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### HEALTH MAINTENANCE ORGANIZATION SERVICE

- 1. Review Committee;
- Grant Review Procedures;
- General Counsel's Opinion of May 3, 1972.

# FINANCE AND PROJECT REVIEW WORK GROUP HMO COORDINATING COMMITTEE

May 31, 1972

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#### HEALTH MAINTENANCE ORGANIZATION SERVICE

#### Grant Review Procedures

The Health Maintenance Organization Service (HMOS) was established by the Secretary as an element of HSMHA in October after nearly a year of functioning both as a Task Force in the Office of the Secretary and as an Office in the Office of the Administrator, HSMHA.

The HMOS serves as lead agency within DHEW to promote the development of HMOs through technical and financial assistance, as required, in order to support achievement of the 1980 National Health Strategy goal of making the HMO option available to enroll 90 percent of the population, if they so desire. Specific objectives of the program are:

- . to convert Federal, State, local and private purchasers of health care to provide the HMO option
- . to provide a comprehensive range of professional and technical assistance services and financial support to HMOs in the planning, development and eventually in the initial operating stages
- to increase provider and consumer understanding of the HMO concept and operations and of their potential roles in HMO development.

To realize the goals of delivery of high quality comprehensive health care services with cost containment, the HMO must emphasize

- . coordination of resources and services
- . improved manpower utilization and productivity
- . effective medical records and information systems
- . approaches to increased accessibility of medical care.

The HMOS is a decentralized program providing for the needs of the grantees through our Regional Office staff. Central Office staff provides a resource to the field offices in the areas of technical assistance, consumer education and information, medical care and professional practices and project management and planning.

As an experimental program, the HMOS has funded 110 planning and development projects in 42 states and the District of Columbia. Until legislation is passed, grant funding will be limited to continuation of planning and development functions, with no new projects to be initiated and no funding to be allowed for payment for services in an operational EMO.

In the grant cycle presently under consideration, eligibility is limited by administrative decision to transition from planning to development or for continuation of development by:

- Any organization funded for planning and development in June 1971, as long as that organization is <u>not</u> operational as an HMO and is <u>not</u> asking for specific support to pay for health and medical services.
- 2. Any organization funded for planning in January 1972, with the same proviso.

The HMOS utilizes a multi-level procedure for review, evaluation and award of planning and development grants - Regional, central office, and interagency reviews are required before a selection is made. The review process is summarized in the attached chart.

It should be emphasized that the HMOS review process involves representatives from different agencies and from different programs within agencies. In all of the regional offices the following organizations representatives are involved in our review:

- A. RMPS
- B. SSA
- C. SRS
- D. HMOS

bome of the regional offices also involve representatives from other ESMHA programs and from NIH and OEO.

Heview and comment is obtained on all projects from the Comprehensive Health Planning "B" agency, or where there is no "B" agency, from the A agency. The HMOS has not made any award to date which is contrary to the area-wide or state-wide planning agency.

On May 24 and 25, the HMOS review committee will consider the applications submitted for review. Review and comments by the ad hoc HMO Committee of the RMPNAC and by the Finance and Project Reveiw Work Group of the HMOS Coordinating Committee will take place May 31, 1972. One copy of

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each application and 20 copies of the summary sheets will be made available to the RMPS. Members of the ad hoc HMO Committee will present the recommendations of the May 31 action to the RMPS National Advisory Council on June 5, 1972.

Final action on recommendations will be made by the Administrator, HSMHA and award notices issued.

Regional Office

Substantive Review Committee

eligibility and invites 1. Notifies grantee of to submit.

- ed to RO and reviewed by consisting of represen-Regional Office Cmte. tatives from: RMPS, SRS, SSA and most of the other some of the Regions HSMHA Programs. In from OEO and NIH are representatives Application submitt-
- CHP "B" or "A" agency. application & sent to Director are made on each the Regional Program HMOS Central Office. Recommendations by Review & comment by

the RMP National

ad hoc HMO Cmte, of

Advisory Council and

Review Work Group of the Finance & Project

the HMO Coordinating

brought before the consolidated to be 3. Recommendation

in attendance.

prise a part of the Office staff will com-Note: HMOS Central gain further insights Regional Office review committee to into the specific

> tinuation applications Hill-Burton, OPPE and RMPS, CHS, NCHSR&D, representatives from in depty by HMOS and Review of the con-

review & recommend specific applications action to be taken on 2. Teams, by Regions,

> of the RMP National Finance & Project Review Advisory Council; ad hoc HMO Committee Group of the HMO Coord. Committee

sists of representatives 1. The Work Group confrom:

