

**191—73.19(75GA,ch158) Data collection—quality evaluation.**

**73.19(1)** The HIPC shall conform to any pertinent reporting provisions of the community health management information system.

**73.19(2)** A HIPC shall conduct a qualitative review of plans offered through the HIPC in order to provide participating employers and employees an accurate comparative analysis of cost, quality, access, relative value, service, and customer satisfaction. The division may require HIPCs to cooperate in establishing a common basis and methodology for plan evaluation and customer education to facilitate informed choice between plans. A HIPC shall detail in its proposed business plan the methodologies and resources it intends to employ to satisfy this requirement. The HIPC must produce an annual report card on the performance of participating plans.

**73.19(3)** The division may establish data reporting standards to permit the objective evaluation of HIPCs and their impact on health care costs, quality and access.