



STATE OF GEORGIA

APPLICATION FOR CERTIFICATION AS AN INDEPENDENT REVIEW ORGANIZATION

If there is a line or box next to an item, please respond to the item or provide the requested information using the line or box. For all other items, use additional sheets.

SECTION 1: GENERAL DESCRIPTION

Applicant:

Address 1:

Address 2:

City, County, State, and Zip Code:

Contact Person:

Telephone Number:

(A) Indicate the amount of the certification fee enclosed:

(Fee must be either certified bank check, certified cashiers check, or certified money order and made payable to State of Georgia; Fees are \$500 for a new independent review organization and \$250 for annual renewal)

SECTION 2: INDEPENDENT REVIEW PLAN

I. Provide a copy of the organization's independent review plan which includes the following components:

(A) a description of the elements of review which the independent review organization provides, including but not limited to:

(1) prospective review;

- (a) second opinion
- (b) hospital admission;
- (c) procedures;
- (d) courses of outpatient treatment;
- (e) choice of provider;

(2) concurrent review;

- (a) second opinion;
- (b) discharge planning;
- (c) readmission review;
- (d) continued stay authorization;

- (3) retrospective review; and
- (4) procedures for addressing experimental treatment.

(B) written procedures, in accordance with the Act for:

- (1) notification of the independent review organization's decisions provided to the eligible enrollee or the eligible enrollee's representative, the managed care entity, and the Planning Agency.
- (2) review, including:
 - (a) any form used during the review process;
 - (b) time frames that shall be met during the review;
- (3) contacting and receiving information from health care providers in accordance with this Rule relating to Independent Review Organization's Contact With and Receipt of Information from Health Care Providers; and
- (4) conducting on-site review by an independent review organization in accordance with this Rule relating to On-Site Review by the Independent Review Organization;

II. Screening Criteria

- (A) the screening criteria and review procedures to be used to determine medical necessity, medically necessary care, or medically necessary and appropriate care;
- (B) a certification signed by an authorized representative that screening criteria and review procedures to be applied in review determination are established with input from appropriate health care providers and approved by physicians;
- (C) procedures ensuring that the information regarding the reviewing physicians and providers is updated in accordance with the Rules relating to Revisions During Review Process and relating to Renewal of Certificate of Registration to ensure the independence of each health care provider or physician making review determinations; and
- (D) specific procedures which will be used to determine if a proposed treatment is experimental.
 - (1) Each independent review organization shall utilize written medically acceptable screening criteria and review procedures which are established and periodically evaluated and updated with appropriate involvement from physicians, including practicing physicians, and other health care providers. All determinations of medical necessity shall be made by the designated expert reviewer of the independent review organization. Such written screening criteria and review procedures shall be available for review, inspection, and copying as necessary by the Planning Agency in order for the Planning Agency to carry out the duties provided for under the Act.

III. Quality Assurance Mechanism

- (A) The independent review organization shall have and submit as a part of its application a written quality assurance mechanism in place that ensures the timeliness and quality of the reviews, the qualifications and independence of the expert reviewers, and the confidentiality of medical records and review materials.

IV. Confidentiality

- (A) Please provide copies of policies and any procedures ensuring compliance with all applicable state and federal laws and with the Rules to protect confidentiality of medical records and personal information. Policies should specifically address the following requirements:
- (1) An independent review organization, and all agents, contractors, and employees thereof, shall preserve the confidentiality of individual medical records and personal information to the extent required by law and by the doctor-patient relationship.
 - (2) An independent review organization may not disclose or publish individual medical records or other confidential information about an eligible enrollee without the prior written consent of the eligible enrollee or as otherwise required by law. An independent review organization may provide confidential information to a third party under contract or affiliated with the independent review organization for the sole purpose of performing or assisting with independent review. Information provided to third parties shall remain confidential.
 - (3) The independent review organization may not publish data which identifies a particular physician or health care provider, or particular health benefit plan or managed care entity, including any quality review studies or performance tracking data, without prior written notice to the involved provider, plan, or entity. This prohibition does not apply to internal systems or reports used by the independent review organization.
 - (4) All patient, physician, health care provider, and health benefit plan data shall be maintained by the independent review organization in a confidential manner which prevents unauthorized disclosure to third parties. Nothing in this chapter shall be construed to allow an independent review organization to take actions that violate a state or federal statute or regulation concerning confidentiality of eligible enrollee records.
 - (5) To assure confidentiality, an independent review organization must, when contacting a physician's or provider's office, or hospital, provide its certification number and the caller's name and professional qualifications to the provider or the provider's named independent review representative.
 - (6) The independent review organization's procedures shall specify that specific information exchanged for the purpose of conducting review will be considered confidential, be used by the independent review organization solely for the purposes of independent review, and be shared by the independent review organization with only those third parties who have authority to receive such information. The independent review organization's plan shall specify the procedures that are in place to assure confidentiality and that the independent review organization agrees to abide by any federal and state laws governing the issue of confidentiality. Summary data which does not provide sufficient information to allow identification of individual eligible enrollees, providers, or health benefit plans need not be considered confidential.
 - (7) Medical records and eligible enrollee-specific information shall be maintained by the independent review organization in a secure area with access limited to essential personnel only.
 - (8) Destruction of documents in the custody of the independent review organization that contain confidential eligible enrollee information or physician or health care provider financial data shall be by a method which ensures complete destruction of the information, when the organization determines that the information is no longer needed.

