



## **HEALTHCARE FACILITY REGULATION DIVISION**

### **HMO REQUIREMENTS**

The HMO should ascertain that all policies and procedures are on file with the Department of Community Health/Healthcare Facility Regulation Division.

1. **Basic Health Benefits of HMO. Regulation: 290-5-37.03, pages 4-9**
2. **Supplemental Health Services, if any. Regulation: 290-5-37.04, page 9.**
3. **Health Information systems: Regulation : 290-5-37.05, pages 9-11.**
  - a). **To assure to the Department that all health profiles of each enrollee contain specific documentation as per regulation.**
  - b). **To ensure that all contracts have the language for physicians to retain health information for the adult as well as for the minor child.**
4. **A system in place to assure confidentiality of medical information.**
5. **The written or present Quality Assurance plan**
6. **The HMO's present policies and procedures as they relate to the HMO's stated objective which governs the provisions of services by the HMO and approved by the Governing Body on an annual basis. Regulation: 290-5-37.08, pages 14-15**

These policies must contain:

  - a). **A system in place for the member advisory panel,**
  - b). **Complaint system.**
  - c). **An annual report which include a summary of statistical information as it relate to health care, cost of operation, patterns of utilization and availability and accessibility to service.**
  - d). **Separation of medical decisions,**
  - e). **Service area already approved.**
  - f). **Policies for professional services, i.e. physician, and consultant services, and inpatient and discharge services.**
7. **A narrative summary of the service area, listing the counties and the type of HMO.**
8. **Exhibits, which include:**
  - a). **Marketing strategies of HMO for service area.**
  - b). **Letters of intent for physicians, hospitals and ancillary services in each county.**
  - c). **Samples of contracts for each provider.**
  - d). **Summary of benefits**
  - e). **Any demographics of enrollees for each county.**
9. **Statement that the HMO will abide by all the policies and procedures which are on file at the Department of Community Health from original application and which will be applicable to the requested counties.**