COVERAGE FOR EMPLOYEES WHO ARE ELIGIBLE TO BECOME MEMBERS UNDER THE PLAN:

- (2) SHALL RETAIN THE SERVICES OF A PLAN ADMINISTRATOR TO ASSIST THE BOARD AS PROVIDED IN THIS SUBTITLE AS THE BOARD CONSIDERS APPROPRIATE; AND
- (3) MAY REPLACE A PLAN ADMINISTRATOR UPON A MAJORITY VOTE.
- (B) THE BOARD OR THE PLAN ADMINISTRATOR, AT THE DIRECTION OF THE BOARD, SHALL:
- (1) ESTABLISH EMPLOYER AND EMPLOYEE ELIGIBILITY CRITERIA FOR PARTICIPATION IN THE PLAN;
- (2) ESTABLISH ADMINISTRATIVE AND ACCOUNTING PROCEDURES FOR THE OPERATION OF THE PLAN;
- (3) ESTABLISH PROCEDURES UNDER WHICH APPLICANTS TO AND PARTICIPANTS IN THE PROGRAM MAY HAVE GRIEVANCES REVIEWED BY AN IMPARTIAL BODY AND REPORTED TO THE COMMISSIONER:
- (4) WORK COOPERATIVELY WITH AND DEVELOP A PROGRAM TO COMPENSATE LOCAL AGENTS AND BROKERS TO PROVIDE MARKETING AND ENROLLMENT SERVICES NECESSARY TO THE OPERATION OF THE PLAN:
- (5) DEVELOP AND IMPLEMENT A PROGRAM TO PUBLICIZE THE ELIGIBILITY REQUIREMENTS FOR THE PLAN AND THE PROCEDURES FOR ENROLLMENT IN THE PLAN;
- (6) SUBMIT TO THE COMMISSIONER PROPOSED REGULATIONS, AS NEEDED, FOR PURPOSES OF IMPLEMENTING THE PLAN;
- (7) AUTHORIZE THE PURCHASE OF INSURANCE AND REINSURANCE BY ANY RETAINED PLAN ADMINISTRATOR, AS NEEDED;
- (8) RETAIN THE SERVICES OF AN ADMINISTRATOR TO COLLECT PREMIUMS FROM THE PLAN MEMBERS;
- (9) RETAIN THE SERVICES OF A DIFFERENT ADMINISTRATOR TO ORGANIZE AND IMPLEMENT A SYSTEM OF MANAGED HEALTH CARE, INCLUDING FEE FOR SERVICE-BENEFITS, CAPITATED BENEFITS, AND PREFERRED PROVIDER ARRANGEMENTS;
- (10) RETAIN THE SERVICES OF A DIFFERENT ADMINISTRATOR FOR PURPOSES OF REIMBURSING ALL HEALTH-CARE PROVIDERS WHICH PROVIDE SERVICES TO PLAN MEMBERS;
  - (11) RETAIN THE SERVICES OF APPROPRIATE EXPERTS TO