

## I. EXECUTIVE SUMMARY

IPRO is one of the largest and most experienced health care assessment and quality improvement organizations in the United States, with nearly twenty years of experience in utilization, appeals and quality assurance reviews; data collection, abstraction and analysis; independent review of provider and health plan decisions; encounter data validation and HEDIS® Compliance Audits™<sup>1</sup>.

Over forty states and the District of Columbia have implemented External Appeals Programs to provide for independent reviews of health plan decisions to deny, reduce or terminate care. IPRO has been at the forefront of these programs, with a client base that includes both public and private clients, and has helped to set the standard for quality in the external review process. IPRO is currently certified as an Independent Review Organization in twelve states and the District of Columbia, and in June 2000 became one of the first organizations to receive accreditation as an External Review Organization by the American Accreditation HealthCare Commission/URAC.

A not-for-profit, tax-exempt 501 (c) (3) organization, IPRO has extensive medical review experience, serving as the federally-designated Medicare Peer Review Organization (PRO) for New York since 1989, and as the New York State Department of Health's Utilization Review and Quality Assurance Agent for Medicaid since 1987. In these capacities, IPRO has responsibility for more than 150,000 annual medical record reviews -- including medical necessity and appropriateness -- and for collecting and validating encounter data information submitted by nearly 50 managed care organizations.

IPRO has served as the External Quality Review Organization (EQRO) for Medicaid managed care in New York for the past twelve years, and also holds Medicaid EQRO oversight contracts with New Mexico and Pennsylvania. In this capacity, IPRO monitors the quality of care provided to Medicaid recipients, including the evaluation of timeliness, quality of care and access to services to ensure compliance with requirements. IPRO is currently conducting several statewide Medicare/Medicaid quality improvement projects involving hospitals and physicians across the state. IPRO also conducts focused studies and individual case review, conducts surveys and investigates complaints.

IPRO has also been licensed by the National Committee for Quality Assurance (NCQA) to conduct independent audits of managed care organizations' HEDIS performance measures based on the NCQA compliance audit standards since the onset of the audit program in 1997. IPRO has a strong understanding of HEDIS Compliance Audits according to the NCQA standards. During the past few years, IPRO has performed

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<sup>1</sup>HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA). NCQA HEDIS® Compliance Audit™ is a trademark of the National Committee for Quality Assurance (NCQA).

more than 600 HEDIS Compliance Audits and HEDIS-like audits for over 650 Medicaid, commercial and Medicare contractors.

In its role as the Quality Improvement Organization (QIO) for New York State, EQRO for New York, New Mexico and Pennsylvania, Utilization Review Agent for New York, HEDIS Compliance Auditor and as an Independent Review Organization on behalf of twelve states and the District of Columbia, IPRO has reviewed over 1.5 million medical records in the last ten years for medical necessity, appropriateness and the application of health plan coverage.

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