## VETOES

- [(e)] (G) "Secretary" means the Secretary of Health and Mental Hygiene.
- [(f)] (H) "Commissioner" means the Insurance Commissioner.
- [(g)] (I) "Certificate" means a certificate of registration granted by the Secretary to a private review agent.

19-1305.

In conjunction with the application, the private review agent shall submit information that the Secretary requires including:

- (1) A utilization review plan that includes:
- (i) A description of review standards and procedures to be used in evaluating proposed or delivered hospital care;
- (ii) Those circumstances, if any, under which utilization review may be delegated to a hospital utilization review program; and
- (iii) The provisions by which patients, physicians, or hospitals may seek reconsideration or appeal of adverse decisions by the private review agent;
- (2) The type and qualifications of the personnel either employed or under contract to perform the utilization review;
- (3) The procedures and policies to ensure that a representative of the private review agent is reasonably accessible to patients {and providers} 5 days a week during normal business hours in this State;
- (4) THE PROCEDURES AND POLICIES TO ENSURE THAT A REPRESENTATIVE OF THE PRIVATE RÉVIEW AGENT IS REASONABLY ACCESSIBLE TO PROVIDERS 24 HOURS A DAY 7 DAYS A WEEK IN THIS STATE FOR THE PURPOSE OF AUTHORIZING EMERGENCY CARE:
- $\{(4)\}$  (5) The policies and procedures to ensure that all applicable State and federal laws to protect the confidentiality of individual medical records are followed;
- $\{(5)\}$  (6) A copy of the materials designed to inform applicable patients and providers of the requirements of the utilization review plan; and
- $\{(6)\}$  A list of the third party payors for which the private review agent is performing utilization review in this State.

19-1307.

- (a) (1) The Secretary shall deny a certificate to any applicant if, upon review of the application, the Secretary finds that the applicant proposing to conduct utilization review does not:
- (i) Have available the services of sufficient numbers of registered nurses, medical records technicians or similarly qualified persons supported and supervised by appropriate physicians to carry out its utilization review activities; and