

on the type of minimum participation requirement that a carrier may impose, see § 15-1206(c) of this subtitle.

- Defined terms: "Carrier" § 15-1201
"Eligible employee" § 15-1201
"Health insurance" § 1-101
"Person" § 1-101
"Small employer" § 15-1201

15-1204. REQUIREMENTS AND LIMITATIONS FOR CARRIERS.

(A) IN GENERAL.

IN ADDITION TO ANY OTHER REQUIREMENT UNDER THIS ARTICLE, A CARRIER SHALL:

(1) HAVE DEMONSTRATED THE CAPACITY TO ADMINISTER THE HEALTH BENEFIT PLAN, INCLUDING ADEQUATE NUMBERS AND TYPES OF ADMINISTRATIVE PERSONNEL;

(2) HAVE A SATISFACTORY GRIEVANCE PROCEDURE AND ABILITY TO RESPOND TO ENROLLEES' CALLS, QUESTIONS, AND COMPLAINTS;

(3) PROVIDE, IN THE CASE OF INDIVIDUALS COVERED UNDER MORE THAN ONE HEALTH BENEFIT PLAN, FOR COORDINATION OF COVERAGE UNDER ALL OF THOSE HEALTH BENEFIT PLANS IN AN EQUITABLE MANNER; AND

(4) DESIGN POLICIES TO HELP ENSURE ADEQUATE ACCESS TO PROVIDERS OF HEALTH CARE.

(B) STANDARD PLAN REQUIRED.

A PERSON MAY NOT OFFER A HEALTH BENEFIT PLAN IN THE STATE UNLESS THE PERSON OFFERS AT LEAST THE STANDARD PLAN.

(C) LESS THAN MINIMUM COVERAGE PROHIBITED.

A CARRIER MAY NOT OFFER A HEALTH BENEFIT PLAN THAT HAS FEWER BENEFITS THAN THOSE IN THE STANDARD PLAN.

(D) OPTIONAL ADDITIONAL COVERAGE.

A CARRIER MAY OFFER BENEFITS IN ADDITION TO THOSE IN THE STANDARD PLAN IF THE ADDITIONAL BENEFITS:

(1) ARE OFFERED AND PRICED SEPARATELY FROM BENEFITS SPECIFIED IN ACCORDANCE WITH § 15-1207 OF THIS SUBTITLE; AND

(2) DO NOT HAVE THE EFFECT OF DUPLICATING ANY OF THOSE BENEFITS.

(E) POINT OF SERVICE DELIVERY SYSTEM.

NOTWITHSTANDING SUBSECTION (B) OF THIS SECTION, A HEALTH MAINTENANCE ORGANIZATION MAY PROVIDE A POINT OF SERVICE DELIVERY