(1)   SUBMIT AN APPLICATION TO THE COMMISSIONER ON THE FORM REQUIRED BY THE COMMISSIONER; AND

(2)   PAY TO THE COMMISSIONER AN APPLICATION FEE OF NO MORE THAN $100 ESTABLISHED BY THE COMMISSIONER BY REGULATION.

(B)   THE APPLICATION SHALL INCLUDE:

(1)   A DESCRIPTION OF THE APPLICANT'S PROFESSIONAL QUALIFICATIONS, INCLUDING MEDICAL EDUCATION INFORMATION AND, IF APPROPRIATE, BOARD CERTIFICATIONS AND LICENSURE STATUS;

(2)   THE UTILIZATION MANAGEMENT PROCEDURES AND POLICIES *TO BE USED BY THE HEALTH MAINTENANCE ORGANIZATION*; AND

(3)   CERTIFICATION BY THE MEDICAL DIRECTOR THAT THE UTILIZATION MANAGEMENT PROCEDURES AND POLICIES ARE:

(I)   OBJECTIVE;

(II)   CLINICALLY VALID;

(III)   ~~COMPATIBLE WITH ESTABLISHED PRINCIPLES OF PATIENT CARE AND HEALTH CARE SERVICE DELIVERY; AND~~

(III)   COMPATIBLE WITH ESTABLISHED PRINCIPLES OF HEALTH CARE; AND

(IV)   FLEXIBLE ENOUGH TO ALLOW DEVIATIONS FROM THE NORMS WHEN JUSTIFIED ON A CASE BY CASE BASIS.

(C)   THE DELEGATION BY A MEDICAL DIRECTOR OF ANY OF THE MEDICAL DIRECTOR'S RESPONSIBILITIES UNDER THIS SUBTITLE TO AN ASSOCIATE MEDICAL DIRECTOR OR AN ASSISTANT MEDICAL DIRECTOR DOES NOT PREVENT THE MEDICAL DIRECTOR, REGARDLESS OF THE DELEGATION, FROM BEING HELD RESPONSIBLE FOR ANY VIOLATION OF THIS SUBTITLE.

15–10C–04.

(A)   SUBJECT TO THE HEARING PROCEDURES IN §§ 2–210 THROUGH 2–214 OF THIS ARTICLE, THE COMMISSIONER MAY SUSPEND, REVOKE, OR REFUSE TO RENEW A CERTIFICATE OF A MEDICAL DIRECTOR IF THE COMMISSIONER, ~~IN CONSULTATION WITH AN INDEPENDENT REVIEW ORGANIZATION OR MEDICAL EXPERT THAT MEETS THE REQUIREMENTS OF § 15–10A–05 OF THIS TITLE, THE DEPARTMENT, THE BOARD, OR ANY OTHER APPROPRIATE ENTITY,~~ FINDS A PATTERN THAT THE UTILIZATION MANAGEMENT PROCEDURES AND POLICIES USED BY THE MEDICAL DIRECTOR IN MAKING UTILIZATION REVIEW DECISIONS OR USED BY A PRIVATE REVIEW AGENT EMPLOYED BY OR UNDER CONTRACT WITH THE HEALTH MAINTENANCE ORGANIZATION OVER WHOSE UTILIZATION REVIEW DECISIONS THE MEDICAL DIRECTOR HAS RESPONSIBILITY ARE NOT:

(1)   OBJECTIVE;