

Table of Contents

A complete table of contents for each chapter is included at the beginning of the chapter.

Preface

Acknowledgments

Chapter 1 Managed Care Organizations in General

- § 1.01 Introduction
- § 1.02 Definition of “Health Maintenance Organization”
- § 1.03 HMO Alternatives and Variations
- § 1.04 Administrative Requirements for Group HMOs
- § 1.05 Financial Requirements
- § 1.06 Taxation of HMOs
- § 1.07 Genetic Discrimination Prohibitions

Chapter 2 Access to Providers

- § 2.01 Overview
- § 2.02 The Any-Willing-Provider Rule
- § 2.03 Point of Service
- § 2.04 Direct Access to Obstetrician/Gynecologist; Assignment as a Primary Care Physician
- § 2.05 Direct Access to Medical Specialists; Designation of Medical Specialists as Primary Care Providers
- § 2.06 Freedom of Choice
- § 2.07 Continuity of Care
- § 2.08 Standing Referrals
- § 2.09 Any Willing Class of Providers and Telemedicine/Telehealth

Chapter 3 Access to Coverage

- § 3.01 Overview
- § 3.02 Emergency Service Mandates
- § 3.03 Inpatient Care After Childbirth
- § 3.04 Inpatient Care Following a Mastectomy
- § 3.05 Clinical Trials
- § 3.06 Newborn/Dependent Coverage
- § 3.07 Mental Health Coverage Mandates

Chapter 4 Pharmaceutical Issues

- § 4.01 Overview
- § 4.02 Off-Label Drugs and Drug Formularies Under Managed Care
- § 4.03 Narrow Therapeutic Index Drug Laws
- § 4.04 Generic Therapeutic Substitutions by Pharmacist
- § 4.05 Mandatory Coverage of Prescription Contraceptives
- § 4.06 Requirements for Coverage of Drugs and Prostheses

Chapter 5 Grievances and Appeals

- § 5.01 Overview
- § 5.02 Definition of “Medical Necessity”
- § 5.03 Independent External Review
- § 5.04 HMO Liability

Chapter 6 Provider Contract Issues

- § 6.01 Overview
- § 6.02 Bans on the Use of Financial Incentives and Gag Clauses
- § 6.03 Prompt Payments to Providers
- § 6.04 Prohibitions on “Hold Harmless” Clauses
- § 6.05 Bans on “All Products” Clauses

Chapter 7 Provider Protections

- § 7.01 Overview
- § 7.02 Provider Termination
- § 7.03 Whistleblower Protections

Chapter 8 Consumer Assistance and Information

- § 8.01 Overview
- § 8.02 Ombudsman Programs
- § 8.03 Managed Care Report Cards
- § 8.04 Managed Care Plan Quality Assurance Program Mandates

Chapter 9 Licensing of Medical Directors and Utilization Review Directors

- § 9.01 Requirements for Medical Directors of HMOs

Chapter 10 Continuation and Conversion Coverage

- § 10.01 Overview
- § 10.02 Continuation and Conversion Requirements

Appendix A State HMO Acts**Glossary****Index**