

(ii) INCLUDE IN THE ANNUAL SUMMARY REPORT THE RESULTS OF THE EVALUATION AND ANY PROPOSED CHANGES THAT IT CONSIDERS NECESSARY.

15-10A-09.

(A) THE COMMISSIONER SHALL ADOPT REGULATIONS TO CARRY OUT THIS SUBTITLE.

(B) IN ADDITION TO SUBSECTION (A) OF THIS SECTION, ON OR BEFORE JANUARY 1, 1999, THE COMMISSIONER SHALL ADOPT BY REGULATION A REQUIREMENT THAT EACH CARRIER PROVIDE A MECHANISM IN A FORM AND MANNER THAT THE COMMISSIONER MAY REQUIRE TO ENABLE A MEMBER TO BE INFORMED OF THE MEMBER'S RIGHT TO CHALLENGE A DECISION MADE BY A CARRIER THAT RESULTED IN THE NONPAYMENT OF A HEALTH CARE SERVICE.

Subtitle 10B. Private Review Agents.

15-10B-01.

(a) In this subtitle the following words have the meanings indicated.

(b) (1) "Adverse decision" means a utilization review determination made by a private review agent that a proposed or delivered health care service:

- (i) Is or was not MEDICALLY necessary, appropriate, or efficient;
- and
- (ii) May result in noncoverage of the health care service.

(2) There is no adverse decision if the private review agent and the health care provider on behalf of the patient reach an agreement on the proposed or delivered health care services.

(C) "CERTIFICATE" MEANS A CERTIFICATE OF REGISTRATION GRANTED BY THE COMMISSIONER TO A PRIVATE REVIEW AGENT.

[(c)] (D) (1) "Employee assistance program" means a health care service plan that, in accordance with a contract with an employer, or labor union:

- (i) Consults with employees or members of an employee's family or both to:
  1. Identify the employee's or the employee's family member's mental health, alcohol, or substance abuse problems; and
  2. Refer the employee or the employee's family member to health care providers or other community resources for counseling, therapy, or treatment; and
- (ii) Performs utilization review for the purpose of making claims or payment decisions on behalf of the employer's or labor union's health insurance or health benefit plan.