

## UTILIZATION AND QUALITY MANAGEMENT

SECTION	SUBJECT
<b>1</b>	<b>MANAGEMENT</b>
	1.0. Utilization Management Program Plan
	2.0. Notification Of Review Requirements
	3.0. Written Agreements With Institutional Providers
	4.0. Benefit Policy Decisions
	5.0. Concurrent Review Requirements
	6.0. Retrospective Reviews Related To DRG Validation
	7.0. Retrospective Review Requirements For Other Than DRG Validation
	8.0. Review Results
	9.0. Prepayment Review
	10.0. Case Management
	11.0. Confidentiality Applicable To All Utilization Management Activities, Including Recommendations And Findings
	12.0. Documentation
<b>2</b>	<b>PREAUTHORIZATIONS</b>
	1.0. General
	2.0. Inpatient Mental Health
<b>3</b>	<b>CONTRACTOR RELATIONSHIP WITH THE MILITARY HEALTH SYSTEM (MHS) NATIONAL QUALITY MONITORING CONTRACTOR (NQMC)</b>
<b>4</b>	<b>CLINICAL QUALITY MANAGEMENT PROGRAM (CQMP)</b>
	1.0. CQMP Plan
	2.0. Cqmp Structural And Functional Requirements
	3.0. Patient Safety Or Quality Issue Identification
	4.0. Definitions
	5.0. Improving The Quality Of Health Care By Reducing Medical Errors And Increasing Patient Safety
	6.0. Clinical Quality Management Annual Report
<b>ADDENDUM A</b>	<b>AN IMPORTANT MESSAGE FROM TRICARE</b>
<b>ADDENDUM B</b>	<b>HOSPITAL ISSUED NOTICES OF NONCOVERAGE</b>
<b>ADDENDUM C</b>	<b>HOSPITAL ADJUSTMENTS</b>

