIONS OF THIS SECTION SHALL BE INCLUDED IN ALL CONTRACTS BETWEEN A HEALTH MAINTENANCE ORGANIZATION AND A MEMBER OR SUBSCRIBER OF A HEALTH MAINTENANCE ORGANIZATION.

SECTION 2. AND BE IT FURTHER ENACTED, That: