

## 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. Reviewer qualifications and participation 4.0. Written Agreements With Institutional Providers 5.0. Benefit Policy Decisions 6.0. Concurrent Review Requirements 7.0. Retrospective Reviews Related To DRG Validation 8.0. Retrospective Review Requirements For Other Than DRG Validation 9.0. Review Results 10.0. Prepayment Review 11.0. Case Management 12.0. Confidentiality Applicable To All Utilization Management Activities, Including Recommendations And Findings 13.0. Documentation
<b>2</b>	<b>PREAUTHORIZATIONS</b> 1.0. General 2.0. Inpatient Mental Health 3.0. Effective And Expiration Dates
<b>3</b>	<b>CONTRACTOR RELATIONSHIP WITH THE MILITARY HEALTH SYSTEM (MHS) TRICARE QUALITY MONITORING CONTRACTOR (TQMC)</b> FIGURE 7-3-1 Box Inventory Document (Sample) FIGURE 7-3-2 Routine E-Mail (Sample)
<b>4</b>	<b>CLINICAL QUALITY MANAGEMENT PROGRAM (CQMP)</b> 1.0. Clinical Quality Management Program (CQMP) 2.0. CQMP Plan 3.0. CQMP Annual Report (CQMP AR) 4.0. Common Terms And Definitions 5.0. CQMP Structural And Functional Requirements 6.0. Patient Safety Or Quality Issue (QI) Identification 7.0. Agency For Healthcare Research And Quality (AHRQ) Patient Safety Indicators FIGURE 7-4-1 Timeline For Annual CQMP Plan And CQMP Report
<b>ADDENDUM A</b>	<b>AN IMPORTANT MESSAGE FROM TRICARE</b>
<b>ADDENDUM B</b>	<b>HOSPITAL ISSUED NOTICES OF NONCOVERAGE</b>

**TRICARE OPERATIONS MANUAL 6010.51-M, AUGUST 1, 2002**  
CHAPTER 7 - UTILIZATION AND QUALITY MANAGEMENT

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**ADDENDUM C   HOSPITAL ADJUSTMENTS**