

Checklist for Submission of 2019 Utilization Review Plan Documentation

- ▶ Be sure to include your provider Medicaid ID# with your contact information including Name, Email and Phone/Fax#.
- ▶ A complete copy of 2019 Hospital UR Plan (If your 2018 UR Plan had recommendations, incorporate these changes into your 2019 plan at the time of submission.)
- ▶ A copy of JCAHO Accreditation with effective and expiration dates. This must be sent yearly with your UR Plan. If you do not have a JCAHO Accreditation, please indicate that in your submission.
- ▶ The Physician Attestation statement signed by all physician members if the UR Committee attesting to the fact he/she has no financial interest in any hospital.

*****Submission deadline is June 15th, 2019, any plans received after this date are considered late and will not be reviewed*****

Submit UR Plan information the following ways:

- ▶ Email: URPLANS@EQHS.ORG
- ▶ Fax: 855-440-3747
- ▶ Mail: eQHealth Solutions
5802 Benjamin Center Drive, Suite 105
Tampa, FL 3363