

(2) If a health maintenance organization offers services that are within the scope of practice of a physician and another health care practitioner who is licensed under the Health Occupations Article, the health maintenance organization shall offer those services through other licensed health care practitioners, where appropriate, as determined by the health maintenance organization.

(g) The procedures for offering health care services and offering and terminating contracts to subscribers may not discriminate unfairly on the basis of age, sex, race, health, or economic status. This requirement does not prohibit:

(1) Reasonable underwriting classifications for establishing contract rates; or

(2) Experience rating.

(H) (1) THE TERMS OF THE AGREEMENTS BETWEEN A HEALTH MAINTENANCE ORGANIZATION AND PROVIDERS OF HEALTH SERVICES SHALL CONTAIN A "HOLD HARMLESS" CLAUSE.

(2) THE HOLD HARMLESS CLAUSE SHALL PROVIDE THAT THE PROVIDER MAY NOT, UNDER ANY CIRCUMSTANCES, INCLUDING NONPAYMENT OF MONEYS DUE THE PROVIDERS BY THE HEALTH MAINTENANCE ORGANIZATION, INSOLVENCY OF THE HEALTH MAINTENANCE ORGANIZATION, OR BREACH OF THE PROVIDER CONTRACT, BILL, CHARGE, COLLECT A DEPOSIT, SEEK COMPENSATION, REMUNERATION, OR REIMBURSEMENT FROM, OR HAVE ANY RECOURSE AGAINST THE SUBSCRIBER, MEMBER, ENROLLEE, PATIENT, OR ANY PERSONS OTHER THAN THE HEALTH MAINTENANCE ORGANIZATION ACTING ON THEIR BEHALF, FOR SERVICES PROVIDED IN ACCORDANCE WITH THE PROVIDER CONTRACT.

(3) COLLECTION FROM THE SUBSCRIBER OR MEMBER OF COPAYMENTS OR SUPPLEMENTAL CHARGES IN ACCORDANCE WITH THE TERMS OF THE SUBSCRIBER'S CONTRACT WITH THE HEALTH MAINTENANCE ORGANIZATION, OR CHARGES FOR SERVICES NOT COVERED UNDER THE SUBSCRIBER'S CONTRACT, MAY BE EXCLUDED FROM THE HOLD HARMLESS CLAUSE.

(4) EACH PROVIDER CONTRACT SHALL STATE THAT THE HOLD HARMLESS CLAUSE WILL SURVIVE THE TERMINATION OF THE PROVIDER CONTRACT, REGARDLESS OF THE CAUSE OF TERMINATION.

[(h)] (I) The health maintenance organization shall provide evidence of adequate insurance coverage or an adequate plan for self-insurance to satisfy claims for injuries that may occur from providing health care.

[(i)] (J) The health maintenance organization shall provide for having its health and medical facilities and services audited and reviewed periodically: