HEALTH UTILIZATION MANAGEMENT v7.4

ORGANIZATIONAL STRUCTURE
CORE 1: Organizational Structure
CORE 2: Organization Documents

POLICIES AND PROCEDURES
CORE 3: Policy and Procedure Maintenance, Review and Approval

REGULATORY COMPLIANCE
CORE 4: Regulatory Compliance

INTER-DEPARTMENTAL COORDINATION
CORE 5: Inter-Departmental Coordination

OVERSIGHT OF DELEGATED FUNCTIONS
CORE 6-8: N/A
CORE 9: Delegation Management

MARKETING AND SALES COMMUNICATIONS
CORE 10: Review of Marketing and Sales Materials

BUSINESS RELATIONSHIPS
CORE 11: Written Business Agreements
CORE 12: Client Satisfaction

INFORMATION MANAGEMENT
CORE 13: Information Management
CORE 14: Business Continuity
CORE 15: Information Confidentiality and Security
CORE 16: Confidentiality of Individually-Identifiable Health Information

QUALITY MANAGEMENT
CORE 17: Quality Management Program
CORE 18: Quality Management Program Resources
CORE 19: Quality Management Program Requirements
CORE 20: Quality Management Committee
CORE 21: Quality Management Documentation
CORE 22: Quality Improvement Projects
CORE 23: Quality Improvement Project Requirements
CORE 24: Quality Improvement Projects: Consumer Organizations

STAFF QUALIFICATIONS
CORE 25: Job Descriptions
CORE 26: Staff Qualifications

STAFF MANAGEMENT
CORE 27: Staff Training Program
CORE 28: Staff Operational Tools and Support
CORE 29: Staff Assessment Program

CLINICAL STAFF CREDENTIALING & OVERSIGHT ROLE
CORE 30: Clinical Staff Credentialing
CORE 31: Senior Clinical Staff Requirements
CORE 32: Senior Clinical Staff Responsibilities
CORE 33: Financial Incentive Policy
CORE 34: Access to Services
CORE 35: Consumer Complaint Process

HEALTH CARE SYSTEM COORDINATION
CORE 36: Coordination with External Entities

CONSUMER PROTECTION AND EMPOWERMENT
CORE 37: Consumer Rights and Responsibilities
CORE 38: Consumer Safety Mechanism
CORE 39: Consumer Satisfaction
CORE 40: Health Literacy

REVIEW CRITERIA
HUM 1: Review Criteria Requirements

ACCESSIBILITY OF REVIEW SERVICES

HUM 2: Access to Review Staff
HUM 3: Review Service Communication and Time Frames
HUM 4: Review Service Disclosures

ON-SITE REVIEW SERVICES

HUM 5: On-Site Review Requirements
HUM 6: N/A

INITIAL SCREENING

HUM 7: Limitations in Use of Non-Clinical Staff
HUM 8: Pre-Review Screening Staff Oversight
HUM 9: Preview-Review Screening Non-Certifications

INITIAL CLINICAL REVIEW

HUM 10: Initial Clinical Reviewer Qualifications
HUM 11: Initial Clinical Reviewer Resources
HUM 12: Initial Clinical Reviewer Non-Certifications

PEER CLINICAL REVIEW

HUM 13: Peer Clinical Review Cases
HUM 14: Peer Clinical Reviewer Qualifications
HUM 15: Drug Utilization Management Reviewer Qualifications
HUM 16: Prospective, Concurrent and Retrospective Drug Utilization Management

PEER-TO-PEER CONVERSATION

HUM 17: Peer-to-Peer Conversation Availability
HUM 18: Peer-to-Peer Conversation Alternate

TIME FRAMES FOR INITIAL UM DECISION

HUM 19: Prospective Review Time Frames
HUM 20: Retrospective Review Time Frames
HUM 21: Concurrent Review Time Frames

NOTICE OF CERTIFICATION DECISIONS

HUM 22: Certification Decision Notice and Tracking
HUM 23: Continued Certification Decision Requirements

NOTICE OF NON-CERTIFICATION DECISIONS

HUM 24: Written Notice of Non-Certification Decisions and Rationale
HUM 25: Clinical Rationale for Non-Certification Requirements

UTILIZATION MANAGEMENT POLICY

HUM 26: Prospective Review Patient Safety
HUM 27: Reversal of Certification Determinations
HUM 28: Frequency of Continued Reviews

INFORMATION UPON WHICH UM IS CONDUCTED

HUM 29: Scope of Review Information
HUM 30: Prospective and Concurrent Review Determinations
HUM 31: Retrospective Review Determinations
HUM 32: Lack of Information Policy and Procedures

UTILIZATION MANAGEMENT APPEALS

HUM 33: Non-Certification Appeals Process
HUM 34: Appeals Process
HUM 35: Appeal Peer Reviewer Qualifications
HUM 36: Drug Utilization Management Appeals: Reviewer Qualifications
HUM 37: Reviewer Attestation Regarding Credentials and Knowledge
HUM 38: Expedited Appeal Process Time Frame
HUM 39: Standard Appeal Process Time Frame
HUM 40: Written Notice of Upheld Non-Certifications
HUM 41: Appeal Record Documentation

Re: New Regulatory Compliance Standard

Dear URAC Prospects and Clients,

As the nation's leading health care accreditor, URAC values patient care and safety first. When we discover an improvement opportunity that could enhance patient safety within our standards, we work quickly to incorporate the additional knowledge into our programs.

Therefore, URAC has introducing a new regulatory compliance Standard. Effective immediately, this new Standard will apply to all current, non-deemed applications, accreditations and certifications. Although we expect immediate compliance with this Standard, we will not be asking for any additional documentation at this time. As new versions of programs are released, this Standard will be built into the program requirements and documentation will be submitted on Desktop.

Attached you will find the Standard language (see Attachment A). As a requirement of this Standard, organizations must remain in good standing with any issuing body/agency for all permits, licenses, registrations and/or charters held by the organization. If at any time during the accreditation or certification cycle this Standard is identified as "Not Met," the finding(s) will be presented to the Accreditation Committee for review and final determination of status.

If you have any further questions, please reach out to Product Development Department at productdevelopment@urac.org.

Sincerely,
Jenn Richards, PharmD, JD, CSP
Product Development Principal
Email: productdevelopment@urac.org

Attachment A: URAC's New Regulatory Compliance Standard

Standard: Regulatory Compliance

The organization maintains compliance with applicable jurisdictional laws and regulations.

Regulatory Compliance

The organization:

a. Maintains compliance with applicable laws, regulations and requirements from any relevant jurisdictions