OEO SOWH

HIN

Review and comment

SRS

by the actions taken. concerns are reinforced to insure that agency

> Council Advisory RMPS, National

Administrator,

sented by the ad hoc action will be predations for Council status and recommen-The HMO Program meeting of the Council. RMPNAC at the June 5 HMO committee of the

made and award 1. Final decisio notices issued.

policy nature to DHEW HMO Coordinating Cmte. Recommendations of α

review to insure that in the Central Office Staff will be involved Note: HMOS Regional tions are made clear all local considera-



### DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

# PUBLIC HEALTH SERVICE HEALTH SERVICES AND MENTAL HEALTH ADMINISTRATION ROCKVILLE, MARYLAND 20852

OFFICE OF THE ADMINISTRATOR

#### SAMPLE AWARD TRANSMITTAL LETTER

This award has been made under the authority of Section 910(c) of the Public Health Service Act as amended and constitutes a continuation of your present grant, No.\_\_\_\_\_\_, made under the authority of Section 314(e) of the same Act. The change was necessitated by program priority considerations within the Health Services and Mental Health Administration in the absence of specific Health Maintenance Organization legislation.

These funds, made available through the Regional Medical Programs Service, will support the project for this one funding period and will not be available in subsequent years. The funds are intended to support planning and development activities only; under no circumstances can they be used to support payment for services delivered.

As in your prior award, the Health Maintenance Organization Service will be responsible for the programmatic activities of the grant. Financial reports required for Grants Management are to be submitted to the Regional Medical Programs Service in Rockville, Maryland.

Fir. Gerald R. Riso
Deputy Administrator for
Development

OFFICE OF THE GENERAL COUNSEL

DATE: MAY 3 1972

FROM: Sidney Edelman DE/DNY
Assistant General Counsel for
Public Health

SUBJECT: Use of section 910(c), Public Health Service Act, to fund HMO planning and development

You have requested our advice with respect to the legal authority under section 910(c), Public Health Service Act, of

- (1) awarding grants for continued development support of MD's to whom grants and contracts have previously been made (under statutory authority which is not identified), and
- (2) awarding contracts to organizations (both profit and nonprofit) for the purpose of providing technical assistance in certain management areas to PMO's (some of which have previously received Federal assistance and some of which have not) which are in the planning and development stage.

This Office has previously advised, in the context of proposals for HNO planning and development, that, to the extent that 1/proposed HNO activities fall within the purposes of section 910(c), funds appropriated for Title IX would be available for their support. We have also advised that, in light of the language of the provision itself as well as the limitations imposed on the use of Title IX

The Secretary is authorized to support research, studies, investigations, training, and demonstrations designed to maximize the utilization of manpower in the delivery of health services.

Memo, GH (Edelman) to HS (Wilson), "PEO-Availability of Title IX funds", December 21, 1970 (DF #47); Homo, GH (Edelman) to Division of Eudget (Meyer), "PEO-Legal Authority to Establish HEO's under Title IX as compared with the Administrator's HEO Proposals", December 10, 1971 (DF #56).

<sup>1/</sup> Section 910(c) reads as follows:

funds in general by sections  $900(d)^{3/2}$  and section  $901(c)^{4/2}$  we considered section 910(c) of doubtful utility as a vehicle for the support of operational HWO activities.

As you have described the proposed activities under present consideration, they appear clearly to fall within the ambit of planning and development of EMO's, and do not involve actual operation of such organizations. Accordingly, to the extent that the proposal may reasonably be termed "demonstrations" and are "designed to maximize the utilization of manpower in the delivery of health services" (a matter which is primarily for administrative judgment), they appear authorized by section 910(c). Since that provision speaks of "support" by the Secretary of the specified activities, and since section 900(a) includes both grants and contracts in describing the purposes of Title IX, it is our opinion that either grants or contracts may be utilized for financial support of such activities.

cc: Dr. Harold Margulies "Mr. Hastings

"at any facility incident to research, training, or demonstration activities carried out with funds appropriated pursuant to this title, unless he has been referred to such facility by a practicing physician or, where appropriate, a practicing dentist".

5/ Memo, GC (Hastings) to HS (Riso), "Availability of RMP funds for support of operational HRO's," December 21, 1971 (DF #56); Memo, GH (Edelman) to HROS (MacLeod), "Funding sources for HRO projects", December 16, 1971 (DF #56).

<sup>3/</sup> Section 900(d) in pertinent part directs that the purposes of Title IX be accomplished "without interferring with the patterns, or the methods of financing, of patient care or professional practice . . ".

<sup>4/</sup> Section 901(c) prohibits the provision of hospital, medical or other care to a patient