- (B) A certification signed by an authorized representative that all these rules and laws will be complied with should be enclosed.
- (C) Provide a certification signed by an authorized representative that the independent review organization will comply with the provisions of the Act and the Rules.

SECTION 3: PERSONNEL

I. Documentation

- (A) Provide a listing of the number, type, and minimum qualifications of the personnel either employed or under contract to perform the independent review.
- (B) Provide a copy of written procedures used to determine whether physicians or other health care providers utilized by the independent review organization describe the personnel and the accrediting policies and procedures of the applicant.
- (C) Provide a completed profile for each expert reviewer and provider as outlined in the Rules. The personnel of an independent review organization must conform to the following criteria:
 - (1) Personnel employed by or under contract with the independent review organization to perform independent review shall be appropriately trained and qualified and, if applicable, currently licensed, registered, or certified. Personnel who obtain information directly from a physician, dentist, or other health care provider, either orally or in writing, and who are not physicians or dentists, shall be nurses, physician assistants, or health care providers qualified to provide the service requested by the provider. This provision shall not be interpreted to require such qualifications for clerical or administrative personnel who do not perform independent review.
 - (2) The independent review organization is required to provide to the Planning Agency the number, type, and minimum qualifications of the personnel either employed or under contract to perform the independent review. Independent review organizations shall be required to adopt written procedures used to determine whether physicians or other health care providers utilized by the independent review organization are licensed, qualified, and appropriately trained, and must maintain records on such. In addition, the independent review organization must maintain complete profiles of any designated expert reviewer. Such profiles must include all information required by these Rules as outlined below relating to Information Required, and must be kept current.
 - (3) Independent review conducted by an independent review organization shall be under the direction of an expert reviewer in accordance with these Rules as outlined.
 - (4) Dental plans shall be independently reviewed by an expert reviewer who is a dentist currently licensed by a state licensing agency in the United States, and who meets all the other requirements for an expert reviewer.
 - (5) The independent review organization is required to provide to the department a copy of the applicant's selection policies and procedures, including:

- (a) a description of the categories and qualifications of persons employed or under contract to perform independent review;
 - (b) copies of policies and procedures for orientation and training of persons who perform independent review, including any expert reviewers, and evidence that the applicant meets any applicable provisions of this chapter relating to the qualifications of independent review organizations or the performance of independent reviews, including section (xvii) of these Rules.
- (6) The expert reviewers assigned by the independent review organizations must be physicians or other appropriate providers who meet the following minimum requirements:
- (a) Are experts in the treatment of the medical condition at issue and are knowledgeable about the recommended treatment through actual clinical experience;
 - (b) Hold a non-restricted license issued by a State of the United States and, for physicians, a current certification by a recognized American medical specialty board in the area or areas appropriate to the subject of review; and
 - (c) Have no history of disciplinary action or sanctions, including, but not limited to, loss of staff privileges or participation restriction, taken or pending by any hospital, government, or regulatory body.

