LCB File No. R106-08

PROPOSED REGULATION OF THE COMMISSIONER OF INSURANCE

PROPOSED REGULATION CONCERNING HMO QUALITY AND PERFORMANCE INDICATORS

EXPLANATION – Matter in *italics* is new; matter in brackets formitted material is material to be omitted.

AUTHORITY: NRS 679B.130 and NRS 695C.130.

A REGULATION relating to health maintenance organizations; revising certain requirements relating to the quality and performance indicators to be included in an annual report; and other technical changes.

Section 1. NAC 695C.275 is hereby amended to read as follows:

NAC 695C.275 (NRS 439.200, 679B.130, 695C.210)

1. Each health maintenance organization which receives a certificate of authority shall [include in its annual report] submit[ted] to the [Commissioner] State Board of Health [pursuant to NRS 695C.210] the quality and performance indicators selected for each calendar year by the State Board of Health on or before November 1 of each year for the prior calendar year. The Board will select the indicators from the reporting set data domains set forth in Technical Specifications, Healthcare [Plan Employer] Effectiveness Data and Information Set (HEDIS), volume 2, in the form most recently published by the National Committee for Quality Assurance (NCQA), unless the Board gives notice that the most recent revision is not suitable for this State pursuant to subsection 2. Volume 2 of HEDIS may be obtained from the National Committee for Quality Assurance, NCQA, [Attention: EPJ, 2000 L Street, N.W., Suite 500, Washington, D.C. 20036.] Department 4038, Washington, DC 20042-4038 for the price of \$[260]320 plus \$[14]20 for shipping and handling or by ordering via telephone at (888) 275-7585 or on the Internet at http://www.ncqa.org/publications/>.

- 2. An organization shall include a copy of the most recent quality and performance indicators selected by the State Board of Health pursuant to subsection 1 in its annual report submitted to the Commissioner pursuant to NRS 695C.210.
- [2]3. The State Board of Health shall review each revision of the reporting set data domains set forth in *Technical Specifications, Healthcare [Plan Employer] Effectiveness Data and Information Set* (HEDIS), volume 2, to ensure their suitability for this State. If the Board determines that a revision is not suitable for this State, it will hold a public hearing to review its determination and give notice of that hearing within 6 months after the date of the publication of the revision. If, after the hearing, the Board does not revise its determination, the Board will, within 30 days after the hearing, give notice that the revision is not suitable for this State. If the Board does not give such notice, the revision becomes part of the reporting set data domains adopted by reference pursuant to subsection 1.