

## **514I.6 Participating insurers.**

Participating insurers shall meet the qualifying standards established by rule under this chapter and shall perform all of the following functions:

1. Provide plan cards and membership booklets to qualifying families.
2. Provide or reimburse accessible, quality medical services.
3. Require that any plan provided by the participating insurer establishes and maintains a conflict management system that includes methods for both preventing and resolving disputes involving the health care needs of eligible children, and a process for resolution of such disputes.
4. Provide the administrative contractor with all of the following information pertaining to the participating insurer's plan:
  - a.* A list of providers of medical services under the plan.
  - b.* Information regarding plan rules relating to referrals to specialists.
  - c.* Information regarding the plan's conflict management system.
  - d.* Other information as directed by the board.
5. Submit a plan for a health improvement program to the department, for approval by the board.
6. Develop a plan for provider network development including criteria for access to pediatric subspecialty services.

98 Acts, ch 1196, §7, 16; 2003 Acts, ch 108, §131; 2003 Acts, ch 124, §8