

(i) Providing 24-hour access by telephone to a person who is able to appropriately respond to calls from members and providers concerning after-hours care; and

(ii) Providing a 24-hour toll free telephone access system for use in hospital emergency departments in accordance with § 19-705.7 of this subtitle;

(3) A requirement that any nonparticipating provider shall submit to the health maintenance organization the appropriate documentation of the medical complaint of the member and the services rendered;

(4) A requirement that a health maintenance organization shall have a physician available at all times to provide diagnostic and treatment services;

(5) A requirement that a health maintenance organization shall assure that:

(i) Each member who is seen for a medical complaint is evaluated under the direction of a physician; and

(ii) Each member who receives diagnostic evaluation or treatment is under the [direct] medical management of a health maintenance organization physician who provides continuing medical management;

(6) A requirement that each member shall have an opportunity to select a primary physician OR A CERTIFIED NURSE PRACTITIONER from among those available to the health maintenance organization; and

(7) A requirement that a health maintenance organization print, in any directory of participating providers or hospitals, in a conspicuous manner, the address, telephone number, and facsimile number of the State agency that members, enrollees, and insureds may call to discuss quality of care issues, life and health insurance complaints, and assistance in resolving billing and payment disputes with the health plan or health care provider, as follows:

(i) For quality of care issues and life and health care insurance complaints, the Maryland Insurance Administration; and

(ii) For assistance in resolving a billing or payment dispute with the health plan or a health care provider, the Health Education and Advocacy Unit of the Consumer Protection Division of the Office of the Attorney General.

(C) (1) A MEMBER MAY SELECT A CERTIFIED NURSE PRACTITIONER AS THE MEMBER'S PRIMARY CARE PROVIDER IF:

(I) THE CERTIFIED NURSE PRACTITIONER PROVIDES SERVICES AT THE SAME LOCATION AS THE CERTIFIED NURSE PRACTITIONER'S COLLABORATING PHYSICIAN; AND

(II) THE COLLABORATING PHYSICIAN PROVIDES THE CONTINUING MEDICAL MANAGEMENT REQUIRED UNDER SUBSECTION (B)(5) OF THIS SECTION.