

**HCC Name** 

Contact Person's Name

## Transmittal Checklist For Health Care Collaborative (HCC) Filings

Phone Number							
Email Email							
A. The following information is submitted for approval and compliance of service area change application filing requirements:							
		Service Area Change Application Filing	Item or Form	New or Replacement			
		28 TAC §13.423(b)(1) A description and a map with key and scale, showing both the currently approved service area and the proposed new service area as required by 28 TAC §13.413(e)(1)	○ Item	○ New			
			○ Form	○ Replacement			
		28 TAC §13.423(b)(2) A form of any new contracts or amendment of any existing contracts in the new area, as described in §13.413(e)(5)	○ Item	○ New			
			○ Form	Replacement			
		28 TAC §13.423(b)(3) network configuration information, as required by 28 TAC §13.413(e)(2)	○ Item	○ New			
			○ Form	○ Replacement			
		28 TAC §13.423(b)(4) Brief narrative description of the administrative arrangements and organizational	○ Item	○ New			
		charts as described in §13.413(c)(6) or any other information the HCC considers to be pertinent	○ Form	Replacement			
		28 TAC §13.423(b)(5) Biographical data sheets for any new management staff assigned to the new area	○ Item	○ New			
			○ Form	C Replacement			

Service	ce Area Change Application Filing	Item or Form	New or Replacement		
agreeme	§13.423(b)(6) Copies of leases, loans, ents, and contracts to be used in the d new area, including information described C §13.422(c)(2)(B)	○ Item	○ New ○ Replacement		
sources	§13.423(b)(7) Separate and combined of financing and financial projections as d in 28 TAC §13.413(d)(1) - (3)	○ Item	○ New		
reinsurar	§13.423(b)(8) Any new or amended nce agreements, insurance, or other n against insolvency, as specified in 28 TAC (d)(4)	○ Item	<ul><li>○ New</li><li>○ Replacement</li></ul>		
B. The following information is submitted for approval and compliance of post-issuance of certificate of authority (license) filing requirements:    Service Area Change Application Filing   Item or Form   New or Replacement					
28 TAC § service a	\$13.422(c)(2)(A) Description and map of the rea	○ Item	<ul><li>○ New</li><li>○ Replacement</li></ul>		
	§13.422(c)(2)(B) The form of all contracts d in 28 TAC §13.413(e)(5)	○ Item	○ New		

 $\bigcap$  Form

○ Item

○ Form

○ Item

○ Form

28 TAC §13.422(c)(2)(C) Any material change in size, composition, or control of the HCC

28 TAC §13.422(c)(2)(D) Proposed dividends

Replacement

Replacement

Replacement

○ New

○ New

	Service Area Change Application Filing	Item or Form	New or Replacement		
	28 TAC §13.422(c)(2)(E) New or revised loan agreements, or amendments to such agreements	○ Item	○ New		
		Form	○ Replacement		
	28 TAC §13.422(c)(2)(F) Any proposed material amendment to basic organizational documents	○ Item	○ New		
		○ Form	○ Replacement		
	28 TAC §13.422(c)(2)(G) Any material amendments to bylaws of the HCC	○ Item	○ New		
		○ Form	Replacement		
	28 TAC §13.422(c)(2)(H) Any name, or assumed name (relating to use of the term "HCC," Service Mark, Trademarks, d/b/a)	○ Item	○ New		
		○ Form	Replacement		
C. The following information is submitted for information and compliance of post-issuance of certificate of authority (license) filing requirements:					
	Service Area Change Application Filing	Item or Form	New or Replacement		
	28 TAC §13.422(c)(3)(A) List of officers and directors and biographical data sheet	○ Item	○ New		
		Form			
		Tomi	C Replacement		
	28 TAC §13.422(c)(3)(B) Change in the physical address of the books and records	( Item	<ul><li>Replacement</li><li>New</li></ul>		
		○ Item	○ New		

	Service Area Change Application Filing	Item or Form	New or Replacement
	28 TAC §13.422(c)(3)(D) The form of any new contract or subcontracts or any substantive changes to previously filed forms of all contracts between the HCC and any physicians, delegated entities, delegated networks, other health care providers, insurers, group hospital service corporation, and	○ Item	○ New
	HMO.	○ Form	Replacement
	28 TAC §13.422(c)(3)(E) Any insurance contracts or amendments to such contracts, guarantees, or other protection against insolvency	○ Item	○ New
		○ Form	C Replacement
	28 TAC §13.422(c)(3)(F) any change in the affiliate chart	○ Item	○ New
		○ Form	○ Replacement
	28 TAC §13.422(c)(3)(G) Modifications to any types of compensation arrangements including any financial incentives for physicians and providers	○ Item	○ New
		○ Form	○ Replacement
	28 TAC §13.422(c)(3)(H) Any material change in network configuration	○ Item	○ New
		○ Form	○ Replacement
	28 TAC §13.422(c)(3)(I) A description of the quality assurance and quality improvement program	○ Item	○ New
		○ Form	C Replacement

**NOTE:** Please file a **red lined** copy denoting all changes as well as a clean copy of all previously filed documents.