II. Independent Review Organization Conflict of Interest Criteria

- (A) Neither the independent review organization nor any expert reviewer of the independent review organization may have any material professional, familial, or financial conflict of interest with any of the following:
- (1) A managed care plan or entity being reviewed;
 - (2) Any officer, director, or management employee of a managed care plan which is being reviewed;
 - (3) The physician, the physician's medical group, health care provider, or the independent practice association proposing a treatment under review;
 - (4) The institution at which a proposed treatment would be provided;
 - (5) The eligible enrollee or the eligible enrollee's representative; or
 - (6) The development or manufacture of the treatment proposed for the eligible enrollee whose treatment is under review.
- (B) As used in subsection (iv) above, the term "conflict of interest" shall not be interpreted to include a contract under which an academic medical center or other similar medical research center provides health care services to eligible enrollees of a managed care plan, except as subject to the requirement of line item D of subsection (iv) above; nor affiliations which are limited to staff privileges at a health care facility; or an expert reviewer's participation as a contracting plan provider where the expert is affiliated with an academic medical center or other similar medical research center that is acting as an independent review organization under the Act. An agreement to provide independent review for an eligible enrollee or managed care entity is not a conflict of interest under subsection (iv) of these Rules.

Section 4: BUSINESS ACTIVITIES

I. Provide biographical information about officers, directors and staff, including:

- (A) provide a description of any relationship, including but not limited to, any past, present or known future professional, personal, familial, financial, fiduciary, or contractual relationship which the for each director, officer, and executive of the applicant, any entity listed in this section of the Rules, and each expert reviewer conducting independent review has with:
- (1) a health benefit plan;
 - (2) a health maintenance organization;
 - (3) an insurer;
 - (4) a nonprofit health corporation;
 - (5) a payor;
 - (6) a health care provider; or
 - (7) a group representing any of the entities described by paragraphs (aa) through (gg) of this subsection; and
- (B) any relationship between the independent review organization and any affiliate or other organization in which a shareholder has 10 percent (10%) or more interest must be clearly identified.
- (C) describe the hours of operation which conform to the requirements of the Rule.
- (D) describe the Independent Review Organization's Telephone Access and how the organization can be reviewed during weekends and holidays.
- (1) An independent review organization shall have appropriate personnel reasonably available by telephone, in accordance with Eastern Standard or Eastern Daylight time, whichever is applicable, at least forty (40) hours per week during normal business hours, to discuss eligible enrollee's care and to allow response to telephone questions. The independent review organization must also allow reasonable telephone access on evenings and weekends.
 - (2) An independent review organization must have a telephone system capable of accepting or recording or providing instructions to incoming calls during other than normal business hours and shall respond to such calls not later than two working days of the later of the date on which the call was received or the date the details necessary to respond have been received from the caller. The independent review organization shall request the specific information needed from the caller not later than two working days after initial receipt of the call in question. In the event of an emergency, the independent review organization shall respond within the time appropriate to circumstances relating to the delivery of the services and the condition of the eligible enrollee.

II. Organizational Structure

- (A) please provide a copy of the most recent by-laws and articles of incorporation for the legal applicant. Provide evidence of the business entity's authorization from the Secretary of State to conduct business in Georgia.
- (B) describe the existing or proposed organization and provide a copy of the organizational chart. Explain the corporate structure and the manner in which all entities relate to the applicant.
- (C) please provide a chart showing contractual arrangements of the independent review system.
- (D) for an applicant that is publicly held, please provide the name of each stockholder or owner of more than five percent of any stock or options.

(E) please provide the name of any holder of bonds or notes of the applicant that exceed \$100,000.

(F) provide evidence of the applicant's authorization to conduct business in that state of Georgia.

(G) please provide the name and type of business of each corporation or other organization that the applicant controls or is affiliated with and the nature and extent of the affiliation or control. Also provide a chart or list clearly identifying the relationship between the applicant and any affiliates.

(H) please provide a list of any currently outstanding loans or contracts to provide services between the applicant and any affiliates or any officer of its affiliates.

(I) please provide the names of any predecessor affiliates and /or companies, including trade names.

SECTION 5: Financial Information

- I. Provide in writing the types of compensation arrangements made to physicians and providers in exchange for the provision of independent review, including any financial incentives for physicians and providers.
- II. Provide the percentage of the applicant's revenues that are anticipated to be derived from independent reviews conducted.

SECTION 6: Certification

- I. Provide any information related to out-of-state licensure, permit, certification or other similar business, and service of legal process. All applicants must furnish a copy of the certificate of registration, licensing, or other similar document from the domiciliary state's licensing authority. As a condition of being certified to conduct the business of independent review in this state, an independent review organization that maintains its principal offices or any portion of its books, records, or accounts outside this state must appoint and maintain a person in this state as attorney for service of process on whom all judicial and administrative process, notices, or demands may be served, and must notify the Planning Agency or its successor Agency of any change of appointment or appointee's address immediately.
- II. Individual designated to act on behalf of the owner and applicant:

Name:

Title:

Address 1:

Address 2:

City, State, and Zip Code:

Telephone Number: