

**191—76.6(514J) Expedited review.**

**76.6(1)** The enrollee's treating health care provider shall directly contact the carrier or organized delivery system for an expedited review if the enrollee's treating health care provider states that delay would pose an imminent or serious threat to the enrollee.

**76.6(2)** The enrollee's treating health care provider and the carrier or organized delivery system shall select within 72 hours an independent review entity to conduct the external review. In the event that the enrollee's treating health care provider and the carrier or organized delivery system cannot reach an agreement upon the selection of an independent review entity, the enrollee's treating health care provider shall notify the commissioner who shall select an independent review entity.

**76.6(3)** The carrier or organized delivery system and the enrollee's treating health care provider shall provide any additional medical information to the review entity.

**76.6(4)** The enrollee's treating health care provider shall notify the commissioner of the expedited review request following the agreement in subrule 76.6(2).

**76.6(5)** In the event the carrier or organized delivery system does not find that a delay would pose an imminent or serious threat to the enrollee, the enrollee's treating health care provider may ask the commissioner to immediately review the request for certification as an expedited review.

**76.6(6)** A review by the commissioner under subrule 76.6(5) shall stay the 72-hour expedited review time period.